

**PROJECT FUNDING REQUEST  
TENNESSEE DIVISION  
SONS OF CONFEDERATE VETERANS**

CAMP NAME: \_\_\_\_\_ CAMP # : \_\_\_\_\_ DATE OF REQUEST: \_\_\_\_\_

CAMP CMDR NAME: \_\_\_\_\_  
(Print) (Signature)

CAMP ADJ. NAME: \_\_\_\_\_  
(Print) (Signature)

BRIEF DESCRIPTION OF PROJECT: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DATE PROJECT IS TO BE COMPLETED: \_\_\_\_\_

PLEASE LIST ALL OTHER SOURCES OF FUNDING: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

AMOUNT RAISED TO DATE: \$ \_\_\_\_\_ AMOUNT REQUESTED: \$ \_\_\_\_\_

BRIGADE COMMANDER RECOMMENDATION: APPROVED \_\_\_\_\_ DISAPPROVED \_\_\_\_\_

COMMENTS: \_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_ DATE: \_\_\_\_\_

DIVISION EXECUTIVE COMMITTEE ACTION: APPROVED \_\_\_\_\_ DISAPPROVED \_\_\_\_\_

AMOUNT OF DIVISION FUNDING APPROVED: \_\_\_\_\_

EXECUTIVE COMMITTEE COMMENTS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DIVISION COMMANDER AUTHORIZATION: \_\_\_\_\_ DATE: \_\_\_\_\_  
(Signature)

DIVISION ADJUTANT: \_\_\_\_\_ \$ \_\_\_\_\_  
Date paid check number amount signature