

HAWICK COMMON GOOD FUND SUB-COMMITTEE

APPLICATION FOR FINANCIAL ASSISTANCE

Organisation:

Please return this form when your project/period of support is complete.

Section 1: Spending your grant

Please give details below of the items or activities funded by this grant

Item/activity	Cost (corresponding evidence of spending attached)
Total amount spent by the organisation/group	
	£

Section 2: The benefits of your grant

Please give examples of the ways in which the grant has been of benefit to the Hawick community and/or to the work of your group.

How many people benefited from the grant? _____

Section 3: The signed declaration

I confirm that the details contained in this form are correct and that we will keep all financial records and accounts, including receipts for items purchased with the grant, for at

least two years from payment of the grant. We understand that this does not release us from our statutory obligations to keep records for longer periods. We are aware that we may be asked to forward receipts for inspection or that we may be visited to inspect our records.

Name: _____

Position in organisation: _____

Contact telephone number: _____

Signature: _____ Date: _____

If you require any advice or assistance in completion this form please contact our Democratic Services Officer on 01835 826556

Email – Judith.turnbull@scotborders@gov.uk