



## Carrabassett Valley Outdoor Association REQUEST FOR DONATION FORM

Name of Organization: \_\_\_\_\_

Name and Location of Project: \_\_\_\_\_

Date(s) of Project: \_\_\_\_\_ Name of Project \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Amount Requested: \_\_\_\_\_ Total Cost of Project: \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

CVOA's mission statement is to "Promote the conservation of our natural resources and the creation of recreational opportunities in our region." How does this project further our mission? Please attach your response.

How will the Funds be used? \_\_\_\_\_

\_\_\_\_\_

What is the Expected Result of the Project? \_\_\_\_\_

Who will Benefit From this Project? \_\_\_\_\_

Requests for donations will be reviewed by the CVOA Finance Committee and a response will be given within 45 days of the initial request. Any request in excess of \$250 will be reviewed and voted on by the CVOA Board of Directors at their next meeting (quarterly, if not before). CVOA requests a Final Project Report within 30 days of the end date of the activity that the funds supported. The form is attached.

If there are any questions, please contact the CVOA Treasurer at [cvoa.treasurership@gmail.com](mailto:cvoa.treasurership@gmail.com). Please return this form to CVOA Treasurer, Valley Crossing #6, Carrabassett Valley, Maine 04947.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_

Adopted June 23, 2019