

**WSW Area  
Financial Proposal Form**

**Date:** \_\_\_\_\_

**Name of Member:** \_\_\_\_\_

**This Proposal requesting funds from the WSW ASC is  
submitted on behalf of \_\_\_\_\_ Subcommittee.**

**Amount:** \_\_\_\_\_

**PURPOSE:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Favor:** \_\_\_\_\_ **Opposed:** \_\_\_\_\_ **Abstain:** \_\_\_\_\_

**CBD:** \_\_\_\_\_