

St. Andrew's United Church

Memorial & Endowment Committee

Fund Request Form

Name of Fund: _____ Amount Requested: _____

Committee making request: _____

Committee Contact Name: _____ Phone # _____

Email: _____

Purpose of Request: (Please attached supporting data if appropriate)

Signature of Committee Rep: _____ Date: _____

Approved by M&E Comm. (Under \$5000): _____ Date: _____

Approved by F&P Comm. (Over \$5000): _____ Date: _____

Please note that for large requests, a separate Task Committee of representative groups may have to be struck to arrive at a recommendation.