

Multnomah County Master Gardener™ Association
A Nonprofit Association

Request for Non-Budgeted Funds

Date of request: _____

Request submitted by: _____

Amount requested: _____

Approval needed by date: _____ (recommended 2 weeks)

Proposed Expense Category: (if known)

Purpose of Expense:

(include description of event/activity, item(s) expected to be purchased/rented and estimated cost)

Expected Community Benefit:

Board Documentation:

Budget Increase Approved or Denied: _____

Date of Approval/Denial: _____

Approved by: President or Board or Membership (Circle one)