

**North Carolina Association of REALTORS®**  
**ISSUES MOBILIZATION FUND**  
**APPLICATION FOR FUNDING REQUEST FORM**  
*(for requests less than \$5000)*

Date: \_\_\_\_\_  
Dollar Amount Requested: \_\_\_\_\_  
Date Funds are Needed: \_\_\_\_\_  
Approval: \_\_\_\_\_ Date: \_\_\_\_\_  
IMC Chairman \_\_\_\_\_

Use Additional Space if Needed.  
**PLEASE PRINT OR TYPE**

**FUNDS REQUESTED BY:**

Name of Local Board/Association \_\_\_\_\_  
Contact Person/Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

1. Purpose of funding request, including desired outcome:

2. Please discuss:

A. All potential cost – attach a detailed cost analysis demonstrating where the funds will be used:

B. Amount and Type of NCAR staff involvement needed

3. What allied organizations are involved?

4. Has any staff member of the North Carolina Association of REALTORS®, Inc. been notified or involved?

YES \_\_\_\_\_ NO \_\_\_\_\_ If YES, Who? \_\_\_\_\_

A. Has the NCAR Regional Vice-President been notified?

YES \_\_\_\_\_ NO \_\_\_\_\_

I will send a follow-up report to the North Carolina Association of REALTORS® Issues Mobilization Committee within thirty (30) days.

Local Board President \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Local Board Executive Officer \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Mail completed form to:

North Carolina Association of REALTORS®  
Legislative Department – Attn. Issues Mobilization  
421 Fayetteville Street Mall  
Suite 1109  
Raleigh, NC 27601

For more information call:  
Fax:

1-800-443-9956 ext. 302  
(919) 856-9157