



COMMUNITY ADVISORY BOARD

CONTRIBUTION REQUEST FORM

(Please Type in the Requested Information)

Attach to this form any supplemental materials that you feel will provide information about your organization or event.

NAME OF ORGANIZATION OR AGENCY: _____

MAILING ADDRESS: _____

CITY/STATE/ZIP: _____

CONTACT PERSON: _____

PHONE AND E-MAIL ADDRESS: _____

PURPOSE OF ORGANIZATION OR AGENCY: _____

GEOGRAPHIC AREA SERVED: _____

NUMBER WHO BENEFIT FROM ORGANIZATION OR AGENCY: _____

AMOUNT OF CONTRIBUTION YOU ARE REQUESTING: _____

OTHER SOURCES OF FUNDING APPLIED FOR OR RECEIVED FOR THIS PROJECT: _____

HOW FUNDS WILL BE USED: _____

Return completed form via mail, fax or e-mail to:
Kim Lynch, ASC Community Advisory Board
American Seafoods Company LLC
2025 First Avenue, Suite 900
Seattle, WA 98121
E-Mail: kim.lynch@americanseafoods.com
Phone: 206-256-2659
Fax: 206-448-0202

Annual Meeting Schedule:

<u>Date</u>	<u>\$ Available</u>	<u>Subject</u>
February	\$38,000	General
May	\$14,000	Scholarships
December	\$38,000	General