

Morro Bay Friends of the Library

PROJECT FUNDING REQUEST

RETURN THIS COMPLETED FORM TO THE Treasurer
at least two weeks prior to a meeting.

PLEASE TYPE or Print

Today's date 6-30-08 Date funding is desired 7-18-08

Applicant Name K. Robert Presenter K. Robert/J. Long/R. Deschler

Phone 772-9268 Total requested \$ See Below

You may use additional paper when needed. Also, attach any helpful supporting documents.

Supporting documents: copy of brochure and nameplate on Members page

www.morrobayfriendsoflibrary.org.

1. Please state your reason(s) for this request. Include how this program/ expenditure complements the Friend's commitment to the Morro Bay Library.

At the last Board meeting, it was requested that we design a brochure that would promote ways to give to the Library, as well as recognize when the Friends purchased books for the library with a nameplate in the book. The following costs reflect the designer's time and printing costs at ASAP printers in Morro Bay.

2. Itemized cost: **(Give specific breakdown)**

PRINTING COSTS:

Brochure cost - letter size/2 sided/color/folded for **200 copies** = .69 cents each plus tax = **\$148.70**

Brochure cost - letter size/2 sided/color/folded for **500 copies** = .49 cents each plus tax = **\$263.99**

Brochure cost - letter size/2 sided/color/folded for **1,000 copies** = .46 cents each plus tax = **\$495.65**

Brochure cost - letter size/2 sided/color/folded for **2,000 copies** = .42 cents each plus tax = **\$905.10**

Name plate cost - black & white 2" x 4.25" = **\$1.00 each** or color = **\$1.49 each**

DESIGNER COST @ \$35.00 per hour x 5.75 Hours = **\$201.25**

3. What portion of the costs is being borne by the participant/organization? ALL

4. What other efforts are being made to seek alternate funding? Please list. NONE

→ Signature of Applicant



Form T1-2007

FOL STAFF USE

PFR # _____

Date received _____

FOL STAFF USE ONLY

Project Funding Request number _____ Month _____ Year _____

Date of Executive Officers input Date of Board of Directors input

Date of action _____ Final action vote: # count _____/_____/_____ MSP/F _____

General Fund ___ Building Fund _____ Total amount approved \$ _____

SIGNATURES:

President _____ Treasurer _____