**FORM PPF 2**

**Reg. 7(1).]**

**APPLICATION FOR FUNDING OF A POLITICAL PARTY**

A. *Political Party Information:*

|  |  |
| --- | --- |
| 1. | Date of application: |
| 2. | Name of Political Party: ........................................................................ | |
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| --- | --- |
| 3. | Registration No: ........................................................................... |
| 4. | Physical Address: ................................................................................... | |
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|  |  |  |
| --- | --- | --- |
| 5. | Postal Address: ................................................................................. | |
| 6. | Tel No: ................................................Fax: ...................................... |

|  |  |  |  |
| --- | --- | --- | --- |
| 7. | Website URL[: ..................................................Email](file:///C:\Users\Orpp\Downloads\..................................................Email): ................................  *B. Contact Information:*  *(Please provide contact information of person responsible for programme/project)*  Name: .....................................................................................................................  Designation: ..........................................................................................................  Tel No: ..................................................Fax: ............................................................  Email: .......................................................................................................................  *C. Bank account details*  Name of Bank: ........................................................................................................  Bank Account No: ...................................................................................................  Bank Account Name: ..............................................................................................  Branch: .......................................................................................................................  D. *Expenditure Information:* |  | |
| 1. | Please list the project's budget expense items to be supported by this fund:   |  |  |  |  | | --- | --- | --- | --- | |  | ***Type of Expense*** | ***Amount*** | **Total** | | A | Promoting representation of special interest groups. |  |  | | B-C-D | Promoting active participation by citizens in political life and civic education.  Broadcasting policies and shaping public opinion.  Electoral expenses. |  |  | | E | Administration |  |  | |  | TOTAL |  |  |  |  |  | | --- | --- | |  |  | |  |  |   *E. Work plan Template*   |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  | **Activities** | **Amount** | **Total** | | A. | Promoting representation of special interest groups.  *(*Not less than 30% of the allocation from the Fund.*)* |  |  |  | |  |  |  |  |  | |  |  |  |  | Subtotal | | B. | Promoting active participation by citizens in political life and civic education. |  |  |  | |  |  |  |  |  | |  |  |  |  | Subtotal | | C. | Broadcasting policies and shaping public opinion. |  |  |  | |  |  |  |  |  | |  |  |  |  | Subtotal | | D. | Electoral expenses. |  |  |  | |  |  |  |  |  | |  |  |  |  | Subtotal | | E. | Administration  *(*Not more than 30% of the allocation from the fund*)* |  |  |  | |  |  |  |  |  | |  |  |  |  | Subtotal | |  |  |  |  | **TOTAL** |   \* Attach any other supporting documentation.  This declaration is made to the best of our knowledge, information and belief.  Made this.......................................... day of ...................... 20................................  Names and signatures of three authorized political party officials: | |  | |

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| --- | --- |
| 1. | Name......................................................................................................  Signature....................................................................................................  ID/Passport No.......................................................................................... |
| 2. | Name.....................................................................................................  Signature...................................................................................................  ID/Passport No......................................................................................... |

|  |  |
| --- | --- |
| 3. | Name......................................................................................................  Signature...................................................................  ID/Passport No....................................................................  In the presence of a  Commissioner of Oaths/Magistrate. |