



THE CITY OF DAWSON

P.O BOX 308, DAWSON CITY, YUKON Y0B 1G0

PH: (867) 993-7400, FAX: (867) 993-7434



APPENDIX "A" CITY OF DAWSON GRANT APPLICATION

CONTACT INFORMATION

NAME OF ORGANIZATION: _____

CONTACT PERSON: _____ POSITION: _____

ADDRESS: _____

PHONE: _____ FAX: _____

EMAIL ADDRESS: _____

PROJECT INFORMATION

NAME OF PROJECT: _____

PROJECT DESCRIPTION: (Please provide a detailed overview of project; attach additional papers if needed)

EXPECTED BENEFITS TO THE COMMUNITY: _____

HOW WILL THE CITY OF DAWSON BE PUBLICLY RECOGNIZED? _____

PROPOSED BUDGET

EXPENSES:

DESCRIPTION OF EXPENSE(S)	AMOUNT
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
TOTAL EXPENSES:	\$ _____

REVENUE / FUNDING SOURCES:

DESCRIPTION OF REVENUE SOURCE	AMOUNT
Funding requested from the City of Dawson	_____
Funding provided by your organization	_____
Funding from fundraising	_____
Funding from other sources:	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
TOTAL REVENUES:	\$ _____

Signature

Date

PLEASE RETURN COMPLETED FORM TO
City of Dawson
Box 308, Dawson City, YT Y0B 1G0