

Mary Bridge Brigade

Seed Money Request Form

Complete this form and submit it along with the Guild Event Information Form a minimum of **30 days** prior your proposed fundraising event.
(See Fundraising Policies and Procedures.)

INCOME: BUDGET ACTUAL

Donations _____
Sales _____
Services _____
Other _____
Other _____
Total Income: _____

EXPENSES: BUDGET ACTUAL

Advertising _____
Materials _____
Products _____
Services _____
Other _____
Other _____
Total Expenses: _____

NET PROJECTED INCOME: _____ **ACTUAL PROJECTED INCOME:** _____
(current year) (previous year)

PROJECTED DEFICIT: _____ **SEED MONEY REQUIRED:** _____

Date needed by: _____

VERIFICATION:

The potential income sources and expenses have been carefully considered.

Guild President/Event Chair Signature

Date

All Guild events must be approved by the Mary Bridge Brigade Executive Committee.

When the event has been approved, the Guild Event Chair will be contacted.

Questions? Contact Mary Bridge Brigade Office at 253-403-1427
or marybridgebrigade@multicare.org

Approval Date _____