

TOWN OF BRISTOL

GRANT SUMMARY DOCUMENT

(To be authorized by the Selectboard prior to completion or submission of the grant application.)

Funding Agency Name: UNITED WAY OF ADDISON COUNTY

Address: 175 Wilson Rd

Middlebury, VT

05753

Date of Application Submission: 3 / 22 / 2023

Explanation of what grant funds will be used for:

The grant will be used to pay for the Hub Program assistant, a part time role we currently have (filled by Jackie) and the funding will be used for food and other general support needs for the Hub.

Application Amount: \$15000

Description of Matching or Other Funds to be Used: 0

Name of Grant Applicant:

SUMMARY OF GRANT AWARD

(To be completed by Treasurer's Office)

Date authorized by Selectboard:

Fund # (Assigned by Treasurer's Office after receipt of grant award letter):

Grant Award Date: / /

Grant Number issued by Funding Agency:

CFDA if applicable:

Grant Period: / / to / /

Grant Award Amount: \$