P.O. Box 20205
Kalamazoo MI 49019
Email: Kalfed@charter.net

JEWISH FEDERATION
of Kalamazoo & Southwest Michigan

Funds Request Form

Name: _____ **Phone:** _____ **Date:** _____

Please give a detailed description of program and funds needed.

Submit this form and any other Information to the Jewish Federation of Kalamazoo & SW Michigan Office <u>at least two months</u> before date needed.