



INDO-AMERICAN FRIENDSHIP FOUNDATION

A Non-profit, Non-political and Non-religious Tax-exempt Organization. (Est. 1988)

IAFF . 1413 Boxwood Lane . Apex . NC 27502 . USA

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ADDRESS IN INDIA: IAFF, Plot 628, Lane 10, Palaspali, Aerodrome Area, Bhubaneswar 751013, Orissa

CLAIM VOUCHER THIRD PRIZE SUBRINA BISWAL PRIZE IN PERFORMING ARTS OSA CONVENTION 2008

(This claim voucher and all requested documents must be submitted electronically. Mailed claim voucher and documents are not acceptable.)

THIS CLAIM VOUCHER CAN ALSO BE DOWNLOADED FROM IAFF WEB SITE (www.iaff1.org) IF ADDITIONAL COPIES ARE NEEDED FOR MULTIPLE WINNERS OR IF YOU LOSE THIS FORM.

PROCEDURE FOR SUBMITTING THIS CLAIM VOUCHER TO IAFF TO CLAIM THE PRIZE: Three alternative procedures are given for this purpose.

- 1. a)** Fill out this claim voucher completely. **b)** Collect all documents requested in this claim voucher. **c)** Take photo of all documents as a group with a neutral/soft background. **d)** Save the photo as low resolution/e-mail version in jpg format. Please do not use any other format because my platform may not be able to handle formats other than jpg. **e)** Send the photos as attachment or on the body of your e-mail to the IAFF e-mail address given above.
- 2. Create PDF files and send as attachment to iaff10@yahoo.com**
- 3. Fax all your documents to: 440-378-2060**

Amount of the prize: \$200.00 (Two hundred US Dollars)

Your name as it should appear in the certificate:

Name of the item for which you won the prize:

Did you win any Subrina Biswal Prize in Performing Arts in 2007: _____ Yes _____ No

If yes, give the name of the event for which you won the prize:

If yes, was it first _____, second _____ or third _____ prize? (Please check the applicable place)

Your complete mailing address:

Parent's name and mailing address:

Home phone:

Work phone

Cell phone:

e-mail address:

(An e-mail address for you or your parents is mandatory. You will be automatically disqualified for the prize if you or your parents cannot be contacted through the above e-mail address).

Your date of birth:

(Attach to this voucher copy of driver license or birth certificate or passport as proof)

Are you a student? _____ Yes; _____ No. If yes, which grade: _____

Proof of eligibility: Please provide the following: a) Birth certificate (not needed if passport page is supplied). b) OSA membership (receipt), c) Registration at the OSA convention (receipt), d) Passport or green card to show citizenship or permanent residence in the USA/CANADA/MEXICO. e) If 6 years or older, your current student status (letter from school principal in school letterhead). If your parents are in the USA for longer than 1-year on student visa or work visa, they must furnish proof in support of this visa status.

Father's/ Mother's Signature -----

(Please note that your signatures above will imply that you assure that the information given above are correct.)

President

Signature of the IAFF representative

Title of the IAFF representative