2020 COVID-19 Community Outreach Grant Local Board RIAC Request Form for Issues Funding

Please fill out this request form completely and with as much detail as possible. After the request form has been signed by all parties,

submit the request via mail or email to:

Georgia REALTORS®

Will Daane

6065 Barfield Road, Ste. 200 Atlanta, GA 30328 wdaane@garealtor.com Advocacy Outreach Manager

Da	te Submitted:	(Due April 30)	Name of Association:	
Am	ount Requested:	(Up to \$1,500)		
Ass	sociation Executive:	Telephone:		E-mail:
Во	ard President:	Telephone:		E-mail:
RP	AC Chairperson:	Telephone:		E-mail:
1.	Which initiative, effort, or organization is you [Please provide available literature, news a		0 11	rant?
2.	Why has your association chosen this spe	cific initiative, effo	ort, or organization to suppo	ort with this funding?
3.	Has your association been involved with th	is initiative, effort,	or organization? If so, ho	w?
4.	List other organizations that are involved w	ith this initiative, e	effort, or organization?	
5.	Will the RIAC funds be sent directly to a pa	artnering effort/org	anization, or to your assoc	ciation?
6.	How will the funds be used for the effort/ini	itiative? Provide a	a timeline for use, if availab	ole.
7.	Please provide any other information that y	ou feel would ass	sist the committee in makin	g their decision.

	ndersigned confirm that the information con	tained in this application is accurate to the
	ndersigned confirm that the information cone funding will be used as outlined above.	tained in this application is accurate to the
est of their knowledge, and that th	e funding will be used as outlined above.	
est of their knowledge, and that th		tained in this application is accurate to the Signature of Local Association Executive
pest of their knowledge, and that the	e funding will be used as outlined above.	
est of their knowledge, and that the	e funding will be used as outlined above.	
est of their knowledge, and that th	e funding will be used as outlined above.	
est of their knowledge, and that the signature of Local Board President RIAC check should be mailed to:	e funding will be used as outlined above.	
est of their knowledge, and that the signature of Local Board President RIAC check should be mailed to: OR GAR STAFF USE ONLY	e funding will be used as outlined above. Signature of Local RPAC Chairperson	Signature of Local Association Executive
Signature of Local Board President RIAC check should be mailed to: FOR GAR STAFF USE ONLY Date Received:	Signature of Local RPAC Chairperson Date Approved:	Signature of Local Association Executive Amount Approved:
	e funding will be used as outlined above. Signature of Local RPAC Chairperson	Signature of Local Association Executive