Revised: 11/2021(Director of Engagement)

REQUEST FOR FUNDS FROM OST SISTERHOOD

Please complete this request form and submit it in a sealed envelope to the Sisterhood mailbox in the OST office. This form must be submitted at least 30 days prior to needing the funds. Please contact Sisterhood President for further assistance at sisterhood@ohefsholom.org.

Title of Request:	Requesting Committee or Personnel:		
Submitted by:	Title:		
Is this request new, or h previously? New: I			d for this project/activity l: \$
Briefly describe what the	ne money is to be u	sed for (attach separa	ate sheets if necessary):
If the entire project cost TOTAL COST of this (Attach an itemized breeze)	project/activity? \$_eakdown of the cos	sts included in the to	tal.)
Have you received estir	nates from vendors	s? If so, <i>please attac</i>	h a copy of each.
Vendo	rs	Amount	
			_
What other funding sou	rces do you have o	or have you requested	? List below.
Source	e	Amount	Confirmed?
How will this project/ac involved, have they and support?			aff?) If OST staff is to b pproval given for their
What are the expected s	start and finish date	es for this project/acti	ivity?
Signature		Date Submitted	