



Award Request Form

Name: _____ Date: _____

Reason for Requested Funds?

- Stars Award: _____
- New Partner: _____
- Stock Purchase: _____
- Club Contest: _____
- Other Award (please specify):

Amount Requested: _____ Signature: _____

For GenXchange use only:

- | | | |
|---|------------------------------|-----------------------------|
| Member in Good Standing: | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| New partner in Good Standing: | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| SCL/SSG in Requesting Team/Member's Name: | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Actual Amount Awarded: _____

Approved By: _____ Date Approved: _____