FUND REQUEST

If you wish to apply for fund allocation please fill out the form below and send it to theTrustees at:Little Extras Trustees, PO Box 444, St. Peter Port. GY1 3ZS

The Trustees meet on the last Wednesday of each month except August and December

Item request:
Reason for request: (if more room is needed continue details overleaf)
Cost:
This figure is: (Please tick)
Actual cost
Approximate cost
Who will benefit from this request? (Please tick)
Staff Service Users:
Have any funds been specially raised / donated? Yes No If yes please give details:
Requested by
Job title
Department or ward
Contact tel number & ext. Date
Email