

## **BIA Beautification/Advertisement Reimbursement Request**

Requests for reimbursement will be present	ted at our next monthly BIA Board Meeting.
Date of Request:	
Business Name:	
Business Address:	
Contact Name (and affiliation with business) :	
Email Address:  Have you requested Reimbursement for this grant before? If YES, when?	
**Please note that the BIA will reimburse 50% of the cost up to \$2000 per request - the funds will be paid back after the project is completed - receipts must be submitted prior to reimbursement.  BIA Board Use Only	
Date of Meeting	Approved/Denied