

## **OPPORTUNITY** PASSPORT<sup>™</sup>

## **ASSET MATCH REQUEST FORM**

Your request for matching funds must include the following:

- 1. Completed Asset Match Request Form (this form)
- 2. Copy of current bank account statement/summary showing funds available to match
- 3. Required documentation as listed on the Asset Purchase Checklist

Your match request will be processed as quickly as possible. If your request is approved, it will take **7-10 business days** for the matching funds to arrive.

First Name:	me:		
Address:			
City:	State:	ZIP Code:	
Primary Phone:	Email Address:	Email Address:	
Date of Birth:			
	n matches your money to help you mak er half of the asset cost and the prograr		
The asset I want to purchas	e falls into the following category	Vehicle	Housing
<u>'</u>			
<u> </u>	ealth Credit-Building	Micro-Enterprise	
Education H	ealth Credit-Building n you want to purchase?	Micro-Enterprise	
Education H	n you want to purchase?	Micro-Enterprise	
Education H What is the specific ite	n you want to purchase?		
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Education H What is the specific ite  What does this item co Amount you will pay (1 Amount of matched fu What is the total amount	n you want to purchase?  St?  2 asset cost)  Inds requests (1/2 asset cost)	\$ \$ \$ \$	
Education H What is the specific ite  What does this item co Amount you will pay (1 Amount of matched fu What is the total amount How much will you have	n you want to purchase?  22 asset cost)  31 ds requests (1/2 asset cost)  32 t you have saved?  33 e left in savings after you pay for	\$ \$ \$ \$ half the	

<b>VENDOR INFORMATION</b> The business or person you are purchasing the asset from is the "vendor."						
	I am making this pure	chase from (check one):	A Business	An Individual		
	Vendor Name:					
	Address:					
	City:	State:	ZIP (	Code:		
	Phone:	Email A	Email Address:			
CERTIFICATION						
<ul> <li>I have included/attached the following information:</li> <li>Completed Asset Match Request Form (this form)</li> <li>Copy of your bank statement or a money order dated within the last 30 days</li> <li>Required documentation as listed on the Asset Purchase Checklist</li> </ul>						
l ar	n requesting \$	of match money.				
My signature below certifies that all information provided on this Asset Match Request Form is accurate and complete to the best of my knowledge. I understand that it will take 7-10 business days for match funds to be sent if my request is approved.						
Signature:						
Date:						

## EMAIL completed application to program coordinator at <a href="mailto:opp@firstplaceforyouth.org">opp@firstplaceforyouth.org</a>

You can also text clear photos of this form and other required documents to 601-460-4436, or print and mail to:

FIRST PLACE FOR YOUTH 121 North State Street, Suite 100B Jackson, MS 39201