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| **Local Community Group**  **Funding Request for**  **Saskatchewan Lotteries**  **Community Grant Funds** |
| Name of Community Group: |
| Address: |
| Contact Name: Phone: |
| Project Description: |
| Project Start Date: |
| Proposed Expenditures: Dollar amount:  $  $  $  $  $  $  TOTAL PROJECTED ESTIMATED COSTS: $  GRANT AMOUNT REQUESTED: $ |
| Signature  Contact Person |

*Please return the completed form to the Town of Carlyle in person to: #101 – 100 Main Street, by mail: Box 10 Carlyle SK S0C 0R0, by fax: 306-453-6380 or by email:* [*towncarlyle@sasktel.net*](mailto:towncarlyle@sasktel.net)

Please remember to publicly acknowledge Saskatchewan Lotteries

as a source of funds for your project.