

In order to have your school receive the grant money, please fill out the following information and send it to Michael C. Branch (address below).

2026 COMMUNITY MARIJUANA OFFSET IMPACT FUND

Student's Name: _____

Social Security #: _____

Current Address: _____

Telephone Number: _____

College or School Name

You'll be Attending: _____

Address of the Financial

Aid Office: _____

Student's Signature

Date

MAIL THIS FORM TO:

Michael C. Branch, CPA
Attn: Community Marijuana Offset Impact Fund
PO Box 1333
Pagosa Springs, CO 81147