**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: ........................................................................ |
|  |  |

|  |  |
| --- | --- |
| 3. | Registration No: ........................................................................... |
| 4. | Physical Address: ................................................................................... |
|  |  |

|  |  |
| --- | --- |
| 5. | Postal Address: ................................................................................. |
| 6. | Tel No: ................................................Fax: ...................................... |

|  |  |  |
| --- | --- | --- |
| 7. | Website URL[: ..................................................Email](file:///C%3A%5CUsers%5COrpp%5CDownloads%5C..................................................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: |  |

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

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