Family & Friends Community Foundation Inc. Attention: Cherryl Kotzer, Program Administrator Box 800, Langenburg, SK, SoA 2A

I/3

	ntact Person:	Title:
Na	me of Organization:	
	aritable Registration #:	T
Tel	ephone:	Fax:
Ado	dress:	
Pro	ject Title:	
Br	ief Description of Your Org	anization's Goals and Mission:
Br	ief Description of Project:	
Ве	enefits To The Community:	
Ве	enefits To The Community: Who will benefit? (age, sex, g	roup)



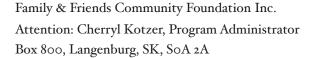
c. Is there any potential to involve other community groups in this project? (cost sharing, resource sharing, etc)

Timeline:

- a. What are the projected start-up and completion dates of the project?
- b. When are the funds required?

Organizational Structure:

Please provide the names of your board of directors, executive or committee members.



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Financial Summary:	
Total Cost of Project	\$
Amount of Grant Requested	\$
Funds from Other Contributors	\$
Funds Raised Thus Far	\$
Additional Financial Information:	
Please Attach To This Application:	
	tatement which includes balance sheet
and profit and loss statementCurrent operating budget	
3) A quote for the project	
We certify that this application has been the organization listed above.	reviewed and authorized by the Board of Directors of
Name of Contact	Signature
Name of Contact	Signature
	Date

Please Submit Your Application Before December 31 to: Family & Friends Community Foundation Inc. Attn: Cherryl Kotzer, Program Administrator Box 800, Langenburg, SK SoA 2A0

Web: www.familyandfriendsfoundation.com

	e grant, if approved, must be made to a "qualified donee", as defined under the <i>Income Tax t</i> and as reproduced below. The applicant confirms (select one):		
	☐ it is a "qualified donee"		
	☐ it is not a "qualified donee"		
1.	If the applicant has selected that it \underline{is} a "qualified donee", it must select the applicable "qualified donee" category below and provide its charitable registration number, if it has a charitable registration number.		
2.	2. If the applicant has selected that it <u>is not</u> a "qualified donee", then, the grant must be made to a separate recipient that fits one of the below "qualified donee" categories. The name of the recipient is and the applicable "qualified donee" category that applies to the <u>recipient</u> must be selected below and the <u>recipient</u> 's charitable registration number must be provided, if the recipient has a charitable interest number.		
"qı	ualified donee" categories:		
	a registered charity (including a registered national arts service organization)		
	a registered Canadian amateur athletic association		
	a registered housing corporation resident in Canada constituted exclusively to provide low-cost housing for the aged		
	a registered Canadian municipality		
	a registered municipal or public body performing a function of government in Canada		
	a registered university outside Canada that is prescribed to be a university, the student body of which ordinarily includes students from Canada		
	a registered charitable organization outside Canada to which Her Majesty in right of Canada has made a gift		
	Her Majesty in right of Canada, a province, or a territory		
	the United Nations and its agencies		
Ch	aritable Registration Number (if applicable):		
Note: Only complete the below if the grant is to be paid to a recipient and not the applicant.			
If the recipient is other than the applicant, the recipient hereby confirms that it is permitted to and consents to receiving the grant.			
Per:			
Da	te: Name: Title:		

NOTE: If you are signing this application as a recipient who is not the applicant, if the grant is awarded to the applicant, the grant will be paid directly to your organization. In advance of consenting and permitting the grant to be paid to your organization, as confirmed by your endorsement above, you are encouraged to seek out the necessary tax or legal advice respecting your organization's rights and obligations and qualification as a "qualified donee" under the *Income Tax Act* for the purpose of receiving the grant and disbursing it to the applicant.