## **DASCNA Check Request Form**

## For Area Committees

This form will help Area Treasurer keep accurate records for Area funds. The intent of this form is to follow the principles of Narcotics Anonymous and the specific Guidelines for Area Service which indicates that all Area Committees should have approved operating policies and procedures inclusive of a budget that is approved by the Area. This form will provide a clear overview of proposed activities and the cost that relate to the proposed activity.

## **Name of Committee Requesting Funds**

What is the purpose for the requested funds?
Amount of DASCNA Check Request?
Who is the person receiving or responsible for the funds?
Name:
Phone:
Address:
Email/Fax:
Funds are disbursed at the Area meeting unless otherwise indicated on the form.
Check #

Revised: 2/14/14