

ALPHA PHI STATE, WEST VIRGINIA DISASTER
FUND
REQUEST FOR ASSISTANCE

MEMBER NAME _____

CHAPTER _____

HOME ADDRESS _____

TELEPHONE _____ EMAIL _____

TYPE OF NATURAL DISASTER (check one) flood hurricane tornado
other natural catastrophic disaster (please describe) _____

(BYLAWS of Alpha Phi State, West Virginia: Article IV Finances, Section C. Funds. #4 A Disaster Fund shall be for assistance to members who sustain major losses from floods, tornadoes, hurricanes, and other natural catastrophic disasters.)

Briefly describe the major loss/losses to your property by the Natural Disaster:

Did you have insurance coverage? (check one) no yes

Was insurance coverage awarded? (check one) no yes

Damages Not Covered by Insurance Coverage _____

DISASTER FUND amount requested (not more than \$300.00) _____

(Standing Rules of Alpha Phi State, West Virginia: Page 54 Section 4.4 Funds 4.4.1 Disaster Funds, 4.414 The amount of the assistance to be granted shall be up to \$300 and shall be by unanimous consent of the committee and the approval of the president.)

(See reverse side)

RETURN TO CHAPTER PRESIDENT

SIGNATURE (Chapter President) _____ **Date** _____

(Standing Rules of Alpha Phi State, West Virginia; Page 54 4.4 Funds 4.41. Disaster Fund, 4.413 The chapter president shall forward any request for assistance to the chairman of the state committee when a member of her chapter has experienced a major loss because of a disaster.)

FORWARD TO ALPHA PHI STATE DISASTER FUND COMMITTEE CHAIRMAN:

Edna Congleton, Ch. Disaster Fund (Alpha Chapter)
5444 Shawnee Drive
Huntington, WV 25705
Email: aunttoots2@aol.com
Phone: 304-736-5653

Date and signature of Committee Chairman upon receipt of request:

Date received and signature of Committee Chairman upon unanimous vote of the Disaster Fund Committee:

(Standing Rules of Alpha Phi State, West Virginia; Page 54 4.4 Funds 4.41. Disaster Fund 4.414 The amount of assistance to be granted shall be up to \$300 and shall be by unanimous consent of the committee and the approval of the president.)

Date received and signature of Alpha Phi State President:

NOTE: When sending electronically, the chapter president may type in her name where required. SAVE the document to her computer. Make sure the form is completed. FORWARD the document as an ATTACHMENT to her email, to the Disaster Committee Chairman. Send as “Disaster Fund Relief Form” with her name in the email subject line.

Revised 2019