

SASK LOTTERIES

**LOCAL COMMUNITY GROUP FUNDING REQUEST FOR
SASK LOTTERIES COMMUNITY GRANT FUNDS**

Name of Community Group:
Contact Name:
Phone:
Project Description:
Project Start Date:

Proposed Revenues:	Dollar Amount:
	\$
	\$
	Dollar Amount:
	\$
	\$
	\$
	\$
	\$
	\$
TOTAL PROJECT ESTIMATED COSTS:	\$
GRANT AMOUNT REQUESTED:	\$

Signature of Contact Person: _____

Please return the completed form to the community contact person of the Town, Village, R.M. or Band Office you are applying through (do not return to the Community Grant Office).

Please remember to acknowledge Sask Lotteries as a source of funds for your project