

Name of Primary POC:

Signature of POC:

Of Minnesota Foundation 20 West 12th Street, 3rd Floor Saint Paul, Minnesota 55155-2002 Phone: 651-291-1212

Fax: 651-291-0115 www.davmn.org

Veterans Day on the Hill 2025

Transportation Funding Request Form

PLEASE SUBMIT ASAP but NLT March 26th, 2025 to ensure transportation information can be shared Form Should be Submitted to <u>Trent@davmn.org</u> or faxed to 651-291-0115

Name and Address of Requesting Organization (who/where to send the check to):

POC Email:	POC Phone:
How can local Veterans sign up to ride the bus:	
Where will the bus depart from (list m	nultiple locations if applicable):
Estimated Departure Time of Bus (list multiple times if applicable):	
Estimate of Attendees:	
Total Cost of bus/van (provide an invoice, quote, etc.):	
Additional Information/Comments:	
Please Read and Sign:	
 please contact <u>Trent@davmn.org</u> This reimbursement is only offered the-hat", etc. as part of offering this not tied to any fundraising for the season Attached should be a more detailed please contact DAV MN. You do not have to be affiliated with the season and the season are season as a season and the season are season as a season are season are season as a se	d to entities that agree to not charge, solicit donations, "pass- is bus. This transportation must be offered free-of-charge and

Date: