

**TECHNICAL ASSISTANCE REQUEST FORM
ORGANIZATION INFORMATION**

Name of Organization _____

Address _____

EIN _____

Telephone _____

Fax _____

Email _____

Chief Executive Officer _____

Board President _____

Board Vice-President _____

Board Secretary _____

Board Treasurer _____

Date Last Board Meeting _____

Date Next Board Meeting _____

Contact Person _____

Telephone _____

Email _____

Assistance Requested _____

Office Use Only			
File #		Contract #	
File Opened		Added to Lists	
Added to Addresses		Assistance Value	