

Congregation B'nai Tzedek Sisterhood Contribution Request Form

Section Part A – Information to be filled out by Applicant

Name of Organization, Agency or Synagogue Committee:

Address: _____

Contact
Person(s): _____ Title: _____

Telephone: _____ (Day) _____ (Evening)

E-mail address: _____

● Specific purpose/use for requested contribution:

● If for purposes outside of the Synagogue, is the Organization or Agency qualified under Section 501(c)(3) of the Internal Revenue Code? Yes _____ No _____

● If yes, you must attach a copy of the letter from the Internal Revenue Service confirming the qualification of the Organization under Section 501(c)(3) of the Internal Revenue Code.

● Amount of contribution requested: \$ _____ (attach cost proposal/budget) If the Sisterhood is unable to fund the entire amount requested, what is the minimum contribution that would enable your organization or Synagogue committee to further its goals? \$ _____

● How will this contribution further the goals of Congregation B'nai Tzedek and the Jewish community as a whole?

● Would you like to make a presentation to the Sisterhood Contributions Committee in support of your request for a contribution to your organization, agency or Synagogue Committee? Yes _____ No _____

Is a decision by a specific date needed: Yes _____ No _____ If yes, when? _____

Request Submitted By: _____

Date Submitted: _____

Telephone number: _____

E-mail address: _____

Section B – Board Approval t[must be filled out and signed by Synagogue Board Member prior to submission for all requests for funds for Synagogue Purposes]

Signature of Synagogue Executive Board Approval: _____

Date: _____

Print Name: _____

Print Board Position: _____

Section C – FOR INTERNAL USE ONLY

Date Reviewed by Committee: _____

Recommendation:_____

Date of Sisterhood Board Review: _____

Dispensation: _____

Date of Grant Letter: _____

Revised 6/2016