

FUNDING REQUEST FOR SASKATCHEWAN LOTTERIES COMMUNITY GRANT FUNDS

Name of community group: _____

Address: _____

Contact person: _____

Name	Phone	Fax
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	Email	
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Project description: _____

Project Start / End Dates: _____

Proposed expenditures:	Dollar Amount:
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

TOTAL PROJECT ESTIMATED COSTS: \$ _____

GRANT AMOUNT REQUESTED: \$ _____

CONTACT PERSON SIGNATURE: _____

Please return the completed form,
along with the most recent annual financial statement ,
to the Village of Paradise Hill

Mail: Box 270, Paradise Hill, S0M 2G0

Fax: (306)344-4941

Email: paradisehill@sasktel.net

Please remember to publicly acknowledge Saskatchewan Lotteries
as a source of funds for your project.