

Submit this completed form to the Administrative
 Contact found at <http://reapmatters.org/sw-reap/>

Benchmark Request

Southwest Rural Economic Area Partnership

Project Title _____ Project Location _____	Type of Request: <input checked="" type="checkbox"/> Endorsement Only <input type="checkbox"/> Endorsement and Funding
---	---

Contact Information:

Project Leader _____	Phone Number _____
Mailing Address _____	Fax Number _____
_____	E-Mail Address _____

Project Description:

Project Budget: (Attach a separate budget page if necessary)

Source of Funds	Use of Funds	Funds Received	Funds Requested
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
Source of funds should include, when appropriate, the agency name and specific program.		0.00	0.00

I hereby certify that the information in this request is true and correct to the best of my knowledge.

_____	_____	_____
Name	Title/Position	Date

Administrative Information:

Date Reviewed _____	Funding Amount _____	Action Taken By SW REAP <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Endorsed
Project Number _____	Strat. Plan Ref. _____		Endorsed Contingent
SW REAP Funding Designation _____	_____		More Information Required
_____	_____		Denied
_____	_____		Tabled
SW REAP Representative (Name and Title) _____	_____		Referred to: _____