



PUBLIC ACCESS GRANT APPLICATION

Name of Applicant (individual or organization): _____

Address: _____

Primary Contact Person: _____

Phone Number: _____

Fax Number: _____

Email (required) : _____

Which PEG Channel: (Mark one please)

Public Governmental Educational

Description of program: (Attach additional pages as needed.)

Actual or Projected Production Expenditure Details (please complete any that apply to your request)

Capital expenditures	\$
Production Materials	
Music Materials	
Research & reference costs	
Producer/presenter/interviewee fees	
Air time/access contributions	
Other expenses (specify)	
Total Expenditures	\$

Application Check List:

Only complete application packages can be considered. Please ensure that your submission includes all of the following and is received by the City no later than 4:00 P.M. on Friday, November 17, 2006:

- Application Form
- CD or DVD of completed program or production treatment (outline) for program
- Supporting documentation for expenses for program production
- Submit grant application to:

City of Riverside - Public Access Grant Program
Attention: Leanne Johnson
3900 Main Street
Riverside, CA 92522
ljohnson@riversideca.gov
951-826-5470 (Fax)

Authorized Representative (print)

Date

Signature

Title