ED FUND PROJECT DEPOSIT FORM

Date _____

To: League of Women Voters of Honolulu EdFund
49 South Hotel Street, Ste 314
Honolulu, HI, 96813

From: LWV of _____

Project leader_____

Contact phone or email _____

Re: Funds to be deposited into the EdFund Grant Account for:

Project Title_____

Please describe the source of the funds being deposited and designate where and how the funds will be used.

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