



## **THIRD DISTRICT** **Matching Funds Request Form**

Date: \_\_\_\_\_ League: \_\_\_\_\_ Amount: \_\_\_\_\_

### **Charity Information**

Name: \_\_\_\_\_

Contact: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_

Application Filed By: \_\_\_\_\_

*Please attach press release to this form and complete all the needed information. Each league can request up to \$1000 from Fall Convention to Fall Convention, yearly.*

*Requests for funds MUST include:*

- 1. Press release – preferably photo.*
- 2. Press release must mention, “This donation will be matched by Wisconsin Tavern League Foundation or 3<sup>rd</sup> District Tavern League.*
- 3. Counties seeking funds must sell the 3<sup>rd</sup> District raffle tickets and participate in fundraisers.*

