PROJECT FUNDING REQUEST TENNESSEE DIVISION SONS OF CONFEDERATE VETERANS

BRIEF DESCRIPTION OF PROJECT: DATE PROJECT IS TO BE COMPLETED: PLEASE LIST ALL OTHER SOURCES OF FUNDING: AMOUNT RAISED TO DATE: \$ BRIGADE COMMANDER RECOMMENDATION: APPROVED COMMENTS: DIVISION EXECUTIVE COMMITTEE ACTION: APPROVED DIVISION FUNDING APPROVED EXECUTIVE COMMITTEE COMMENTS: DIVISION COMMANDER AUTHORIZATION: (Signature) DIVISION ADJUTANT: \$	CAMP NAME:	CAMP # : DATE OF REQUEST:
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