

POWELL RIVER REGIONAL DISTRICT

APPLICATION FOR FINANCIAL ASSISTANCE (GRANT-IN-AID)

Individuals or organizations requesting financial assistance from the Regional District must provide the following information:

Name of Organization: _____

Contact Person: _____

Address and Phone No: _____

Description of Project/Program: _____

Who in the community will benefit from the project/program?

FINANCIAL INFORMATION

Total Costs: _____

Other Funding Sources:

Name	Status *	Amount
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Volunteer and In-kind Contributions:

_____	_____	_____
_____	_____	_____

* Please indicate whether the funds are confirmed (C) or anticipated (A).

Amount Requested from Regional District: _____

Reserve Funds held by Applicant: _____

A copy of your organization's most recent financial statement must be submitted with this application (if applicable).