

TOWN OF BRISTOL

GRANT SUMMARY DOCUMENT

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

Funding Agency Name: TMobile
Address/Contact: Main Street America
53 West Jackson Blvd.
Suite 350
Chicago, IL 60604
P 312-610-5613

Date of Application Submission: 9 / 30 / 2025

Explanation of what grant funds will be used for: Funds for Park Fountain Refurbish Project
Funds To Be Spent Between Dec 1 2025-Nov. 30 2026

Application Amount Max \$50k

Description of Matching or Other Funds to be Used No Town Match Required

Name of Grant Applicant: Freeda Powers/Town Of Bristol

SUMMARY OF GRANT AWARD
(To be completed by Treasurer's Office)

Date authorized by Selectboard: _____

Fund # (Assigned by Treasurer's Office): _____

Grant Award Date: ____ / ____ / ____

Grant Number issued by Funding Agency: _____

CFDA if applicable: _____

Grant Period: ____ / ____ / ____ to ____ / ____ / ____ Amended to ____ / ____ / ____

Grant Award Amount: \$ _____