## Community of Interest Petition of Formation Form

**Missouri Library Association**

**Community of Interest (CI)**

**Petition of Formation**

[Submit to MLA President, mlapresident@molib.org]

NAME OF CI: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(This person is responsible for submitting the CI’s Annual Report by 12/31 of the current year.)

FUNCTION OF CI: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DOES THE CI HAVE BYLAWS (optional)? YES / NO If so, please attach them.

DATE FORM COMPLETED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

COMPLETED BY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

BRIEF DESCRIPTION OF ACTIVITIES PLANNED:

(Sponsor program/event; Maintain electronic list/website; Produce regular newsletter; Meetings planned; other activities determined by CI)

FINANCIAL SUPPORT REQUESTED FROM MLA BUDGET: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

HOW FUNDS WILL BE USED?

LIST NAMES OF 15 (minimum) MLA MEMBERS IN GOOD STANDING FOR CREATION OF CI: