HOTEL / MOTEL TAX ALLOCATION GRANT PROJECT APPLICATION

Requested amount: Applicant's Match amount:

Yes No



form below. Street address: Street address line 2: Zip code: City: State: Contact Person First name: Last name: Phone number: E-mail: Is your organization a non-profit or public tax-exempt organization as defined under Section 501(c) (3) of the Internal Revenue Code?

Total Project Budget:

To be considered for the City of Pryor Creek Hotel / Motel Tax Allocation Grant, please complete the

Description of event or project summary: Provide a paragraph, a concise summary of your request and what it will accomplish. If your request is part of a larger project, you may briefly describe the over all project. However, please focus the bulk of your answer on the specific element for which you are requesting funding.
Where and when will the event take place?
Resources available for project / event:

PROJECT BUDGET Please detail the budget for your project. Specify whether your various match items will be cash or in-kind. Pro-Forma

Project Title:
Revenues:
Total Requested from Hotel / Motel:
Total Project Revenues:
Expenses:
Advertising
Promotional Printing
Miscellaneous expenses:

Total Expenses: