



# FUNDING REQUEST

<b>Name</b>	
<b>Email</b>	
<b>Phone</b>	
<b>Organization Requesting Funding</b>	
<b>Date Required (If applicable)</b>	
<b>Purpose for the funds</b>	
<b>How these funds will support DSUMC's mission</b>	

**Please return completed form by April 15, 2020 to:**

Chairman

[chairman@dswildgamedinner.com](mailto:chairman@dswildgamedinner.com)

or by mail: D.S. Wild Game Dinner P.O. Box 99 Dripping Springs, TX 78620

