

GRANT-IN-AID APPLICATION

Fraser Valley Regional District, 45950 Cheam Ave, Chilliwack BC, V2P 1N6

ser Valley Regional District	1		
Applicant Name: Sunshine Valle	y Katepayus Assoc,		
Mailing Address: Po Box .	,		
Han BC			
Email Address: VOX			
Contact:/	1 (- 44)		
Kate Zahili	004-269-049		
Name	1004-869-0445 Telephone/Fax Number		
Name	\$		
Statement as to eligibility to apply for Grant-In-Aid Funds (Please attach a separate sheet if required): See a Howless-Certifiate for So Crefy Statements			
		APPLICATION SUMMARY: Project or purpose for which you require assistance (Please attach a separate sheet if required): 10 Summer (page 1 to the second for	
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sheet if required):	culture and cetizen		
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to host public on	and a contract of the		
Amount of Grant Requested: \$ 9,200			
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**Please note: grants over \$4 000 require a financial st	tatement and/or report on the applicant to be provided with the		
application.	·		
To the best of my knowledge, all the information that is	s provided in this application is true and correct. Furthermore, I		
hereby certify that this application for assistance is NO	T being made on behalf of an individual, industry, commercial		
or business undertaking.			
Lasta Chill	Amount Approved:		
Jace e my			
Dundent CIPA			
Signature of Authorized Signatory and Title	Date:		
Signature of Authorized Signatory and Thic			
	Signature of Electoral Area Director		