



Community Chest Fund Application Form

Post your completed application to:

PO Box 42, Brookton, WA 6306

Or deliver to:

Shire of Brookton, 14 White Street, Brookton

Alternatively email your application to:

mail@Brookton.wa.gov.au

Community Chest Fund

Application Form

Before completing the application form: Please ensure you have read the Shire of Brookton Community Funding and Donations Policy and that your application meets the criteria outlined in the funding category.

NAME OF ORGANISATION: Click or tap here to enter text.

CONTACT PERSON: Click or tap here to enter text.

POSITION: Click or tap here to enter text.

POSTAL ADDRESS: Click or tap here to enter text.

PHONE: Click or tap here to enter text. **MOBILE:** Click or tap here to enter text.

EMAIL: Click or tap here to enter text.

ORGANISATION'S ABN: Click or tap here to enter text.

REGISTERED FOR GST? ☐ YES ☐ NO

IS YOUR ORGANISATION INCORPORATED? ☐ YES ☐ NO

NAME OF PROJECT OR EVENT: Click or tap here to enter text.

ESTIMATED START DATE: Click or tap here to enter text.

ESTIMATED COMPLETION DATE: Click or tap here to enter text.

REQUESTED COMMUNITY CHEST FUNDS: Click or tap here to enter text.

Please tick which funding category you are applying for			
Annual Grants		Community Donations	
<input type="checkbox"/>	Community & Strategic Partnership Grants	<input type="checkbox"/>	Individual Donation
<input type="checkbox"/>	Community Support Grants	<input type="checkbox"/>	Not for Profit Community groups member donation
<input type="checkbox"/>	Equipment Purchase Grant	<input type="checkbox"/>	Not for Profit Community Organisation Utilities Financial Assistance Donation

1. BRIEF DESCRIPTION OF PROJECT/EVENT:

Click or tap here to enter text.

2. WHAT WILL THE COMMUNITY CHEST FUNDS BE USED FOR?

Click or tap here to enter text.

3. HOW WILL YOUR PROJECT/EVENT BENEFIT THE BROOKTON COMMUNITY?

Click or tap here to enter text.

4. HOW DOES THIS PROJECT/EVENT ALIGN TO THE BROOKTON20

Click or tap here to enter text.

5. HOW WILL THE PROJECT/EVENT BE ADVERTISED AND PROMOTED?

Click or tap here to enter text.

6. ACKNOWLEDGEMENT OF SHIRE OF BROOKTON SPONSORSHIP

It is a requirement of funding that the words "Sponsored by the Shire of Brookton" and the Shire's logo be displayed at your project/event.

Please advise the ways you will be able to acknowledge the Shire of Brookton's sponsorship:

- ☐ Display "Shire of Brookton" Logo: on your website and posters, in newspaper advertisements, on event signage, programs and flyers.
- ☐ Display the "Shire of Brookton" flag or banner at your event if possible. (Available from the Shire).
- ☐ Verbal announcements at the project/event.
- ☐ Other.

INCOME	\$	EXPENDITURE	\$
Applicant's cash contributions	Click or tap here to enter text.	Materials	Click or tap here to enter text.
Sponsorship	Click or tap here to enter text.	Labour	Click or tap here to enter text.
Donations in cash	Click or tap here to enter text.	Hire of Equipment	Click or tap here to enter text.
Other grants	Click or tap here to enter text.	Office/Administration	Click or tap here to enter text.
Catering Sales	Click or tap here to enter text.	Venue hire	Click or tap here to enter text.
Fees and Charges e.g. stalls	Click or tap here to enter text.	Advertising	Click or tap here to enter text.
Gate/Door entry fees	Click or tap here to enter text.	Catering Costs	Click or tap here to enter text.
		Entertainment	Click or tap here to enter text.
Other Income (Please List)		Other Expenditure (Please List)	
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
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Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Total of Community Chest Funds requested in cash*			
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Total of Community Chest Funds requested in-kind (e.g. Town Hall hire fee waived if applicable/required)			
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
TOTAL INCOME	Click or tap here to enter text.	TOTAL EXPENDITURE	Click or tap here to enter text.

YOUR INCOME MUST EQUAL YOUR EXPENDITURE

PLEASE INCLUDE SUPPORTING DOCUMENTATION (letters of support, quotes etc)

7. HAS YOUR ORGANISATION RECEIVED COMMUNITY CHEST FUNDING IN THE PREVIOUS FINANCIAL YEAR ☐ YES ☐ NO

HAS THE ACQUITTAL PROCESS BEEN COMPLETED? ☐ YES ☐ NO

IF YES, WHAT WAS THE AMOUNT AND WHAT WAS THE FUNDING FOR?

Click or tap here to enter text.

8. PLEASE LIST BELOW ANY IN-KIND CONTRIBUTIONS IF APPLICABLE (e.g. volunteer or donated labour, materials etc.) HOWEVER, DO NOT INCLUDE IN YOUR BUDGET ABOVE.

Click or tap here to enter text.

9. FUNDING CONDITIONS:

- I. The grant funds will be expended on the agreed project only.
- II. The Shire of Brookton's support of the project will be acknowledged in any advertising or promotional activities related to the project.
- III. Two invitations will be sent to the Shire of Brookton for your event or project.
- IV. The project will conform to all relevant Bylaws and Acts in force at the time.
- V. Any unexpended grant funds will be returned to the Shire of Brookton.
- VI. The funds must be expended and acquitted by 30th June of the financial year in which they are received.
- VII. Invoices and receipts for the expenditure of the Community Chest funds must be provided to Council within three months of the completion of your project/event along with a brief report on your event or project which includes copies of any advertisements, posters, programmes or newspaper coverage.

PLEASE ENSURE YOU HAVE READ THE ABOVE GRANT CONDITIONS BEFORE SIGNING BELOW:

Our organisation agrees to comply with the funding conditions set out above. I declare that I have been authorised to prepare and submit this application, and that the information presented is correct to the best of my knowledge. I understand that if Council approves the application, we will abide by the funding conditions set out above.

PRINT NAME: Click or tap here to enter text.

POSITION: Click or tap here to enter text.

SIGNATURE:

DATE: Click or tap here to enter text.