

111 Railroad Avenue-PO Box 38-Ray, ND 58849-<u>www.nccray.com</u>-ncc@nccray.com

Applicant/Organization:  Applicant Tax ID Number:  Mailing Address:			
		City:	ST: Zip:
		Contact Name:	
Contact Phone:	Contact Email:		
Project Name:	<del></del>		
	d business or facility (i.e. ambulance, hospital, fire district, recreation, community center,etc.) project (i.e. service group/club; youth/school programs, etc.  ed?		
Funding Request:	Total Project Costs:		
(Organization requesting funds	must have \$4 in other funds to \$1 in RDFC funds)		
Funding Sources: Local Development Group: \$	RDFC Grant Fund: \$		
Job Development Authority: \$	State Funds: \$		
RDFC Sponsor/Member: \$	Federal: \$		
Private Funds: \$	Service Clubs: \$		
City: \$	Bank(s): \$		
County: \$	Other: \$		
Signature	Date		

## **Return completed applications to:**

NCC, Attn: Angela Schepp
P.O. Box 38, Ray, ND 58849 or <a href="mailto:ncc@nccray.com">ncc@nccray.com</a>
Application deadline is October 14, 2024