

## **Committee Chair Funding Application Form**

R2 Committee Chair Funding Application For Assembly to be held: \_\_\_\_\_\_ Application must be received a minimum of 45 days prior to the assembly.

Intergroup Name		Intergroup Number:
Street or P.O.Box Address		
City	State	Zip Code
Telephone	Email address	
Intergroup Contact:		
Contact Phone #:	Contact Er	mail address
Region 2 - Treasurer 4733 Torrance Blvd., F Applications may be als Intergroup Information * Intergroup's mailing addre	o be emailed to: trea	surer@oar2.org
• • •		
* Intergroup last applied for	IFAP Funding for (Asser	mbly month/year) ing for (Assembly month/year)
The Intergroup is appl enter requested inform		ttee Chair funding due to (check all that apply and
Intergroup is sending Committee Chair(s).	Intergroup Reps. Numb	per of Reps being sent to Assembly is Do not include
	Committee Chair. R2 C	Committee Name ving in Chair position since (Day/month)
Intergroup is sending R2 Chair's Name:	Committee Chair. R2 C	Committee Name ving in Chair position since (Day/month)
Financial hardship on	Intergroup's 7th Traditio	n/Prudent

Per R2 P&P, Article VIII, Item B, no. 7: R2 shall allocate or budget up to \$200.00 per committee chair, per assembly, to ensure attendance at R2 assemblies. Requests for funding to be reviewed and approved by the R2 Board.