

# STAMFORD TOWN COUNCIL

## Application for Donations up to £250.

**Please note that this application will not be considered unless it is accompanied by a copy of the organisation's annual accounts or copies of the bank statements covering the previous six months must be enclosed.**

1.	Name of Organisation	
	Name, Address and Status of Contact	
	Telephone Number of Contact	
	Is the Organisation a Registered Charity?	Yes/No      Charity No.
	Amount of donation requested  If the application is successful, please supply your Bank Account number and Sort Code and the name the Bank Account is held in	£
	For what purpose or project is the donation requested?	
	What will be the total cost of the above project? If an application has been made before for the same or similar event please submit audited accounts pertaining to that event.	£
8.	If the total cost of the project is more than the donation how will the residue be financed?	
9.	Have you applied for donations for the same project to another organisation?  If so, which organisation and for how much?	
10	Who will benefit from the project?	
<b>11</b>	Approximately how many of those who will benefit are parishioners?	

You may use a separate sheet of paper to submit any other information which you feel will support this application. Signed

..... Date .....