



# SABER COMMUNITY SPOUSES CLUB COMMUNITY OUTREACH REQUEST FORM

Organization: \_\_\_\_\_ POC: \_\_\_\_\_

Location: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Requested Amount: \$ \_\_\_\_\_ Date Funds Needed By: \_\_\_\_\_

Organization to which check should be made payable: \_\_\_\_\_

Funds are to be used for (be as detailed as possible): \_\_\_\_\_

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

Total Cost of Project: \$ \_\_\_\_\_ Number of Individuals who will benefit from these funds: \_\_\_\_\_

Fundraisers to Date (event(s) and amount(s) raised): \_\_\_\_\_

Funds received from other organizations (source(s) and amount(s)): \_\_\_\_\_

\_\_\_\_\_

*Proper authorization must be obtained from the requesting organization on each request. If the request is from an MWR organization: the MWR Commander or Deputy Commander's signature is required. All other requests must carry the authorized signature of the corresponding Unit or Clinic Commander, Principal, or President.*

\_\_\_\_\_  
Name Signature Title

\_\_\_\_\_  
Date

**RETURN THIS FORM TO:**

Community Outreach Treasurer – Chelsey Johnson at [communityoutreach.sabercsc@gmail.com](mailto:communityoutreach.sabercsc@gmail.com)

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**For Official Use Only**

Approved/Denied      Voucher #:      Check #:      Amount Approved: \$

Allocated/Unallocated      Date:



## SABER COMMUNITY SPOUSES CLUB COMMUNITY OUTREACH REQUEST FORM

Thank you for contacting us regarding a financial request for your organization. One of the pillars of the Sabler Community Spouses Club (SCSC) is the ability to support other organizations and programs that empower and enrich the lives of our military and base community. To best serve you and/or your group, we ask that you review and follow the guidelines listed below.

### *Requirements for Completing the Form*

1. Please fill out the form as completely as possible and submit additional pages as necessary to support your responses.
2. Complete one form per donation request. Forms that include donation requests for multiple, separate functions/purchases/etc. will be returned for resubmission.
3. Request forms must include the correct authorized signature. Requests without the proper authorized signature will be returned for resubmission.
  - a. For MWR organizations, this is the MWR Commander or Deputy Commander.
  - b. All other organizations must have the corresponding Unit or Clinic Commander, Principal, or President.
  - c. Requests from teachers must be signed by the Principal and they must have requested money from the corresponding PTA.
  - d. Requests from the Boy Scouts or Girl Scouts must be signed by the Troop Leader.
4. Only one request may be open for an organization at a time. Additional requests may be considered after final receipts are submitted for the current request.
5. Submit your request according to the calendar below to ensure sufficient time for the Board to review and ask you questions ahead of when you need funds.

### *Tips for Submitting Requests*

Consider the following questions when writing your donation request to increase chances of approval, and plan ahead using the calendar of SCSC meetings below to make sure your request is reviewed in time for your needs.

1. How will the requested funding benefit the community?
2. Is the request a necessity or a nicety?
3. Are there long-term, lasting benefits of this donation? (For example, equipment that will not only be used by current members but new ones for the years to come.)
4. Has the requesting organization made an effort to raise funds on its own?
5. Have funds been received from other organizations?
6. How many people will benefit from this donation? (Donations resulting in a wide and/or diverse impact are typically prioritized.)
7. Will this donation represent the sole source for an organization's operating budget?
8. Does the request support educational growth, promote wellness, and/or foster the base community in same way?

Please email additional questions to: [communityoutreach.sabercsc@gmail.com](mailto:communityoutreach.sabercsc@gmail.com)

Meeting Date	Request Deadline	Meeting Date	Request Deadline	Meeting Date	Request Deadline
January 6 <sup>th</sup> 2021	December 31 <sup>st</sup> 2020	February 3 <sup>rd</sup> 2021	January 28 <sup>th</sup> 2021	March 3 <sup>rd</sup> 2021	February 25 <sup>th</sup> 2021
April 7 <sup>th</sup> 2021	April 1 <sup>st</sup> 2021	May 5 <sup>th</sup> 2021	April 29 <sup>th</sup> 2021	August 4 <sup>th</sup> 2021	July 29 <sup>th</sup> 2021
September 1 <sup>st</sup> 2021	August 26 <sup>th</sup> 2021	October 6 <sup>th</sup> 2021	September 30 <sup>th</sup> 2021	November 3 <sup>rd</sup> 2021	October 28 <sup>th</sup> 2021
December 1 <sup>st</sup> 2021	November 25 <sup>th</sup> 2021				