





LOCAL COMMUNITY GROUP FUNDING REQUEST FOR SASK LOTTERIES COMMUNITY GRANT FUNDS

Name of Commu	inty Group.		
Contact Name:			
Phone & Email			
Project Descripti	on:		
Project Start Date	e:		
PRO	DJECTS MUST FA	ALL WITHIN THE GRANT PER	RIOD OF APRIL 1 to MARCH 31
Proposed Reven	ues:		Dollar Amount:
			\$
			\$
Proposed Expenditures:		Dollar Amount:	
			\$
			\$
			\$
			\$
			\$
			\$
TOTAL PROJECT ESTIMATED COSTS:			\$
GRANT AMOUNT REQUESTED:			\$
Signature of Conta	act Person:		

Please return the completed form to Kaeli Cross, Events & Recreation Coordinator
Spr@sasktel.net 306-883-2176 305a 1st Street East, Spiritwood, Sk. S0J 2M0