Attachment B

## **REQUEST FORM FOR NEW FUNDING**

## SONOMA COUNTY RECOMMENDED BUDGET

Hearings Begin on June 11, 2019

FY 2019-20 BUDGET REQUEST

## DUE BY <u>4/15/2019</u> PLEASE SEND TO CAO-BUDGET@SONOMA-COUNTY.ORG

Name of organization requesting the funding

Legal structure of requesting organization

## **DESCRIPTION OF FUNDING REQUESTED**

Include as much information as possible, attach additional sheets if necessary

What will the funds be used for?

What is the amount of the funding request?

Is the requested funding one-time or on-going?

How will this funding support the County's mandated or discretionary services?

Which County Department provides these programs, and have you contacted them regarding this request?

Why is funding from the County needed?

Is matching funding available? Provide details.

Whom should the county contact for additional information?

**Contact Name:** 

Contact Information (please include phone and email):

**Requester Signature** 

Date Received by Clerk of the Board