



APPLICATION FOR THE
Crete Carrier Room Grant

SECTION ONE: APPLICANT INFORMATION

Name of Applicant/ Organization: Southern 7 Association

Contact: Stephanie Metzger

Address: Village of Bradshaw

Phone: (402) 736-4634 E-mail: _____

Description of Event: _____

Southern 7 Clerk's meeting

Date and Time of Event: August 15th 2024

City Sponsor/Advocate: Nancy Tellez, City Clerk

SECTION TWO: COMMUNITY PURPOSE

Mission of the Event/Organization: _____

Promote the interests of Municipal Clerks

Community Served by the Organization: Municipalities

Population Served by the Event: Municipal Clerks

SECTION THREE: FINANCIAL NEED

Please explain your need for assistance to rent the Crete Carrier Room: _____

SECTION FOUR: GENERAL TERMS AND CONDITIONS

If awarded, the requested funds will be paid to cover the fee and security deposit for use of the Crete Carrier Room. Any costs to clean or repair damage to the event space shall be billed to the grant recipient and must be paid upon receipt of an invoice from the City. The recipient must remain in good standing with the City of Crete to maintain eligibility for the grant.

By obtaining funds from the City of Crete, the recipient acknowledges acceptance of the terms and conditions of the award. The City of Crete may withdraw this grant if the event or the nature of the event changes and is determined to no longer fulfil the grant's purpose.

SECTION FIVE: APPLICANT CERTIFICATION

CERTIFICATION

I/WE CERTIFY THAT THE INFORMATION PROVIDED WITHIN THIS APPLICATION IS TRUE AND CORRECT AS OF THE DATE SHOWN BELOW. IN THE EVENT THAT CIRCUMSTANCES CHANGE BEFORE THE EVENT, I WILL, WITHIN TEN DAYS, NOTIFY THE CITY OF CRETE AND RE-SUBMIT MY APPLICATION.

Signature: _____ Date: _____

Signature: Nancy Tully Date: July 12th 2024