EAST AYTON PARISH COUNCIL

26 Ings Close Staxton YO12 4ST

Email: eastaytonpc1@gmail.com

APPLICATION FOR GRANT

PLEASE PRINT ANSWERS TO EACH QUESTION AND RETURN BY 31 OCTOBER

1.	Name of Organisation Address		
2.	Contact Name of Chairman, Secretar		
3.	Amount of grant applied for £the parish council may not fund the		Maximum £500 although
4.	Give full details of cost and purpose for which grant is applied for. <i>Please note that this must be for something specific and the grant money cannot be used for an item already purchased</i> :		
5.	Name who the cheque is to be made	payable to	
6.	Address to send the cheque to		
Signe	d	Date	
	SE ENCLOSE THE LATEST APPROVED ed in the strictest confidence). No appli		COME AND EXPENDITURE (which will be sidered without this.
	DEADLINE F	OR SUBMISSION 31	OCTOBER
IF SU	CCESSFUL THIS GRANT WILL BE AVAILA	BLE FROM 1 APRIL	THE FOLLOWING YEAR.
	DFFICE USE ONLY ment of Income/Expenditure enclosed	Yes/No	
Amount of grant requested			£
Amount of Grant approved		£	Min. No
Cheque Paid		Date	