

1 % Grant Application

DATE OF APPLICATION: _____

BUSINESS/ORGANIZATION: _____

ADDRESS: _____

PHONE: _____

PROPOSED PROJECT: _____

PROJECT/EVENT OBJECTIVE: _____

DATE OF PROJECT/EVENT: _____

TOTAL PROJECT/EVENT COST: _____

OTHER SOURCES OF FUNDING: _____

AMOUNT REQUESTED FOR ABOVE PROJECT: _____

PROPOSED BUDGET (BE SPECIFIC): _____

How many visitors do you expect to attend this event? _____

How will this event be promoted? _____

Applicant Signature

Action Taken

Date

Authorized Signature, Chairperson CVB
