DIRECT ASSISTANCE REQUEST FORM

The request for this direct assistance for youth and adults of families in the Coastal Carolina Council will be submitted by registered leaders and approved by the Scout Executive or his designee. Names of youth and adults applying for Direct Assistance for registration fees, uniforms, camperships or program materials will be submitted, reviewed for approval and processed, but otherwise kept confidential.

Date	
Unit Type & Number	District
Name	Phone
Assistance needed: \$	For:
Amount and Type of Assistance. Example 2015	nple: Registration Fees, Uniform, Books, Camp Fees, etc
Does this unit participate in	CCC Popcorn sales?
Has your unit done any othe	r fund raising?
Date District Name Phone Assistance needed: \$ For: Amount and Type of Assistance. Example: Registration Fees, Uniform, Books, Camp Fees, etc Does this unit participate in CCC Popcorn sales? Does this unit done any other fund raising?	
•	Number District Phone reded: \$For: Porticipate in CCC Popcorn sales? t done any other fund raising? ation: e by s Signature r: Date
Approved By:	Date
Account to be charged:	
Charge Date	P.O. #