

Lake of Egypt Property Owners (LEAPO)

REQUEST FOR GRANT

MAIL COMPLETED APPLICATION BY NOVEMBER 5, 2022 TO LEAPO, PO Box 127, Goreville, IL 62939 Attn: Grants Panel

PLEASE NOTE: **All applications must be mailed. Late applications cannot be accepted.**

Subdivision: _____ Date _____

Contact Name: _____ Ph.# _____ or _____

Amount Requested: \$ _____ (Maximum grant award is \$ 750 per subdivision.) NOTE: ALL FUNDS MUST BE EXPENDED AND BILLED BY JUNE 1, 2023 UNLESS AUTHORIZED IN ADVANCE BY THE LEAPO BOARD.

What is the purpose of this Grant?

Who will benefit or what benefits will be the results of this Grant?

Additional comments: _____

Who will implement the plan: _____

Who will maintain the plan: _____

Date the funds will be needed: _____ Check Made Payable to: _____

Is LEAPO funding this project 100%? _____ If NO, please explain: _____

Estimate first year cost: (attach detail) _____

Estimated maintenance cost: (attach detail) _____

By signing and submitting this application, the Subdivision agrees to provide detailed and accurate documentation of expenditures and to return paid receipts and any monies not used for this specific grant request by June 1st, 2023

SUBDIVISION APPLICANT:

Signature Title Date

GRANT PANEL APPROVAL:

Signature Date Signature Date

Signature Date Signature – LEAPO President Date