



DONATION REQUEST FORM

Submit to local322@ncsrcc.org

DATE: _____

NAME: _____

PHONE#: _____

MEMBER ID#: _____

(member must be in Good Standing)

ADDRESS: _____

(Street Address, City, State & Zip)

Are you seeking a monetary donation or volunteer effort request? _____

MONETARY AMOUNT: _____ (**Recipients granted a donation of \$600 or more will be sent a 1099 to report the donation to the IRS.**)

REASON FOR REQUEST (If requesting a monetary donation, please explain in general what funds will be used for. If this is a volunteer effort request, please include details of what work you are requesting help).

Requests will be submitted to the Local 322 Helping Hands Committee for consideration at their next scheduled meeting (2nd Tuesday each month at 5:00 p.m.). Their recommendation will then be brought to the following week's general membership meeting for final approval (3rd Tuesday each month at 6:00 p.m.)

I, _____, truthfully affirm that the above statements are a true and accurate. Any evidence found that is misleading or fraud of the Local 322 Helping Hands Fund may be considered a violation of the UBC Constitution.

PRINT NAME

SIGNATURE