



# PEACE RIVER REGIONAL DISTRICT

## Regional Trails Grants-in-Aid Schedule "E" – Funding Amendment

APPLICANT INFORMATION	
Name of Organization:	Date:
Contact:	Phone:
Mailing Address:	
Email:	Fax:
PROJECT TO PROVIDE FUNDS	
Year Funds Granted:	Amount Granted:
Current Project Description: <i>(project for which funds were originally applied for)</i>	
REASON FOR AMENDMENT	
TOTAL Cost of New Project:	
Proposed New Project: <i>(reason for request and description of project, project budget)</i>	