

Higgins Lake Foundation



P. O. Box 753, Roscommon, MI 48653 989-275-9183- <u>info@higginslakefoundation.org</u> www.higginslake-foundation.org

Grant Application

Our Mission: Promoting Ecologically Sound Projects and Practices for the Protection of Higgins Lake and the Surrounding Watershed

Date of Grant Application:
Legal Name of Organization:
Executive Director:
Project Contact Person and title:
Address:
City/State/Zip:
Phone: Email:
Website:
Project Name:
Purpose of Grant:
Dates of project:
Amount requested: \$ Total project cost: \$
Breakdown of expenditures: (please attach budget)
List other grants/donors for project:
List any previous grants form Higgins Lake Foundation:
Report of project completion will be submitted to HLF.
Signature, project contact:
Printed name and title:

Project Budget

Indicate only the income and expenses that apply to your project.

Income:

Source	Amount	Description (Pending or Committed)
Total Income:	\$	

Expenses:

Item/Service	Amount	Description
	A	
otal Expenses: \$		