

**REQUEST FOR FUNDS
FROM ENDOWMENT TRUST**

Date: _____

Applicant: _____

Use of Funds (Project): _____

Benefit to UUSS: _____

Total Cost of Project: _____

Amount Requested: _____

Funds Required by: _____

Applicant's Contact: _____

Name

Email

Signed: _____

Upon completion, please submit this to endowment@uuss.org or deliver it to the UUSS Office, Attn: Endowment Trust Chair