



2810 Paa Street, Suite 3, Honolulu, HI 96819

For Internal Use Only:

Event #: _____

Board Approval Date: _____

Project

Fundraiser

PROJECT / FUNDRAISER APPLICATION FORM

(for use of Wahine Leaders of Hawaii members only)

1. Project MUST meet WLH Purpose and Mission. Project must benefit another 501(c)(3) or educational organization. A copy of the organization's 501(c)(3) IRS Letter of Determination, together with a Certificate of Vendor Compliance from the IRS and the State of Hawaii is to be submitted with this application.
2. Project/Fundraiser application to be submitted at least 90 days prior to the project and must be APPROVED prior to the start of the event.
3. Project/Fundraiser application must be submitted at least 14 days prior to Board Meeting to be included on the Agenda of that Board Meeting. You will be required to appear before the Board to present your project/fundraiser for approval.
4. Follow additional "Instructions for Application of Service Projects" (separate document).
5. If funding is appropriated for your project you will be required to keep a detailed accounting of how the money was spent, together with all receipts.
6. Within 30 days after the project you will be required to present a report and accounting (with receipts) of the project.

NAME OF PROJECT / FUNDRAISER: _____ DATE OF EVENT: _____

Description of this Project/Fundraiser to be completed below)

MEMBER'S NAME: _____ WLS / PSI9 class #: _____

Phone #: _____ E-Mail: _____

Project Chairman (if other than member): _____ Phone #: _____

PROJECT LOCATION (address required): _____

Name of 501(c)(3) Benefiting: _____ Federal ID Number: _____

How Does this Project Serve WLH Purpose and Mission:

Expected Results:

Amount Requested: _____

Included with this form:

IRS Letter of Determination

Cert. Of Vendor Compliance

For Internal Use Only:

Name of Person Presenting to Board: _____

Date of Presentation to the Board: _____

Status (Approved/Denied): _____

Amount Approved: _____

Date of Decision: _____

NAME OF PROJECT / FUNDRAISER: _____ DATE OF EVENT: _____

Describe Scope of Work/Details of Event:

Signed:

Date: