



**HAWICK COMMON GOOD FUND SUB-COMMITTEE**

**APPLICATION FOR FINANCIAL ASSISTANCE**

**Organisation:** .....

**Name of Project:** .....

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:  
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