**A close up of a logo

Description generated with very high confidence**

**Foundation Request for Funds**

The mission of Sedalia Park Foundation Inc. is to enrich the educational experience of our students, support our faculty and staff, and improve our community at Sedalia Park Elementary.

Anyone requesting funds from Sedalia Park Foundation Inc. is asked to complete this form so we can ensure funds are utilized for the betterment of our community.

Requests should be to pay for events, facilities or equipment outside the normal school budget, to advance the education of our children. Events funded by the Sedalia Park Foundation Inc. should promote a friendly and social atmosphere within and between all pupils, staff, parents, and the local community.

Requests for funds will be reviewed at the next monthly meeting following their submission and a check will be issued to the requester if approved.

Requester: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Request date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Requester email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Requester phone #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Amount Requested: $\_\_\_\_\_\_\_\_\_\_

Person, Company, or Organization to whom a check should be made out:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please describe your request in detail (why there is a need, how money will be spent, how students will benefit):

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Have you confirmed with the school Bookkeeper or Principal that funds are not available through County or other available resources to assist with your request? Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_

Signature of School Bookkeeper or Principal \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**Please attach at least three competitive bids, quotes, or prices for the purchase.**

**after funds are spent, a receipt must be provided to the foundation**.

**Submit completed form and price quotes via email to spcefinfo@gmail.com.**

\*\*\*\*\*\* Do not complete below this line. – For Foundation Use Only \*\*\*\*\*\*

Approved: Yes\_\_\_\_\_ No \_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_ Check# \_\_\_\_\_\_\_\_\_\_

If no, reason why request was denied: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Foundation President signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Foundation Treasurer signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_