

SENATE



REPUBLICANS

Appropriations Requests for Legislatively Directed Spending Items

1. The sponsoring legislator's first name:
2. The sponsoring legislator's last name:
3. The cosponsoring legislators' names. All cosponsors must be listed. If none, please type "n/a." A signed letter from the sponsor approving the co-sponsorship and a signed letter from the member wishing to co-sponsor are required.
4. Name of the spending item's recipient:
5. Physical address of the recipient:
6. If there is not a specific recipient, the intended location of the project or activity:
7. Name of the senator and the district number where the legislatively directed spending item is located:
8. Purpose of the legislatively directed spending item. Please include how it provides a public benefit and why it is an appropriate use of taxpayer funding. Please also demonstrate that the item does not violate Article IV, S 30, of the Michigan Constitution.
9. The amount of state funding requested for the legislatively directed spending item:

10. Has the legislatively directed spending item previously received any funding from the sources described below? Check all that apply.

Federal
State
Local
Private
None

11. Please select one of the following groups that describes the entity requesting the legislatively directed spending item:

For-profit organization
Nonprofit organization
Local unit of government
University/Community college
Other

12. For a nonprofit organization, has the organization been operating within Michigan for the preceding 36 months? YES NO n/a

13. For a nonprofit organization, has the entity had a physical office within Michigan for the preceding 12 months? YES NO n/a

14. For a nonprofit organization, does the organization have a board of directors?
YES NO n/a

15. For a nonprofit organization, list all the active members on the organization's board of directors and any other officers. If this question is not applicable, please type "n/a."

16. I certify that neither the sponsoring senator nor the sponsoring senator's staff or immediate family has a direct or indirect pecuniary interest in the legislatively directed spending item. YES NO

17. Anticipated start and end dates for the legislatively directed spending item:

18. I hereby certify that all information provided in this request is true and accurate.
YES NO

19. Please attach any supporting documents, letters of support, etc.