

Retired Educators Association of Minnesota

A nonprofit Corporation affiliated with the
NRTA A division of **AARP**

GUIDELINES FOR UNIT PROJECT MONEY

There are circumstances in which units may wish to assist with a project in their community but lack the funds to do so on their own. With that idea in mind, REAM has allowed for a small amount of money to help local units with such endeavors.

The money should be used for a project which has value in the local area of the unit and will show the contribution and continued participation of the Retired Educators to the area.

The total annual REAM budget allocation for all projects will be \$1200. No unit may request more than \$300 each year. Each year first time project requests will receive priority.

Application forms may be secured from the REAM Secretary or Division Directors. All applications must be received by the REAM Secretary no later than the first week in June which is one week before the last REAM State Board meeting of that fiscal year.

Applications will be screened by the REAM State Board of Directors as they are received throughout the year. Approved applications will receive their project allocations no later than June 30th.

Currently the REAM Secretary is:

MS KARNA BREWER
431 FREMONT STREET
ANOKA MN 55303-2139

Revised 06/15/2016

Application Form for REAM Unit Project Funds

This application must be postmarked by the first week in **June** and sent to:
MS KARNA BREWER, REAM SEC.
431 FREMONT STREET
ANOKA, MN 55303-2139

1. REAM Local Unit name _____

2. Purpose for the money _____

(Additional comments may be continued on the back)

3. Approximate cost of the project _____

4. Description of the project _____

(Additional comments may be continued on the back)

5. Location of the project _____

(Additional comments may be continued on the back)

6. How many unit members will work on the project? _____

7. Are there any other groups involved? _____ If so, who are they and what are they contributing? _____

8. Are you raising funds in any other way? _____ If so, explain _____

9. How much money are you requesting? _____

10. Person making the application:

Name _____

Address (include City, State and zip) _____

Phone (____) - _____ - _____

11. Name and Address of **Local REAM Unit Treasurer** (funds are released to units only)

Name _____

Address _____

Phone: (____) - _____ - _____