



# Community Enhancement Grant 2024

## Organization Information:

<b>Organization Name:</b> _____	<b>Date:</b> _____
<b>Address:</b> _____	<b>Phone:</b> _____
<small>Street address</small>	<small>Apt/Unit #</small>
_____	<b>Email:</b> _____
<small>City</small>	<small>State</small>
<small>Zip Code</small>	

Are you located within the BASEC service area?      Yes       No

Did you receive a Community Enhancement Grant in 2023?      Yes       No

## Project Information

<b>Project Title</b> _____	<b>Total Project Cost</b> _____
<b>Funds Requested</b> _____	<b>Matching Funds</b> _____
<b>Project State Date</b> _____	<b>Project End Date</b> _____

**Project Summary:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Signature:** \_\_\_\_\_      **Date:** \_\_\_\_\_