



Municipality of South Huron

Community Grant Application Form

Please return application by September 21 of any given year to:
Sandy Becker, Financial Services Manager/Treasurer
Municipality of South Huron,
322 Main St S, P O Box 759, Exeter, Ontario NOM 1S6
(519) 235-0310

Name of Applicant/Organization/Service Club/Community Group:
ELETER CHAPTER ORDER OF THE EASTERN STAR
Contact Person: JEANIE LEE
Position held in organization by contact person: SECRETARY Mailing Address:
Mailing Address:
40320 HURON STE, EXETER ON NOM 155
Mailing Address: HO320 KUREN STE, KLETER ON NOM 155 Telephone: Cell: Fax: 519-235-1588 E-mail address: Website: Specifics of Event/Project/Program requesting funds:
E-mail address: Website:
Specifics of Event/Project/Program requesting funds:
BAKBEKUE
Total Project Budget: #3500, -
Amount of Funds requested from the Municipality:
(For in-kind requests please provide the monetary equivalent of the grant request)
*SOO-RENTAL FEE
Have you applied to the Municipality for Funding in the past?
If yes, please provide summary of request.
No
Applicants may present their funding request as a delegation to Council.
Do you want to present your request to Council? O Yes O No
For Organizations/Service Clubs:
Are you a non-profit Organization? Yes O No
Charitable Registration Number (if applicable):
Date of Incorporation (if applicable):
Organization/Project/Event Budget – attach or complete page 4

Please check the appropriate category & grain	nt type:				
OYouth/Senior Event	O Monetary	OIn Kind			
OCommunity Beautification	O Monetary O Monetary	OIn Kind OIn Kind			
OArts, Culture and Heritage					
O Tourism Development	O Monetary	OIn Kind			
	(*) Monetary	OIn Kind			
Ocapital funding for a specific project	O Monetary	OIn Kind			
Project Information:					
Provide a brief description of the event, program or project. Include goals and timelines. CHICKEN BARBEQUE - SUNDAY - JUNE 3/2018 - 4 - 1PM RAISE FUNDS FOR CHARITABLE PURPOSES					
If this is <i>not</i> a new project or initiative, please program or increase participation and/or volume of the property of the project of initiative, please program or increase participation and/or volume.		enhance your			
What is the specific purpose that the grant full CHARITABLE GIDING					
For in-kind requests please provide details or or resources).	n type of request (ie	materials, equipment			
Indicate what other sources of funding is sup	porting this event, p	rogram or project.			
OUR OWN RESOURCES					
Who will benefit from the purposed event, proetc)?	, , ,	. children, seniors,			

Organization Details:
Provide a brief history of your organization, and indicate if it is incorporated as a non-profit organization.
INSTITUTED - SEPT 16, 1938 - NON PROFIT
Is your group able to issue charitable tax receipts on its own?
What are the general objectives/services of your organization?
, ,
FUND RAISING FOR CHARITIES
JUNE 2019 - DONATIONS TO JESSICA'S HOUSE - \$5000, SCOTTISH RITE LEARNING CENTRE - 8000
FOR DYSLETIC CHILDREN.
FOOD RANK - 500.
In what geographical area does your organization operate?
MEMBERS FROM - CLINTON, SEAFORTH, BRAND BEND, EXETER WOODSHAM.
Do volunteers participate in your organization? If yes, indicate the number of volunteers and type of involvement?
ALL VOLUNTEEL
List the Executive Officers of your organization: WORTHY MATRON - LUCILLE MCCURDY
TREASURER - ANNE HELM
SECRETARY - JEANIE LEE

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Project Budget:	
Please provide or attach documentation if available	
Revenue Sources	
Applicant Contribution	
\$3000, - \$3600	
Grants	
Donation/Sponsorships	·
Fund-raising efforts	
•	
Other Sources	
Other Courses	
Total Revenue	
70141710707140	
N.	
Expenses	
ZAPONOGO	
Advertising and Promotion	
Advertising and Promotion	
Program Supplies	
1 Togram cappings	
Entertainment 4 1 2 1	
Entertainment #175.	
Administration	
Salaries/Wages	
Salah SS/ TTagos	
Facilities Rental \$500	
1500	
Prizes and Awards	
Other Cook A and d	
Other FOOD COST * 2900.	
Total Expenses	
,	
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Terms and Conditions:

In the event that a grant is awarded, the applicant agrees to the following:

- To provide a complete status report of the use of the funds within 60 days of the event, project or program completion.
- To provide a financial statement from the previous year from either the event or the organization.
- To acknowledge the support of the Municipality of South Huron in all printed material and through other promotional means.
- The funds will be used only for the purposes described in this application.

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- To inform Council if the project is delayed or changed substantially for any reason.
- In the event that the project does not go forward, the applicant will return those funds granted for the proposed project.

Signature. Jeanis free - Secretary	Print Name: <u>SEANIE EE</u>
Organization/ Service Club/Community Group	: <u>EXETER CHAPTER-ORDER OF</u> THE EASTERN STAR
Date Submitted: Sept 6 /2017	

<u>Financial Statement for Exeter Chapter 2016/2017</u> Year End – Aug 31/2017

Receipts		Expenses	
Dues	1,840.00	Telephone	498.00
Silver Drill	470.75	Rent	2965.00
Catering & Ren	t 7,057.45	Grand Chapter Donations	600.00
Ways & Means	& 1,205.10	Installtion Grant	240.00
Meat Pies	2,109.35	Per Capita	1083.00
BBQ	1.528.90	BBQ Expense	300.00
Spring Fling	1,067.05	Scottish Rite-	3000.00
Interest	14.07	(Dyslexic Children)	
Donations	866.00	Jessica's House	5000.00
Project	1,050.00	Benevolent Donations	400.00
Grocery Tapes	500.00	Men's Drill Team	35.00
Oyster Supper	1,826.15	Meat Pie Expense	363.53
Sundry	1,562.55	Oyster Supper Expense	472.01
		District Expenses	35.00
		Insurance	351.00
Total	21097.37	Honorariums	500.50
		Committees	300.00
		Postage & Notices	364.20
		South Huron High School	700.00
		Sundry	2977.15
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		Total	20859.71