

Name of Application / Organization / Service Club / Community Group		
Dutton Dunwich - West Elgin Community Fund		
Contact		Position held
Person	Bonnie Rowe	in Secretary organization
Mailing		Telephone /
Address		Cell Phone #
Email		Website
Address		www.escf.ca/community-funds

Specifics of Event / Project / Program requesting funds

The local Steering Committee of the Dutton Dunwich - West Elgin Community Fund (CF), meets 2-3 times/year, to discuss strategies, and review grant applications for our fund.

We are requesting an in-kind donation of the cost of using the Scout Hall meeting room for these meetings.

Total Project Budget

In-kind value approximately \$200

Amount of Funds requested from the Municipality (For in-kind requests, please provide the monetary equivalent of the grant request)

approximate value of rental space \$200

Have you applied to the Municipality for funding in the past?	Yes
Do you want to present your request to Council?	If needed

For Organizations / Service Clubs

Are you a non-profit organization?	Yes, we are an arm of ESCF (see info below)	
Charitable registration number (if applicable)	865337109RR0001	
Date of Incorporation	Dec 11, 2003	
<u>Grant Category:</u> Youth / Senior Event Community Beautification Arts, Culture & Heritage Tourism Development Community Special Event Capital Funding for a Specific Project Other – one time grant request	Our grants could support any/all of these categories	
Please provide a brief history of your organization and indicate if it is incorporated as a non-profit organization. The Dutton Dunwich - West Elgin Community Fund (CF) is an arm of the Elgin St. Thomas Community Foundation (ESCF). The ESCF was incorporated in 2003, and the CF was created in 2020. The purpose of the CF is to support charitable activities in the Dutton Dunwich and West Elgin communities Operating as a fund within the ESCF, the CF is a non-profit, charitable organization.		
Is your group able to issue charitable tax receipts o Yes What are the general objectives / services of your o We believe that by strengthening the gifts, assets and capacity of loc we grant out only the interest earned on these financial gifts. Our go	rganization? al individuals and groups, we strengthen the community. As such, als are: attracting donations to the CF; publicizing the CF to potential	
grant applicants within Dutton Dunwich and West Elgin; recommendi donations, administering the CF, and corresponding with grant applic	cants.	
In what geographical area does your organization o	perate?	
Dutton Dunwich and West Elgin		
Do volunteers participate in your organization? If ye involvement. There are 5 volunteers on our Steering Committee	es, indicate the number of volunteers and type of	
List the Executive Officers of your organization.		
Elizabeth Sebestyen - Chair and Fund Adviser Jerry Galbraith - Vice-Chair and Fund Adviser Bonnie Rowe - Secretary and Fund Adviser Henry Dryfhout - member Anne Marie McWilliam - member		

Project Information

Please provide a brief description of the event, program or project. Include goals and timelines.

The Steering Committee meets 2-3 times/year. For the past 3 years we have met in Municipality of West Elgin spaces - this past year at the Scout Hall. By waiving meeting room fees, the \$200 saved will go into additional grant funds we can award our community organizations. To date we have awarded over \$20,000 to local organizations.

These are the projects which we funded in 2024, totalling \$8500 in grants: \$2500 for the Dutton Sons of Scotland Baseball Diamond renovations \$3000 for the Rodney Park Revitalization \$1500 for the Dutton Cenotaph Project \$1500 for the Wallacetown Fair Grandstand renovations

If this is not a new project or initiative, please describe how it will enhance your program or increase participation and or volunteerism.

By waiving meeting room fees, the \$200 saved will go into additional grant funds we can award our community organizations.

What is the specific purpose that grant funds will be used for?

Waiver of meeting room rental fees.

For in-kind requests, please provide details on type of request (ex. Materials, equipment, resources, etc.)

Meeting room rental, West Lorne Scout Hall

Please indicate what other sources of funding are supporting this Event / Program / Project.

All of our funding sources are from individual community donors, and the investment earnings on these gifts.

Who will benefit from the purposed Event / Project / Program (ex. Children, seniors, etc.)

People of all ages, and organizations that offer projects or programs that directly benefit people in Dutton Dunwich and West Elgin.



Name of Application / Organization / Service Club / Community Group			
Elgin County Plowmen's Association			
Contact	Scott Speers	Position held Vice - President/ Treasurer	
Person		in	
		organization	
Mailing		Telephone /	
Address		Cell Phone #	
Email		Website	
Address			

Specifics of Event / Project / Program requesting funds		
The Elgin County Plowmen's Association present th	e Elgin County Plowing match on the first Saturday	
after Labour Day annually.		
Total Project Budget		
\$6500.00		
40000.00		
Amount of Funds requested from the Municipality (F	or in-kind requests, please provide the monetary	
equivalent of the grant request)		
500.00		
	l	
Have you applied to the Municipality for funding in	No	
the past?		
Do you want to present your request to Council?		
bo you want to present your request to council?	If necessary	

For Organizations / Service Clubs

Are you a non-profit organization?	yes	
Charitable registration number (if applicable)		
Date of Incorporation		
<u>Grant Category:</u> Youth / Senior Event Community Beautification Arts, Culture & Heritage Tourism Development Community Special Event Capital Funding for a Specific Project Other – one time grant request	Tourism Development/ Community Special Event	
Please provide a brief history of your organization a organization.		
The Elgin County Plowing Match has been held his competition where community members can experi	torically for many years. We plan an annual plowing ence and learn about competitive plowing	
Is your group able to issue charitable tax receipts on no	n its own?	
What are the general objectives / services of your c	organization?	
To plan and organize the plowing match, to educate the community about agriculture and competitive plowing		
In what geographical area does your organization of	perate?	
Across Elgin County, different location each year. 2 (Rodney)	.024 - Malahide Township, 2023 - West Elgin	
Do volunteers participate in your organization? If yes, indicate the number of volunteers and type of involvement.		
Yes, Our membership is all volunteer based with ap	proximately 8-10 members.	
List the Executive Officers of your organization.		
Dave Cryderman - President		
Scott Speers - VP and Treasurer Ken Jones - 2nd VP		
Anita Speers - Secretary		
Steve Speller - OPA Rep		

Project Information

Please provide a brief description of the event, program or project. Include goals and timelines. The Elgin County Plowmen's Association is pleased to host the Elgin County Plowing Match. This is an Branch annual event where plower's from across Ontario come to compete before competing at the International Plowing Match. It is held the first Saturday after Labour Day annually. We move the location of the event each year to a different township in Elgin County. The exact location is decided in the spring of each year. This past year we had over 25 competitors and a large turn out of over 100 spectators. We cater to the rural community and attract many that wish to learn about agriculture and competitive plowing. This is an agri - tourism event that draws the attention on many in the community. Each year we have antique tractors and plows as well as horse drawn plows. We aim to educate the community through this event.

If this is not a new project or initiative, please describe how it will enhance your program or increase participation and or volunteerism.

As a agriculture event we look to connect people to the rural roots of the agriculture community. We want to educate many in the county about competitive plowing and bring a fun filled event for all to enjoy. Each year we evaluate how we can make the plowing match a greater success. We look to boost the involvement of plowers that compete as well as the amount of spectators from the community. We would use this sponsorship to boost our advertising and generate more interest from the public to experience the event.

What is the specific purpose that grant funds will be used for?

We will specifically apply the funding to our advertising budget to generate awareness and attraction to the event.

For in-kind requests, please provide details on type of request (ex. Materials, equipment, resources, etc.)

Please indicate what other sources of funding are supporting this Event / Program / Project. Our event is 100% funded by sponsorship, donations and grants. We rely on municipal funding and donations from community businesses the support the plowing match. With the funding this year we are looking to boost our advertising budget to bring more attention to the event and drive involvement.

Who will benefit from the purposed Event / Project / Program (ex. Children, seniors, etc.) All community members to learn about agriculture and experience competitive plowing.

Statement for p	period Nov 1 2023 - October 31 2024		202
Income	BANK/INVESTMENT INTEREST		\$ 5.6
	BANQUET TICKET SALES (LUNCH)		\$ -
	DONATIONS/SPONSORSHIP		\$ 5,135.0
	GRANT - BMO		
	GRANT - OPA		\$ 20.0
	GRANT(S) - GOVERNMENT		\$ 755.0
	MEMBERSHIP FEES		\$ 130.0
	PLOWING ENTRY FEES		\$ 270.0
		Total Income	\$ 6,315.6
Expenses	ADVERTISING/PROMOTION		\$ 963.8
	BANKING FEES		\$ -
	BRANCH ANNUAL MEETING		\$ 100.0
	IN MEMORIUM		\$ -
	OPA CONVENTION		\$ 457.6
	HONOURAIUM		
	PLOWING MATCH EXPENSES		\$ 1,618.4
	QUEEN OF THE FURROW		\$ 500.0
	OPA MEMBERSHIP FEES		\$ 84.7
	PLOWING PARTICIPATION		\$ 1,745.0
		Total Expenses	\$ 5,469.7
	Income/ Loss		\$ 845.9

Elgin County Plowmens Association

			Buc	lget 2025
				2025
Income	BANK/INVESTMENT INTEREST		\$	5.00
	BANQUET TICKET SALES (LUNCH)			
	DONATIONS/SPONSORSHIP		\$	5,000.00
	GRANT - BMO			
	GRANT - OPA			
	GRANT(S) - GOVERNMENT		\$	1,000.00
	MEMBERSHIP FEES		\$	130.00
	PLOWING ENTRY FEES		\$	250.00
		Total Income	\$	6,385.00
Expenses	ADVERTISING/PROMOTION		\$	1,500.00
	BANKING FEES		\$	-
	BRANCH ANNUAL MEETING		\$	100.00
	IN MEMORIUM		\$	-
	OPA CONVENTION		\$	450.00
	HONOURAIUM		\$	-
	PLOWING MATCH EXPENSES		\$	2,000.00
	QUEEN OF THE FURROW		\$	500.00
	OPA MEMBERSHIP FEES		\$	85.00
	PLOWING PARTICIPATION		\$	1,300.00
		Total Expenses	\$	5,935.00
	Income/ Loss		\$	450.00



Name of Application / Organization / Service Club / Community Group			
Four Counties Health Services Foundation			
Contact	Jackie Beatty	Position held Fundraising Coordinator	
Person	backie beatty	in	
		organization	
Mailing		Telephone /	
Address		Cell Phone #	
Email		Website	
Address		fchsfoundation.ca	

Specifics of Event / Project / Program requesting funds			
2024/2025 FCHS Foundation Patient Medical Equipment Appeal			
Total Project Budget			
\$224,200 for 2024/25 FCHS Foundation annual app	peal		
\$55,000 for Portable Ultrasound			
Amount of Funds requested from the Municipality (F	For in-kind requests, please provide the monetary		
equivalent of the grant request)			
\$5,000 toward a Portable Ultrasound for FCHS Emergency Department (budget \$55,000).			
Have you applied to the Municipality for funding in	Yes, there has been excellent support from Mun. of West Elgin in the past. Last year the grant request was unsuccessful, however in 2022 the Foundation		
the past?	received \$6,500 to purchase a Bariatric Stretcher with Scale. Thank you!		
Do you want to present your request to Council?	We were fortunate to be well-received by Council at our deputation		
	on November 28, 2024. We are happy to make additional presentations at Council's request.		
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For Organizations / Service Clubs

Are you a non-profit organization?	Yes			
Charitable registration number (if applicable)	118929546RR0001			
Date of Incorporation	4/22/1987			
Grant Category: Youth / Senior Event Community Beautification Arts, Culture & Heritage Tourism Development Community Special Event Capital Funding for a Specific Project Other – one time grant request	Capital Funding for a Specific Project			
Please provide a brief history of your organization a organization. Yes, The Foundation is incorporated and is a registered charity.				
History: In October 1984, the forming of a fundraising committee of the Four Counties Hos raise \$575,000.	pital board with representation from the four counties catchment area had a goal to			
By May 1986, the fundraising committee had raised \$464,889, with a further \$35,0	00 pledged. The committee had reached \$500,000 or 86% of their goal.			
The board realized then that fundraising for the hospital was going to be an ongoir or introduce new medical equipment continues to be paramount to this day, as go	ng need as equipment reached end of life or became obsolete. The need to replace vernments do not provide funding for capital medical equipment.			
In January 1987, the Four Counties General Hospital Foundation was established	. The foundation was 'chartered' on April 22, 1987.			
Yes What are the general objectives / services of your of The Role of the Foundation is to 'Generate, Receive, Mar Hospital. All medical equipment for FCHS over \$3,000 is acquired to	age, and Disburse' donations to Four Counties General			
In what geographical area does your organization of				
Newbury, Ontario; serving the Counties of Elgin, M				
Do volunteers participate in your organization? If yes, indicate the number of volunteers and type of involvement. Yes. The Foundation has 9 volunteer Board members and 3 ex officio members who meet a minimum of 8 times per year to make governance decisions. These members also assist with Foundation fundraising efforts such as golf tournaments, dinner theatre events, and raffles. They also volunteer by promoting FCHS through community presentations and attending hospital functions. As well, there are other Foundation volunteers who help with various fundraisers and awareness initiatives. In total, there are approximately 30 volunteers who are called on regularly.				
List the Executive Officers of your organization. Board Directors: Tom Jeffery (Chairperson) Judy Bodkin, Harry Denkers, Scott Gawley, Janneke Newitt, Kirk Patterson, Lynda Pelcz, Joanne Vansevenant, Pam White Ex-Officio: Chelsea King, Jackie Herdman, Julie McBrien Staff: - Martha Wortner				
- Jackie Van Eerd Beatty - Rosemary Bartlett				

Project Information

Please provide a brief description of the event, program or project. Include goals and timelines. For the 2024/25 Campaign, the hospital's largest need is the Portable Ultrasound for 24hr bedside diagnosis in the Emergency Department.

The Foundation's goal is to raise the necessary funds toward the purchase of a Portable Ultrasound, providing 24/7 diagnostic imaging for Four Counties' Emergency Department. Timeline for this project is early 2025.

FCHS Foundation realizes the pressure on local government to provide services; hence, West Elgin's investment in quality Care Close to Home is appreciated.

If this is not a new project or initiative, please describe how it will enhance your program or increase participation and or volunteerism. N/A

What is the specific purpose that grant funds will be used for?

The grant would be used to fund a Portable Ultrasound for FCHS Emergency Department. This is the highest priority equipment need identified by ED staff at this time. In emergency situations, the importance of accurate, quick, and efficient scanning cannot be overstated.

For in-kind requests, please provide details on type of request (ex. Materials, equipment, resources, etc.)

N/A

Please indicate what other sources of funding are supporting this Event / Program / Project. FCHS Foundation has raised \$25,339 toward the ultrasound thus far. This was done through a Dinner Theatre event held in Thamesville this past November. The Foundation relies on other community donations as well, and is hopeful that the \$55,000 target can be reached with the potential support of West Elgin assisting this goal.

Who will benefit from the purposed Event / Project / Program (ex. Children, seniors, etc.) A portable ultrasound will benefit patients with internal issues at FCHS, as it can be moved to any room for bedside scanning quickly by a physician. This means preliminary imaging can be done without having to schedule a sonographer in the busy Diagnostic Imaging Suite. Also not having to move an ill or injured patient is beneficial. It will be especially useful in the Emergency Department where quick and efficient diagnosis is essential.

FCHS FOUNDATION BUDGET 2024-2025

	Budget 12 Months Mar 31 2025
INCOME	
Appeal - Fall	100,000
Appeal - Spring	100,000
Golf Tournament	50,000
Community Theatre	40,000
In Memoriam/In Recognition	30,000
Interest GIC's	22,000
Investment/gains (loss) income	15,000
Hospital Contribution to Newsletters	12,000
Auxilary contrib	10,000
-	•
Bequests	10,000
DI Suite Campaign - SWM	10,000
General unrestricted	10,000
Special Events - 3rd Party	10,000
Split the Pot	8,000
Drive Thru Dinner	7,500
Municipality of West Elgin	5,000
Interest General	4,000
ATM Commissions	600
TOTAL INCOME	444,100
EXPENSES	
Salaries + EI + CPP + WSIB	100,000
Community Theatre	20,000
Newsletter	14,000
Golf Tournament Costs	13,000
RBC A+ Mge fees	12,000
Audit fees	10,000
Software contract/maintenance	8,000
Office expenses & new laptop & Printer Jan-Mar 2024	6,000
Drive Thru Dinner	4,500
Bank/credit card fees	3,500
Donor/memorial walls	3,000
Appeal costs - Fall	1,500
Appeal costs - Spring	1,500
Postage	1,200
Non Residents Tax	700
Website Hosting	500
ATM machine repairs	300
Memorial Service	300
Public Relations/board recruitment	250
Subscription Costs	250 250
Total Direct Expenses	200,500
Excess of Revenue over operation expenditure	243,600
Donations to Four Counties Health Services	
General	207,200
Education commitment	12,000
	-
DI Suite Pledge SWM	10,000
Towards Portable Ultra Sound - Emerge Dept Total Cost \$55k	5,000
Total Donations to FCHS	234,200
Excess of Revenue over operation expenditure	9,400
Revised March 2024	

Revised March 2024

Four Counties Health Services Foundation Financial Statements For the year ended March 31, 2024

Four Counties Health Services Foundation Financial Statements For the year ended March 31, 2024

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Independent Auditor's Report

To the Board of Directors, Four Counties Health Services Foundation

Qualified Opinion

We have audited the accompanying financial statements of Four Counties Health Services Foundation (the Foundation), which comprise the statement of financial position as at March 31, 2024, and the statements of operations, changes in net assets and cash flow for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, except for the possible effects of the matter described in the *Basis for Qualified Opinion* section of our report, the accompanying financial statements present fairly, in all material respects, the financial position of the Foundation as at March 31, 2024, and its results of operations and its cash flows for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations.

Basis for Qualified Opinion

In common with many not-for-profit organizations, the Foundation derives revenue from fundraising activities the completeness of which is not susceptible to satisfactory audit verification. Accordingly, verification of these revenues was limited to the amounts recorded in the records of the Foundation. Therefore, we were not able to determine whether any adjustments might be necessary to fundraising revenue, excess of revenues over expenses, and cash flows from operations for the years ended March 31, 2024 and 2023, current assets as at March 31, 2024 and 2023, and net assets as at April 1 and March 31 for both the 2024 and 2023 years. Our audit opinion on the financial statements for the year ended March 31, 2024 was modified accordingly because of the possible effects of this limitation in scope.

We conducted our audit in accordance with Canadian generally accepted auditing standards. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of our report. We are independent of the Foundation in accordance with the ethical requirements that are relevant to our audit of the financial statements in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our qualified audit opinion.

Responsibilities of Management and Those Charged with Governance for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian accounting standards for not-for-profit organizations, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the Foundation's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the Foundation or to cease operations, or has no realistic alternative but to do so.



Those charged with governance are responsible for overseeing the Foundation's financial reporting process.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian generally accepted auditing standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with Canadian generally accepted auditing standards, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Foundation's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Foundation's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Foundation to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

BDO Canada LLP

Chartered Professional Accountants, Licensed Public Accountants

Windsor, Ontario June 27, 2024

Four Counties Health Services Foundation Statement of Financial Position

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March 31	2024		2023
Assets			
Current Cash	\$ 140,482	\$	275,542
Accounts receivable	3,159	. •	2,761
Prepaid expenses	711		
	144,352		278,303
Unrestricted investments (Note 2)	1,586,882		1,352,637
	\$ 1,731,234	\$	1,630,940
Liabilities and Net Assets	•		
Current Accounts payable and accrued liabilities (Note 3)	\$ 3,578	\$	3,536
Deferred revenue	15,522	*	-
	19,100		3,536
Net assets	1,712,134		1,627,404
	\$ 1,731,234	S	1,630,940

On behalf of the Board:

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Janne Vansevenant Director

Four Counties Health Services Foundation Statement of Changes in Net Assets

For the year ended March 31	2024	2023
Balance, beginning of year	\$ 1,627,404	\$ 1,642,954
Excess (deficiency) of revenue over expenditures	84,730	(15,550)
Balance, end of year	\$ 1,712,134	\$ 1,627,404

Four Counties Health Services Foundation Statement of Operations

For the year ended March 31	 2024		2023
Pavanua			
Revenue Bequests Donations Endoscopy campaign Fall campaign Spring campaign Other fundraising ATM commissions Change in unrealized gain (loss) on investments Dividend income Interest income (Note 2)	\$ 28,748 75,677 - 84,317 122,510 67,091 667 59,430 15,183 23,380	\$	42,975 10,000 65,633 138,235 90,700 313 (19,635) 14,629 22,074
Other investment income	 23,380 14,769 491,772	ан (с. 16. 19. година)	9,951 374,875
Expenditures			
Campaign costs Office expenses Investment fees	29,884 28,979		46,456 17,796
Salaries Software contract	11,967 93,834 12,638		11,757 87,496 4,242
	 177,302		167,747
Excess of revenue over operating expenditures	314,470		207,128
Donations to Four Counties Health Services General (Note 4)	 229,740		222,678
Excess (deficiency) of revenue over expenditures	\$ 84,730	\$	(15,550)

Four Counties Health Services Foundation Statement of Cash Flow

For the year ended March 31	 2024	2023
Cash provided by (used in)		
Operating activities Excess (deficiency) of revenue over expenditures Items not involving cash	\$ 84,730	\$ (15,550)
Change in unrealized (gain) loss on held-for-trading investments	(59,430)	19,635
	 25,300	4,085
Net changes in non-cash working capital balances: Prepaid expenses Accounts receivable	(711) (398)	- (1,249)
Deferred contributions Accounts payable and accrued liabilities	15,522	2,196
	 39,755	 5,032
Investing activities Investment purchases Investment disposals	 (340,675) 165,860	(191,721) 167,796
	 (174,815)	 (23,925)
Decrease in cash and equivalents during the year	(135,060)	(18,893)
Cash and equivalents, beginning of year	 275,542	 294,435
Cash and equivalents, end of year	\$ 140,482	\$ 275,542

March 31, 2024

1. Nature of Organization and Summary of Significant Accounting Policies

Nature of Organization	The Four Counties Health Services Foundation ("the Foundation") is a registered charity incorporated in Ontario without share capital. The Foundation generates revenue through fundraising and the management of its investments to enhance or improve the services provided by or the facilities of Four Counties Health Services.
	The Foundation is a registered charity and, as such, is exempt from income tax and may issue income tax receipts to donors.
Basis of Accounting	The financial statements have been prepared by management using Canadian Accounting Standards for Not-for-Profit Organizations.
Revenue Recognition	The Foundation follows the deferral method of accounting for contributions. Restricted contributions are recognized as revenue in the year in which the related expenses are incurred. Unrestricted contributions are recognized as revenue when received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured. Revenue from investments is recognized as it is earned.
Contributed Services	Because of the difficulty of determining their fair value, contributed services are not recognized in the financial statements.
Capital Assets	Purchase of capital assets from operating funds are expensed through the operating fund. The capital assets owned by the Foundation are comprised of office furniture and computer equipment.
Pledges and bequests	The Foundation does not record pledges or bequest receivables, as collection cannot be reasonably assured.

March 31, 2024

1. Significant Accounting Policies (Continued)

Financial Instruments	Financial instruments are recorded at fair value when acquired or issued. In subsequent periods, equities traded in an active market and derivatives are reported at fair value, with any unrealized gains and losses reported in operations. In addition, all bonds and guaranteed investment certificates have been designated to be in the fair value category, with gains and losses reported in operations. All other financial instruments are reported at cost or amortized cost less impairment, if applicable. Financial assets are tested for impairment when changes in circumstances indicate the asset could be impaired. Transaction costs on the acquisition, sale or issue of financial instruments are expensed for those items re-measured at fair value at each statement of financial position date and charged to the financial instrument for those measured at amortized cost.
Use of Estimates	The preparation of financial statements in accordance with Canadian accounting standards for not-for-profit organizations requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities at the date of the financial statements, and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from management's best estimates as additional information becomes available in the future.

March 31, 2024

2. Unrestricted Investments

The book values and estimated fair values of investments as at March 31 were as follows:

	·	2024		2023
	Cost Value	Estimated Fair value	Cost Value	Estimated Fair value
Fixed income	\$ 1,073,480	\$ 1,003,682 \$	871,787 \$	804,564
Equity investments Portfolio shares	502,126	569,248	532,382	534,121
Investment savings accounts	13,952	13,952	13,952	13,952
	\$ 1,589,558	\$ 1,586,882 \$	1,418,121 \$	1,352,637

3. Accounts Payable and Accrued Liabilities

Included in accounts payable and accrued liabilities is \$57 (2023 - \$97) in government remittances payable.

4. Related Party Transactions

Four Counties Health Services Foundation maintains an office in premises owned by Four Counties Health Services. During the year the Foundation transferred \$229,740 (2023 - \$222,678) to Four Counties Health Services. These transactions are in the normal course of operations and measured at the exchange amount, which is the amount of consideration established and agreed upon by the related parties.

Four Counties Health Services is a hospital that provides health care services to the residents of Four Counties and surrounding areas.

The Foundation operates its business in one of the Hospital's buildings. In lieu of rent, the Foundation directly donates money to the Hospital. There is no rental agreement in place and is considered month to month.

March 31, 2024

5. Pledges

As part of its annual fundraising campaign, the organization obtained \$100,000 in pledges. Of this amount, \$10,000 (2023 - \$20,000) is outstanding at year end and has not been included in these financial statements.

6. Financial Instrument Risk

The Foundation is exposed to various risks through its financial instruments. The following analysis provides information about the Foundation's risk exposure and concentration. There have been no significant changes in the nature or concentration of the risk exposures from the prior year, unless otherwise noted.

Liquidity risk

Liquidity risk is the risk that the Foundation encounters difficulty in meeting its obligations associated with financial liabilities. Liquidity risk includes the risk that, as a result of operational liquidity requirements, the organization will not have sufficient funds to settle a transaction on the due date; will be forced to sell financial assets at a value, which is less than what they are worth; or may be unable to settle or recover a financial asset. Liquidity risk arises from accounts payable and accrued liabilities. The Foundation manages its liquidity risk by forecasting its cash needs on a regular basis and seeking additional information based on those forecasts.

Interest rate risk

Interest rate risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market interest rates. The Foundation is exposed to interest rate risk arising from the possibility that changes in interest rates will affect the value of fixed income denominated investments. This is mitigated by having a fixed interest rate on the GIC. Refer to Note 2 for current values held in these investments.

Other price risk

Other price risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market prices (other than those arising from interest rate risk), whether those changes are caused by factors specific to the individual financial instrument or its issuer, or factors affecting all similar financial instruments traded in the market. The Foundation is exposed to other price risk through its portfolio of investments. The foundation mitigates this risk by reviewing the statements and having regular communiciations with the investment advisor. Refer to Note 2 for current values held in these investments.



Name of Application / Organization / Service Club / Community Group KIWANIS CLUB OF RODNEY		
Contact Person	Becky Byers	Position held President in organization
Mailing Address		Telephone / Cell Phone #
Email Address		Website

Specifics of Event / Project / Program requesting funds Meetings - 2nd and 4th Wednesday of the month (September 2024-June 2025)		
Twoonie Tuesday - August 26 (2025) - road closure	requested	
Rodney Night Market - November 16 (2024) - road	closure requested	
Total Project Budget		
Amount of Funds requested from the Municipality (For in-kind requests, please provide the monetary equivalent of the grant request) Rodney Night Market - request for funding support in the amount of \$2500 (as previously received)		
Have you applied to the Municipality for funding in the past?	Yes	
Do you want to present your request to Council?	No	

For Organizations / Service Clubs

Are you a non-profit organization?	Yes		
Charitable registration number (if applicable)			
Date of Incorporation			
Grant Category: Youth / Senior Event Community Beautification Arts, Culture & Heritage Tourism Development Community Special Event Capital Funding for a Specific Project Other – one time grant request	Community fundraising events		
Please provide a brief history of your organization and indicate if it is incorporated as a non-profit organization. Kiwanis Club of Rodney is a part of a global volunteer organization serving children of the world - one child at a time.			
Is your group able to issue charitable tax receipts on its own? No			
What are the general objectives / services of your organization? Community fundraising events to provide support to youth and families in the area			
In what geographical area does your organization of Rodney and surrounding West Elgin areas	perate?		
Do volunteers participate in your organization? If yes, indicate the number of volunteers and type of involvement. Currently 21 members volunteering to attend meetings, and support local events			
List the Executive Officers of your organization. Becky Byers - president Larry Schneider - past president Ron Abram - secretary Paul Downie - treasurer John E Johnston - membership chair			

Project Information

Please provide a brief description of the event, program or project. Include goals and timelines. Twoonie Tuesday

Selling of hot dogs, pop, chips, ice cream (local ice cream shop) for the purpose of fundraising and community involvement. Car show, music, for entertainment

Night Market

Gathering of artisans, non profit organizations, food vendors to set up and sell products, services or inform the community of upcoming events and resources. Collection of food for the Caring Cupboard.

If this is not a new project or initiative, please describe how it will enhance your program or increase participation and or volunteerism.

Youth volunteers in our community attend and serve at each event.

Twoonie Tuesday is a community gathering event to enrich the community. The night market is to showcase local (Elgin) business and entrepreneurs to the community in a fun and entertaining way.

What is the specific purpose that grant funds will be used for?

Road closure - both events

\$2500 - supports advertising, portapotties, extra expenses to run the market. Costs are typically low and we have rarely used the full amount slotted to us.

For in-kind requests, please provide details on type of request (ex. Materials, equipment, resources, etc.)

See above

Please indicate what other sources of funding are supporting this Event / Program / Project. Other fundraising monies brought in throughout the year support all our events. Community partners and businesses often donate in support of our events as well.

Who will benefit from the purposed Event / Project / Program (ex. Children, seniors, etc.) Children, families, individuals in need, community, local businesses



Name of App Optimist Club	lication / Organization / So of West Lorne	ervice Club / Community Group
Contact Person	Linda Ryerse	Position held Secretary in organization
Mailing Address		Telephone / Cell Phone #
Email Address		Website https://westlorneoptimistclub.com/

Specifics of Event / Project / Program requesting funds The Optimist Club of West Lorne is requesting the Municipality waive fees associated with the rental of the municipal spaces for the upcoming year (2025) of planned events. Additional requests may be submitted throughout the yrear for events not yet planned.

Total Project Bud	lget
Approximate costs	s detailed below

Amount of Funds requested from the Municipality (For in-kind requests, please provide the monetary equivalent of the grant request) Scout Hall Rental for Monthly Kids Craft (Jan-Dec 2025) - 8 x \$35 = \$280

Miller Park Pavillion for Easter Egg Hunt (April) - \$10

Arena Warm Room and Washrooms for Mothers Day Road Race (May) - 5hrs x \$25 = \$125 Miller Park Pavillion (day Use) and Scout Hall for Car Show and Shine (June) - \$40 + \$35

Total \$450 plus tax based on 2024 Rental Fees

Have you applied to the Municipality for funding in the past?	Yes
Do you want to present your request to Council?	if required

For Organizations / Service Clubs

Are you a non-profit organization?	Yes				
Charitable registration number (if applicable)					
Date of Incorporation	June 27, 1975				
<u>Grant Category:</u> Youth / Senior Event Community Beautification Arts, Culture & Heritage Tourism Development Community Special Event Capital Funding for a Specific Project Other – one time grant request	Youth and Community				
Please provide a brief history of your organization a organization. The Optimist Club of West Lorne is incorporated as All members of the club are volunteers who organiz which support needs for our local youth and commu	a non-profit organization. a and particiapte in various fundraising events				
Is your group able to issue charitable tax receipts on its own? no					
What are the general objectives / services of your organization? Serving the youth in our area and doing what we can to support the community.					
In what geographical area does your organization of West Elgin	perate?				
Do volunteers participate in your organization? If ye involvement. Every member of the organization are volunteers.					
List the Executive Officers of your organization. Past President - Tom Kalita President - Marsha Kalita Vice Presidient - Nikki Chase Treasurer - Krista Bodkin Secretary - Linda Ryerse Board of Directors - Joan Neil, Shannon Todd, Ron	Ross, Fay Walsh, Steve Emery, Jenn Blanchard				

Project Information

Please provide a brief description of the event, program or project. Include goals and timelines.
If this is not a new project or initiative, please describe how it will enhance your program or increase
participation and or volunteerism. Waiving fees associated with the rental of municipal spaces allows the optimist club to provide
additional finances for youth and community programming rather than rental fees.
What is the specific purpose that grant funds will be used for? To cover the costs associated with facility rental
For in-kind requests, please provide details on type of request (ex. Materials, equipment, resources, etc.)
Disease indicate what other sources of funding are supporting this Event / Dregree / Dreiset
Please indicate what other sources of funding are supporting this Event / Program / Project.
Who will benefit from the purposed Event / Project / Program (ex. Children, seniors, etc.)
Children and Community



Name of Appl Optimist Club	ication / Organization / Service Club / Mothers Day Road Race	Community Group
Contact Person	Ken Neil	Position held Road Race Chairperson in organization
Mailing Address		Telephone / Cell Phone #
Email Address		Website https://westlorneoptimistroadrace.com/

Specifics of Event / Project / Program requesting fu Optimist Club of West Lorne Mother's Day Road Ra	nds ace in partnership with the Municipality of West Elgin
Total Project Budget \$5500.00	
Amount of Funds requested from the Municipality (F equivalent of the grant request) \$2500.00	For in-kind requests, please provide the monetary
Have you applied to the Municipality for funding in the past?	Yes
Do you want to present your request to Council?	If required

For Organizations / Service Clubs

Are you a non-profit organization?	Yes				
Charitable registration number (if applicable)					
Date of Incorporation	June 27, 1975				
<u>Grant Category:</u> Youth / Senior Event Community Beautification Arts, Culture & Heritage Tourism Development Community Special Event Capital Funding for a Specific Project Other – one time grant request	Community Special Event				
Please provide a brief history of your organization and indicate if it is incorporated as a non-profit organization. The Optimist Club of West Lorne participates in the community by raising funds which are put towards supporting our local youth. Examples include; Miller Park, Kids Crafts, Teen Cooking, Easter Egg Hunt, etc					
Is your group able to issue charitable tax receipts or No	n its own?				
What are the general objectives / services of your o Bring out the best in our youth and our community	rganization?				
In what geographical area does your organization o West Elgin	perate?				
Do volunteers participate in your organization? If yes, indicate the number of volunteers and type of involvement. The organization is solely made up of volunteers. There are approximately 50 members.					
List the Executive Officers of your organization. Past President - Tom Kalita President - Marsha Kalita Vice President - Nikki Chase Treasurer - Krista Bodkin Secretary - Linda Ryerse Boards of Directors - Ron Ross, Joan Neil, Shannon Todd, Fay Walsh, Jenn Blanchard, Steve Emery					

Project Information

Please provide a brief description of the event, program or project. Include goals and timelines. This is a road race offering a Kids fun run, 5K walk, 5K & 10K run and occurs on Mother's Day each year.

This year marks the 12th anniversary for this event.

The course is nationally certified with Athletics Canada and an official timer is hired to time the race for each individual.

All profits from the event are used to support local community projects and/or children's charities as decided upon by the volunteers of the Optimist Club.

If this is not a new project or initiative, please describe how it will enhance your program or increase participation and or volunteerism.

What is the specific purpose that grant funds will be used for? Help off set costs associated with running the event allowing for increased funds to support the chosen charities and local community projects.

Cover costs associated with timekeeper, race shirts, race awards, advertising etc.

For in-kind requests, please provide details on type of request (ex. Materials, equipment, resources, etc.)

Firetruck for traffic control at corner of Graham and Marsh. Pylons to mark race lane on Graham Road from arena to Marsh Line. Use of arena washrooms and warm room for registrations (requires use of WiFi). Any support required from municipal staff as needed.

Please indicate what other sources of funding are supporting this Event / Program / Project. Participant registration costs

Who will benefit from the purposed Event / Project / Program (ex. Children, seniors, etc.) Youth involved in the charities or programs being supported. Community Businesses All people involved in the event Upcoming optimist club community projects.

Budget			Paid	Rer	Remaining	
Expenses						
Race Supplies [1]	\$	300.00		\$	300.00	
Venue (arena warm	\$	150.00		\$	150.00	
Timekeeper	\$	700.00		\$	700.00	
Shirts	\$	1,700.00		\$	1,700.00	
Wilson Trophy	\$	1,500.00		\$	1,500.00	
Advertising	\$	500.00		\$	500.00	
Website Domain	\$	200.00		\$	200.00	
Misc	\$	150.00		\$	100.00	
Total	\$	5,200.00		\$	5,200.00	
Revenue						
Registrations		\$4,000				
Municipal Grant		\$2,500				
Total		\$6,500				

[1] Water for race participants (course and after) Post race refreshments

2024 Road Race Financial	Club Budget = \$3500, less municiple grant			
Revenue				
RegistrationPd via Race Roster		\$3,990.00		
Registration - Pd via cash		\$375.00		
T-Shirts (\$20 ea)		\$100.00		
Municipal Grant (submit receipts totaling)		<u>\$2,000.00</u>		
TOTAL IN		\$6,465.00		
Expenses				
AFC Business Services (Domain Name) Oct2023	\$21.57		\$1.25	
WRACE - deposit (pd Dec 2023 by cheque)	\$250.00			
WRACE - final payment (pd by etransfer 12May)	\$340.00		\$1.25	
Medallions	\$1,305.16		\$1.25	
Labels for Medallions	\$13.55			
ShirtsTNT shirts	\$1,666.75		\$1.25	
Caution Signs for traffic	\$79.10		\$1.25	
Water, protein bars - first shop	\$50.90		\$1.25	
Water, bananas, protein bars - second shop	\$42.42		\$1.25	
Spray Paint for sign	\$20.33		\$1.25	-
Flowers	\$180.00		\$1.25	
Total Service Charges for e-transfers	<u>\$11.25</u>			
TOTAL OUT	\$3,981.03			
Closing Balance		\$2,483.97		
¥				



Name of Application / Organization / Service Club / Community Group		
Rodney Cruise In - Charity Car Show		
Contact Person	Judd Kennedy	Position held in Volunteer organization
Mailing Address		Telephone / Cell Phone #
Email Address		Website N/A

Specifics of Event / Project / Program requesting funds

Yearly Cruise night held the Friday of Father's Day weekend brining folks from all over SW Ontario to the downtown of Rodney.

Years ago it was on the closed off Furnival Rd. Recently it has not been. Many of the Cruisers have said they'll come if the street is shut off, due to safety reasons of folks walking around the vehicles that show up. Many of the local Cruises do shut off the street and it's more like a community atmosphere when they are. Kids of all ages are scurrying between & around vehicles.

In case of an emergency situation, the street can be cleared VERY quickly due to everything is mobile.

Total Project Budget

Amount of Funds requested from the Municipality (For in-kind requests, please provide the monetary equivalent of the grant request)

Have you applied to the Municipality for funding in the past?	Not for this event
Do you want to present your request to Council?	Sure

Are you a non-profit organization?	All volunteers and Charities	
Charitable registration number (if applicable)		
Date of Incorporation		
<u>Grant Category:</u> Youth / Senior Event Community Beautification Arts, Culture & Heritage Tourism Development Community Special Event Capital Funding for a Specific Project Other – one time grant request	Youth/Senior Culture/Tourism Community Special Event	
Please provide a brief history of your organization a	ind indicate if it is incorporated as a non-profit	
organization.		
All Volunteer. Pete & Gail used to put it on for the community. The last one they did there were about 300 vehicles show up.		
Is your group able to issue charitable tax receipts on its own?		
What are the general objectives / services of your organization?		
Bring folks to our Municipality. Bring folks from the Municipality out and have something to do. Generate interest in our town.		
In what geographical area does your organization operate? Rodney. Bring folks from throughout SW Ontario.		
Do volunteers participate in your organization? If yes, indicate the number of volunteers and type of involvement. ALL Volunteers Unsure on numbers. Rodney Firefighters ass., Rodney Caring Cupboard Food Bank, Rodney Fair, Lions Club		
List the Executive Officers of your organization.		
2		
Judd Kennedy & Dan Balint		

Project Information

Please provide a brief description of the event, program or project. Include goals and timelines.
As Stated above.
To bring folks to Rodney. Promote Rodney. Get Folks from Rodney out and about socializing.
Bring in cash/funds/food to different organizations in Rodney.
Promote all our downtown businesses. Pretty much all of them are participating in this event.
If held anywhere else in town, then they won't get the exposure.
In here anywhere else in town, then they work get the exposure.
If this is not a new project or initiative, please describe how it will enhance your program or increase
participation and or volunteerism.
Not new
What is the energific numbers that grant funde will be used for?
What is the specific purpose that grant funds will be used for?
Close off the main drag of Rodney(Furnival Road, Queen to Rodney Scoop) from 5-8pm on Friday
June 13
For in-kind requests, please provide details on type of request (ex. Materials, equipment, resources,
etc.)
Please indicate what other sources of funding are supporting this Event / Program / Project.
Prizes from businesses for the cruisers.

Who will benefit from the purposed Event / Project / Program (ex. Children, seniors, etc.)

EVERYONE. Rodney and the Municipality. Non profit community organizations. (listed above)



Name of Application / Organization / Service Club / Community Group		
Rodney and District Horticulture Society		
Contact Person	Lynda Ford	Position held Secretary in organization
Mailing Address		Telephone / Cell Phone #
Email Address		Website rodneyhortsociety.ca

Specifics of Event / Project / Program requesting fur Fundraiser for the Rodney Horticulture Society. Ann raiser for the Society		
Total Project Budget \$100 Door prizes, table covers covered by board		
to boor prizes, table covers covered by board		
Amount of Funds requested from the Municipality (For in-kind requests, please provide the monetary equivalent of the grant request) Rental of recreation Hall Rodney for 2 hours to set up Friday May 16 Plant Sale 8 am to 12 pm for sale Just over 6 hours (the large room only) @\$50/hour x6=\$300		
Have you applied to the Municipality for funding in the past?	Yes	
Do you want to present your request to Council?	No	

Are you a non-profit organization?	yes	
Charitable registration number (if applicable)	not for profit organization	
Date of Incorporation	1920	
<u>Grant Category:</u> Youth / Senior Event Community Beautification Arts, Culture & Heritage Tourism Development Community Special Event Capital Funding for a Specific Project Other – one time grant request	The Rodney and Distrcit Horticulture Society plant flower beds and areas in the town of Rodney and maintains them during the year. Community Beautification	
Please provide a brief history of your organization and indicate if it is incorporated as a non-profit organization.		
Is your group able to issue charitable tax receipts on its own? No What are the general objectives / services of your organization?		
Beautification of downtown Rodney		
In what geographical area does your organization operate? Rodney		
Do volunteers participate in your organization? If yes, indicate the number of volunteers and type of involvement. In 2024 vounteer hours totalled 1172		
List the Executive Officers of your organization. President Gwen Schneider Vice president Carla Ross Secretary Lynda Ford Treasurer Molly Schleihauf		

Project Information

Please provide a brief description of the event, program or project. Include goals and timelines.
If this is not a new project or initiative, please describe how it will enhance your program or increase
participation and or volunteerism.
What is the specific purpose that grant funds will be used for?
Hall Rental
Far in kind requests, places provide details on two of request (av. Materials, equipment, resources
For in-kind requests, please provide details on type of request (ex. Materials, equipment, resources,
etc.)
Please indicate what other sources of funding are supporting this Event / Program / Project.
Membership fees
Who will benefit from the purposed Event / Project / Program (ex. Children, seniors, etc.)
All the community



Name of Ap	plication / Organization / Service Cl	ub / Community Group
Rodney Shufflers and Carpet Bowlers		
Contact Person	Judd Kennedy	Position held Volunteer in organization
Mailing Address		Telephone / Cell Phone #
Email Address		Website N/A
Specifics of Event / Project / Program requesting funds		
Program requesting assistance. Weekly community Shuffleboard and Carpet bowling. Every Monday and Thursday mornings.October through May. As most of the players are seniors on OAS & CPP, we are hoping for assistance in the \$5 playing fee per player per event, charged by the municipality. (in 2023 it was \$3. Before that it was \$30/season as a member charge and we paid the insurance in that instance <\$200/season) Either of these would increase the number of players coming out		
Total Project Budget approximately 22 members currently		

Amount of Funds requested from the Municipality (For in-kind requests, please provide the monetary equivalent of the grant request) ...all of this depends on the number of players coming out to play regularly...lets say 20(5 full courts)...for now...

At 32 weeks, twice a week at \$2 per event x 22 people = \$3168..... OR

22 people @ \$40/season= \$880(we pay the insurance which was <\$200/season before) Current is \$7920(if 22 folks) plus insurance. "IF" we go with this, it's \$7040, we pay the insurance of <\$200/season.

Have you applied to the Municipality for funding in the past?	Nonot as far as we know
Do you want to present your request to Council?	If needed, sure

For Organizations / Service Clubs

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Are you a non-profit organization?	No	
Charitable registration number (if applicable)	N/A	
Date of Incorporation	N/A	
<u>Grant Category:</u> Youth / Senior Event Community Beautification Arts, Culture & Heritage Tourism Development Community Special Event Capital Funding for a Specific Project Other – one time grant request	Senior Event	
Please provide a brief history of your organization a organization.	nd indicate if it is incorporated as a non-profit	
Rodney Shufflers and Carpet Bowlers have been playingin the Community Center since the building was built(as far as we know) Seniors, Indigenous and handicapped play for 8 months, from throughout Elgin & West Elgin. (also from throughout Ontario) We are all volunteers and are not incorporated.		
Is your group able to issue charitable tax receipts or No	n its own?	
What are the general objectives / services of your organization? To get Folks out (seniors, Indigenous and handicapped) socializing & exercizing with others from our communities.		
In what geographical area does your organization operate? We operate in West Elgin(Rodney), but folks from around Ontario sometimes come to play also.		
Do volunteers participate in your organization? If yes involvement. All are Volunteers. We run, clean & organize eac Tournament.		
List the Executive Officers of your organization. Louise Vanderloo - Secretary Barb Bijker - President Judd Kennedy		

Project Information

Please provide a brief description of the event, program or project. Include goals and timelines.

Our twice weekly program.

We currently have 8 shuffleboard courts available to be played on. Our goal would be to have all courts full of local, community folks, playing twice a week.

Having a more cost effective price to play will entice more people to come out. It would be nice to be able to go back to the \$3 per person per day or the seasonal membership as before.

If this is not a new project or initiative, please describe how it will enhance your program or increase participation and or volunteerism.

A more reasonable cost should help. Since everyone involved is a Volunteer, it would definately enhance the program and should entice more Seniors, Indigenous & Handicapped folks to come out to fill our courts and socialize.

What is the specific purpose that grant funds will be used for?

As stated above, supplement community activity charges.

For in-kind requests, please provide details on type of request (ex. Materials, equipment, resources, etc.)

Supplement community senior activities

Please indicate what other sources of funding are supporting this Event / Program / Project.

N/A

Who will benefit from the purposed Event / Project / Program (ex. Children, seniors, etc.)

The community, every week. Seniors, Indigenous & Handicapped people wanting to play shuffleboard or Carpet Bowl.



Name of Appl	ication / Organization / Service Club /	Community Group
	Dedney Shufflere	
	Rodney Shufflers	
Contact	Judd Kennedy	Position held Volunteer
Person		in
		organization
Mailing		Telephone /
Address		Cell Phone #
Email		Website
Address		N/A
Specifics of Event / Project / Program requesting funds		
Event		
		ig the 2nd Rodney Tournament August 26/27/28
2025. They are a Non Profit organization bringing folks from all over Ontario to play Shuffleboard, here		
in our community. There could be over 120 folks and also members of our community playing.		
Last year this event was the innaugural Rodney Tournament and was the best attended of all 8 of		
the OSA events throughout Ontario.		
Total Project Budget		
Hall rental and insurance for the 3 day event.		

Amount of Funds requested from the Municipality (For in-kind requests, please provide the monetary equivalent of the grant request)

Last year was \$1000 for the hall and \$250 for insurance, after a waive of \$600 on the hall rental.

Have you applied to the Municipality for funding in the past?	Nonot as far as we know (just the Hall rental last yeardidn't apply for that though.)
Do you want to present your request to Council?	If needed, sure

Are you a non-profit organization?	No	
Charitable registration number (if applicable)	N/A	
Date of Incorporation	N/A	
<u>Grant Category:</u> Youth / Senior Event Community Beautification Arts, Culture & Heritage Tourism Development Community Special Event Capital Funding for a Specific Project Other – one time grant request	Senior Event Community Special Event Tourism Development	
Please provide a brief history of your organization a organization.	nd indicate if it is incorporated as a non-profit	
Rodney Shufflers and Carpet Bowlers have been playing in the Community Center since the building was built(as far as we know) Seniors, Indigenous and handicapped play here, from throughout Elgin, West Elgin & Ontario. Since we now have 8 courts, the OSA held the innaugural Rodney Shuffleboard Tournament here last year.(far as we know1st ever) We are not incorporated or non-profit. The OSA is non-profit		
Is your group able to issue charitable tax receipts of No	n its own?	
What are the general objectives / services of your o	rganization?	
To get Folks out (seniors, Indigenous and handicapper communities.	,	
For this eventbring folks from other areas of Ontario to		
In what geographical area does your organization o We operate in West Elgin(Rodney), but folks from The OSA is all through Ontario		
Do volunteers participate in your organization? If yes, indicate the number of volunteers and type of involvement. All are Volunteers. We run, clean & organize each event every week(Mon & Thurs a.m) and host the yearly OSA Tournament.		
List the Executive Officers of your organization. Louise Vanderloo - Secretary Barb Bijker - President Judd Kennedy		

Project Information

Please provide a brief description of the event, program or project. Include goals and timelines.

The Ontario Shuffleboard Association will be holding the Rodney tournament Aug 26/27/28 2025 here. They are a non-profit organization bringing folks from all across Ontario to play here in our Community. Both amateur and professional players will be attending. This could bring close to 120 folks here, as well as many local people, to play. The spouses will be in additional.

Last year this event was the 1st ever here in Rodney and was the highest attended of all the 8 events the OSA puts on.

If this is not a new project or initiative, please describe how it will enhance your program or increase participation and or volunteerism.

It will help make the event be even more successful by not having to put out cash to make the event possible. Entice folks and players to come out by keeping costs down.

What is the specific purpose that grant funds will be used for?

As stated above, Hall Rental and insurance for the 3 days.

For in-kind requests, please provide details on type of request (ex. Materials, equipment, resources, etc.)

Resources. Hall Rental and Insurance for the 3 day tournament

Please indicate what other sources of funding are supporting this Event / Program / Project. Nothing

Who will benefit from the purposed Event / Project / Program (ex. Children, seniors, etc.) Community/Municipality. Seniors, Indigenous and Handicapped people wanting to play Shuffleboard in a tournament setting. Everyone who attends.



Name of Application / Organization / Service Club / Community Group Tiny Tots Co-operative Nursery School/EarlyON West		
Contact Person	Shelley Smith	Position held Supervisor in organization
Mailing Address		Telephone / Cell Phone #
Email Address		Website
Specifics of Event / Project / Program requesting funds Wednesday morning mobile/outreach EarlyhON play groups for families/caregivers of children ages 0-6years.		
Total Project Budget \$ 4504.50 (Wages, mileage, supplies-Tiny Tots/EarlyON) \$ 4169.70 (in-kind space-Municipal)		
Amount of Funds requested from the Municipality (For in-kind requests, please provide the monetary equivalent of the grant request) \$35/hr x 3 hrs x 41 weeks (Jan to June and Sept to Dec) + tax = \$4169.70		
Have you app the past?	plied to the Municipality for funding in	yes
Do you want	to present your request to Council?	if needed

Are you a non-profit organization?	yes	
Charitable registration number (if applicable)	892881871RR0001	
Date of Incorporation	Nov 10, 1078	
<u>Grant Category:</u> Youth / Senior Event Community Beautification Arts, Culture & Heritage Tourism Development Community Special Event Capital Funding for a Specific Project Other – one time grant request	Youth Event	
Please provide a brief history of your organization and indicate if it is incorporated as a non-profit organization. Tiny Tots has been offering licensed childcare and other programs for families since 1975. Incorporated in 1978 as a non-profit, charitable organization. Tiny Tots has a purchase of service agreement with the City of St Thomas to provide EarlyON programs to families/caregivers and children ages 0-6 years.		
Is your group able to issue charitable tax receipts o yes	n its own?	
What are the general objectives / services of your of To provide weekly outreach programs to build come development, meeting community needs, delivered gudelines.	munity, connect famliies to services, enhance child	
In what geographical area does your organization of Tiny Tots in Rodney, EarlyON in Wallacetown, Dutt	operate? on, West Lorne, Rodney	
Do volunteers participate in your organization? If yes, indicate the number of volunteers and type of involvement. Tiny Tots, yes, board members, co-operative, 16 members currently		
List the Executive Officers of your organization. Cassandra McCallum Shannon Baptista Michele Barton		

Project Information

Please provide a brief description of the event, program or project. Include goals and timelines. Two hour play group, drop in, to provide support and education to families/caregivers with children ages 0-6 years. Providing quality learning experiences. Connecting parents to professionals, services, to support special needs, development of children and well-being of families. If this is not a new project or initiative, please describe how it will enhance your program or increase participation and or volunteerism. We currently hold weekly programs in several in-kind locations across the west end of Elgin County. Programs are also held in our main centre at Adborough, the local libraries and parks and nature reserves. By offering services in various locations we are able to reach families to whom transportation is a barrier. From June to October we serviced an average of 30 participants monthly. What is the specific purpose that grant funds will be used for? In-Kind Request For in-kind requests, please provide details on type of request (ex. Materials, equipment, resources, etc.) for space at the West Lorne Scout Hall Wednesdays from 9am until 12:00pm. Program runs 9:30-11: 30 with half an hour for set up and take down. Please indicate what other sources of funding are supporting this Event / Program / Project. Government of Ontario, through Children's Services St Thomas Elgin Who will benefit from the purposed Event / Project / Program (ex. Children, seniors, etc.) Families and Caregivers with children ages 0-6 years.

Tiny Tots Co-operative Nursery School of Aldborough Inc.

Financial Statements

For The Year Ended June 30, 2023

Tiny Tots Co-operative Nursery School of Aldborough Inc.

Financial Statements

For the year ended June 30, 2023

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FINANCIAL REVIEW CERTIFICATE

We certify that the statements of receipts & disbursements and assets & liabilities of Tiny Tots Co-operative Nursery School of Aldborough Inc., for the fiscal year ended June 30, 2023, are correct, and that our examination of the books and records of Tiny Tots Co-op included tests to ensure:

- 1. Cash receipts were correctly recorded;
- 2. Recorded vouchers were accurate and authentic;
- 3. Investment and similar assets which were recorded actually exist.

Date: November 16, 2023

Financial Reviewer: Meliesa Wardell Signature

Phone 519-762-3070

Tiny Tots Co-operative Nursery School of Aldborough Inc Statement of Financial Position As At June 30				
Assets		2023		2022
Current				
Cash & Bank	\$	111,748.49	\$	75,137.13
Cash - Restricted		9,667.51		20,711.15
HST Refundable		1,900.66		1,862.75
Equipment		2,681.28		2,681.28
Less : Accumulated Depreciation		-2,077.98		-1,927.15
Total Assets	\$	123,919.96	\$	98,465.16
Liabilities and Net Assets Current Accounts Payable Deferred Revenue	\$	6,886.43	\$	3,051.02 0.00
Total Liabilities		6,886.43		3,051.02
Net Assets				
Unrestricted Net Assets, beginning of period		95,414.14		80,411.35
Receipts over/(under) disbursements for year		20,574.47		13,195.29
Other Items affecting Net Assets		1,044.92		1,807.50
Unrestricted net assets, end of period 117,033.53 95,414.14				
Total Liabilities and Net Assets	\$	123,919.96	\$	98,465.16

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Tiny Tots Co-operative Nursery School of Aldborough Inc Statement of Operations For the Year Ended June 30				
		2023		2022
Receipts				
Funding	\$	107,585.60	\$	3,044.74
Grants	\$	-	\$. 88,260.00
Childcare Fees	\$	18,480.98	\$	15,044.73
Fundraising	\$	26,851.69	\$	19,494.75
Child Sponsorship	\$	-	\$	-
Memberships	\$	_	\$	616.00
Investment Income	\$	187.69	\$	157.74
GOG	\$	18,671.76	\$	21,671.76
WEG	\$	4,266.90	\$	3,886.63
Total Receipts	\$	176,044.62	\$	152,176.35
Disbursements				
Administration	\$	12,420.32	\$	14,273.89
Program Costs	\$	18,624.72	\$	7,802.96
Fundraising	\$	972.43	\$	105.00
Fees	\$	150.00	\$	100.00
Office	\$	1,534.01	\$	1,245.44
Insurance	\$	2,398.50	\$	2,222.64
Wages	\$	114,014.97	\$	107,641.01
Maintenance	\$	-	\$	10.72
Occupancy Costs	\$	5,204.37	\$	4,937.62
Rent Expense	\$	-	\$	453.25
Depreciation	\$	150.83	\$	188.53
Total Disbursements \$ 155,470.15 \$ 138,981.06				
Receipts over (under) disbursements	\$	20,574.47	\$	13,195.29

Tiny Tots Co-operative Nursery School of Aldborough Inc.

Notes to the Financial Statements

For the Year Ended June 30, 2023

- 1. Significant Accounting Policies
 - a. Nature of organization

Tiny Tots Co-operative Nursery School of Aldborough Inc. is a non-profit organization. The Co-operative cares for children and brings fun to those in the program.

b. Fund Accounting

Within the Canadian generally accepted accounting standards for not-for-profit organizations, the association follows the restricted fund method of accounting for contributions. Contributions and expenditures are recorded through general fund accounts.

c. Financial Instruments

The Co-operative has determined that the estimated fair value of the financial assets and liabilities do not differ considerably from their book value.

d. Revenue Recognition

The contributions are recognized as assessed.

e. Use of estimates

The preparation of financial statements in accordance with Canadian generally accepted accounting standards for not-for-profit organizations requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates and may have impact on future periods.

2. Depreciation

Depreciation is taken by 20% of book value.



Name of Application / Organization / Service Club / Community Group			
West Elgin Community Health Centre			
Contact Person	Cindy da Costa	Position held in Registered Early Childhood organization Educator	
Mailing Address		Telephone / Cell Phone #	
Email Address		Website Www.wechc.on.ca	
Specifics of E	vent / Project / Program requesting fu	nds	
- 65 - C	· · · · · · · · · · · · · · · · · · ·	Families of Children under 18 months	
register to go for a walk with Staff along Miller Park path. Once done walking we join together for a free lunch.			
Total Project	Budget		
- \$100 + tax request for inking donation for pavilion rental from impality - WECHE will pay for food expenses.			
Amount of Funds requested from the Municipality (For in-kind requests, please provide the monetary equivalent of the grant request)			
20.00 + tax x 5 = \$100.00 + tax			
Have you app the past?	lied to the Municipality for funding in	Yes	
Do you want t	to present your request to Council?	only if necessary	

Are you a non-profit organization?	Ves
Charitable registration number (if applicable)	1335572 535 RR 0001
Date of Incorporation	1994
Grant Category: Youth / Senior Event Community Beautification Arts, Culture & Heritage Tourism Development Community Special Event Capital Funding for a Specific Project Other – one time grant request	Youth and Child/Event
Please provide a brief history of your organization a organization. The WECHE provides health and	social Services that are accountable.
accessible, efficient and governed &	of the Community - Interdisciplinary
team provides health care, range	of Community programs, illness
prevention services and health promo	
Is your group able to issue charitable tax receipts o $\sqrt{3}$	n its own?
	rganization?
What are the general objectives / services of your o	
What are the general objectives / services of your of We believe bousing, education if health and well being. We believe land in way of recieving care.	Juge, literacy, poverty should not set
What are the general objectives / services of your of We believe housing, education if health and well being. We believe la in way of recieving care. In what geographical area does your organization of	guege, literacy, poverty should not set perate?
What are the general objectives / services of your of We believe bousing, education if health and well being. We believe land in way of recieving care.	guege, literacy, poverty should not set perate?
What are the general objectives / services of your of We believe housing, education if health and well being. We believe la in way of recieving care. In what geographical area does your organization of	perate?
What are the general objectives / services of your of We believe howing, education of health and well being. We believe In in way of recieving care. In what geographical area does your organization of Dutton Dunwich and Weir Elyi Do volunteers participate in your organization? If ye	perate?
What are the general objectives / services of your of We believe howing, education of health and word being. We believe In- in way of recieving care. In what geographical area does your organization of Dutton Dunwich and Warr E. J. Do volunteers participate in your organization? If ye involvement. Yes approx. 85 volunteers	perate? s, indicate the number of volunteers and type of
What are the general objectives / services of your of We believe housing, education if health and well being. We believe land in way of recieving care. In what geographical area does your organization of Dutton Dunwich and West Else Do volunteers participate in your organization? If ye involvement. Yes	perate? s, indicate the number of volunteers and type of
What are the general objectives / services of your of We believe housing, education of health and well being. We believe In- in what geographical area does your organization of Dutton Dunwich and West Else Do volunteers participate in your organization? If ye involvement. Yes approx. 85 volunteers prepping familitating. assisting as need List the Executive Officers of your organization.	perate? s, indicate the number of volunteers and type of
What are the general objectives / services of your of We believe bowing, education if health and well being we believe land in what geographical area does your organization of Dutton Dunwich and West Else Do volunteers participate in your organization? If ye involvement. Yes approx. 85 volunteers prepping familitating, assing as near List the Executive Officers of your organization. Andy Kroeker. Executive Directo Board of Directors - Chair Dawn	perate? s, indicate the number of volunteers and type of Maziak
What are the general objectives / services of your of We believe howing, education of health and well being, we believe in in what geographical area does your organization of Dutton Dunwich and War Ebi Do volunteers participate in your organization? If ye involvement. Yes approx. 85 volunteers prepping, familitating, assisting as need List the Executive Officers of your organization.	perate? s, indicate the number of volunteers and type of Maziak
What are the general objectives / services of your of We believe bowing, education if health and well being, we believe land in what geographical area does your organization of Dutton Dunwich and West Else Do volunteers participate in your organization? If ye involvement. Yes approx. 85 volunteers prepping familitating, assing as near List the Executive Officers of your organization. Andy Kroeker. Executive Directo Board of Directors - Chair Dawn	perate? s, indicate the number of volunteers and type of Maziak

Project Information

Please provide a brief description of the event, program or project. Include goals and timelines. Stroller walk and lunch is a program to get parents post portum outside and getting exercise. It is a monthly program that offers food to encourage healthy Cating. Also during program parents get to meet other new parents and have the Chance to talk to a dictition, nurse and E.C.E. about questions they might have. If this is not a new project or initiative, please describe how it will enhance your program or increase participation and or volunteerism. Using the park and pavillion allows for our numbers to increase. It gives us plenty of space and room. Also the West Lorne park is central for participants from all 3 communities. What is the specific purpose that grant funds will be used for? The funds will strictly be used for the Pavilion rental cost. For in-kind requests, please provide details on type of request (ex. Materials, equipment, resources, pavilion rental for 5 days etc.) May 22/25 July 24/25 Supt. 25/25 10:30-12:30 June 24/25 August 28/25 Please indicate what other sources of funding are supporting this Event / Program / Project. West Elgin Community Health Centre Who will benefit from the purposed Event / Project / Program (ex. Children, seniors, etc.) Children 0-18 months Parents of children O-18 months



Name of Application / Organization / Service Club / Community Group		
Contact		Position held
Person		in
		organization
Mailing		Telephone /
Address		Cell Phone #
Email		Website
Address		

Specifics of Event / Project / Program requesting funds
Total Project Budget
Amount of Funds requested from the Municipality (For in-kind requests, please provide the monetary equivalent of the grant request)
Have you applied to the Municipality for funding in the past?
Do you want to present your request to Council?

Are you a non-profit organization?		
Charitable registration number (if applicable)		
Date of Incorporation		
<u>Grant Category:</u> Youth / Senior Event Community Beautification Arts, Culture & Heritage Tourism Development Community Special Event Capital Funding for a Specific Project Other – one time grant request		
Please provide a brief history of your organization and indicate if it is incorporated as a non-profit organization.		
Is your group able to issue charitable tax receipts or	n its own?	
What are the general objectives / services of your organization?		
In what geographical area does your organization o	perate?	
Do volunteers participate in your organization? If yes, indicate the number of volunteers and type of involvement.		
List the Executive Officers of your organization.		

Project Information

Please provide a brief description of the event, program or project. Include goals and timelines.
If this is not a new project or initiative, please describe how it will enhance your program or increase participation and or volunteerism.
What is the specific purpose that grant funds will be used for?
For in-kind requests, please provide details on type of request (ex. Materials, equipment, resources, etc.)
Please indicate what other sources of funding are supporting this Event / Program / Project.

Who will benefit from the purposed Event / Project / Program (ex. Children, seniors, etc.)

Project Budget: Senior's Summer Social & Fall Fling Events

Project Budget: Revenue Sources

Grant- \$2000 (Senior's Active Living Centre, pending approval) Grant- \$2000 (Municipality of West Elgin Community Grant, pending approval) WECHC Staff Salaries- In-kind from WECHC

Project Budget: Expenses

Advertising and Promotion- \$200

Catering: \$2000

Program Supplies- \$500

Entertainment- \$700

Prizes and Awards- \$300

Other- \$300

Total Expenses: \$4000



Name of Application / Organization / Service Club / Community Group				
WEST ELGIN WOMEN IN BUSINESS				
Contact	AMY SOUSA	Position held PRESIDENT		
Person	PAM WARDELL	in VICE-PRESIDENT		
		organization		
Mailing		Telephone /		
Address		Cell Phone #		
Email		Website		
Address		WEWOMENINBIZ.CA		

Specifics of Event / Project / Program requesting funds

West Elgin Women In Business is hosting a business community event, Hometown Business Showcase at the Elgin International Club on Sun. Feb. 23, 2025 from 11am - 3 pm. All local businesses are invited to set up a table at the venue to showcase their products and services available to residence in the community and to surrounding communities. We are hoping this will build community awareness of what is available in West Elgin and how to contact business owners. From this event, we will be to starting to build a business directory where residents can find the service they are looking for. This event will cost some money to host. The hall rental, advertising materials, social media marketing, labour for website maintenance and directory site building and ongoing directory updating and monitoring. We also want to hand out a marketing tote at the event for patrons attending.

Total Project Budget

\$6000 for the year for all events planned

Amount of Funds requested from the Municipality (For in-kind requests, please provide the monetary equivalent of the grant request)

\$2000

Have you applied to the Municipality for funding in the past?	NO
Do you want to present your request to Council?	NO

Are you a non-profit organization?	yes				
Charitable registration number (if applicable)					
Date of Incorporation	JUNE 20, 2024				
<u>Grant Category:</u> Youth / Senior Event Community Beautification Arts, Culture & Heritage Tourism Development Community Special Event Capital Funding for a Specific Project Other – one time grant request	COMMUNITY EVENTS/WORKSHOPS FOR SMALL BUSINESS OWNERS				
Please provide a brief history of your organization a organization.	and indicate if it is incorporated as a non-profit				
ESTABLISHED THE GROUP NOVEMBER 21, 2023, DETERMINED EXECUTIVE ROLES, MET WITH MARIA SANCHEZ-KEANE FROM CENTRE FOR ORGANIZATIONAL EFFECTIVENES MARCH 6, 2024 TO ESTABLISH A MISSION STATEMENT AND MEMBER BENEFITS, STRUCTURE, MEMBER COSTS AND NEXT STEPS. APPLIED FOR NOT FOR PROFIT STATUS AND INCORPORATED ON JUNE 20, 2024 AND CURRENTLY FINALIZING WEBSITE AND GROWING OUR MEMBERSHIP AND ESTABLISHING COMMUNITY AWARENESS OF GROUP A ITS BENEFITS TO SMALL BUSINESS OWNERS AND THE LOCAL ECONOMY.					
Is your group able to issue charitable tax receipts o NO	n its own?				
What are the general objectives / services of your of	organization?				
TO PROVIDE SMALL BUSINESS OWNERS SUPPORT, NETWORKING, HELP THEM BUILD THE BUSINESS THROUGH SOCIAL MEDIA AND TO BUILD COMMUNITY AWARENESS OF WHAT BUSINESSES THERE ARE IN OUR COMMUNITY BUILDING OUR LOCAL ECONOMY AND					
In what geographical area does your organization c	operate?				
WEST ELGIN AND SURROUNDING AREA					
Do volunteers participate in your organization? If yes, indicate the number of volunteers and type of involvement.					
8 VOLUNTEERS THAT CURRENTLY MAKE UP THE EXECUTIVE OF THE ORGANIZATION					
List the Executive Officers of your organization.					
PRESIDENT, AMY SOUSA TREASURER, LAURIE DANIS DIRECTOR, NICOLE BRAUSEWETTER DIRECTOR, HEIDI GEORGE	VICE PRESIDENT, PAM WARDELL SECRETARY, JESSICA STATHAM DIRECTOR, STEPHANIE HOUNSELL DIRECTOR, HEATHER DOUGHERTY				

Project Information

Please provide a brief description of the event, program or project. Include goals and timelines. The West Elgin Women in Business group are planning some events for 2025. We will be hosting 4 business builder events, one per quarter at a local venue that will have a keynote speaker. These business builder events will provide education, resources, business networking, social media education, Q & A and more. The purpose is to support small business owners as they start a new business or want to grow their business and in turn help the local economy and tourism of West Elgin. Ex. Jan. 15, 2025, Master Your Money, Master Your Mind, hosted at the Eagle Community Hall. There will be 2 keynote speakers, Heidi George from BMO presenting financials and goal setting, and Josh Ford from Fitborough on mindset for 2025.

Throughout the year we have plans to also host Community Connectors; networking opportunities, social networking and sharing, spotlighting member achievements, knowledge and experiences. These are about building relationships amongst small business owners and how we can help and support each other through challenges.

West Elgin Women in Business will be hosting a community Hometown Business Showcase with the

If this is not a new project or initiative, please describe how it will enhance your program or increase participation and or volunteerism.

West Elgin Women in Business is a new community group with new project event ideas. Building a strong community through West Elgin Women in Business by hosting engaging events with high-quality keynote speakers is our strategy. Not only does it bring in more participants, but it also establishes our group as a valuable resource for networking, mentorship, and personal growth. This ripple effect will surely strengthen both individual members and the community as a whole.

To enhance the impact of these events, we will include:

Interactive Workshops alongside keynotes to allow for hands-on learning and deeper engagement.

What is the specific purpose that grant funds will be used for? business builder events with keynote speakers, community connector events, workshops, marketing, advertising, website development and maintenance, community events for small business owners, increase local awareness of businesses and services,

Interactive Workshops alongside keynotes to allow for hands-on learning and deeper engagement.

Networking Opportunities before and after events to foster meaningful connections among members.

For in-kind requests, please provide details on type of request (ex. Materials, equipment, resources, etc.)

In-kind requests include photocopying of advertising posters, usage of sound system and speakers, usage of Rodney Recreational facility, usage of pavilion at the Old Boys' park for events.

Please indicate what other sources of funding are supporting this Event / Program / Project.

memberships, \$900 event tickets, \$1600 EDC grant, \$2000

Who will benefit from the purposed Event / Project / Program (ex. Children, seniors, etc.) local business owners, the local economy, the community as a whole,

Income				Expenses						Balance					
		2024	2025		2025			2024		2025		2025	2024	2025	2025
Category	Details/Comments	Actuals	Projections	2025 Comments	Actuals	Category	Details/Comments	Actuals	E	Budget	2025 Comments	Actuals	Actuals	Budget	Actuals
							Arts & Cookery								
				Obtain 15 new Exec			April Event \$452				Quarterly Business				
	17 Executive \$850			members and 5			Eagle Community				Builder events and				
	2 Associate \$80 (1			new Assoc			Centre October				4 Community				
Memberships	associate paid \$50)	\$ 930.00	\$ 900.00	members		Event Facilities	Event \$90	\$ 542	2.00	\$ 1,150.00	Connection events				
·										. ,					
				Planning to have 4							2 speakers for each				
	April Event minus			Business Builder			Dark Horse Designs				Business Builder				
	Event Brite Fee			events and other			\$100				events, as well as				
	\$875.94		A 4 600 00	Community			Brittney Miller			÷	possibly some for				
Event Tickets	October Event \$400	\$ 1,275.94	\$ 1,600.00	Connection events		Event Speakers		\$ 200	0.00	\$ 1,000.00	the CC events			ļ	
							Sponsored by RBC								
							for April								
							\$60 October Event				Quarterly Business				
							Refreshments				Builder events and				
				N/A as it was a test		Event	\$124.90 Turkey for				4 Community				
Test Payment	Amy	\$ 0.50	\$ -	for stripe		Refreshments	November social	\$ 184	1.90	\$ 800.00	Connection events				1
,	· ·							1			Seeking event	1		1	1
											spaces that provide				
				EDC has approved							insurance to avoid				
. .				\$2000 for our group		.					extra expenses for				
Grants	None	\$-	\$ 2,000.00	for 2025		Insurance	None	\$	- :	\$-	us				
				Aiming for 50											
				vendors at our											
				Business Showcase							This was a one time	2			
Vendor Fees	None	\$ -	\$ 2,000.00	event, \$40 per table		NPO Fees	NPO Registration	\$ 209	9.25	\$-	fee				
											No merch plans for				
											2025. Still have				
							Bags from Designs				some bags from				
						Merch	by Jenny	\$ 318	3.75	¢ .	2024				
						Wieren	by senny	Ş 510	5.75		Recurring annual			+	
											-				
											fee, may also see				
						II					additional website				
						Website	Domain/Hosting	\$ 230	0.00	\$ 230.00	maintainance fees			ļ	
							8 months \$2.50								
							December will fall								1
						Banking Fees	in Jan statement	\$ 20	0.00	\$ 30.00	\$2.50/month				
											Info Cards to				
											provide to				
							Brochures \$78.63				encourage new				1
						Marketing	Postcards 57.02	\$ 135	5.65	\$ 100.00	members				1
								1				1	────	1	1
											Based on projected				1
							Memberships				new members and				1
							\$20.42				additional events,				1
											,				
							Events \$16.72				we expect higher				1
						Stripe Fees	Test 0.31	\$ 37	7.45	\$ 150.00	Stripe fees		∥		
							Return								
							overpayment to								1
							Associate that paid								
						Misc	extra	\$ 20	0.00	\$ -	N/A				
	8		\$ 6,500.00	1	Ś -	Total		1 4 4 000		\$ 3,460.00			4 000 44	\$3,040.00	



Name of Application / Organization / Service Club / Community Group West Lorne and Community Horticultural Society				
Contact	Samm Okolisan	Position held President		
Person		in		
		organization		
Mailing		Telephone /		
Address		Cell Phone #		
Email		Website		
Address		westlornehort.org		

Specifics of Event / Project / Program requesting funds

Event - May 17, 2025

The West Lorne and Community Horticultural Society will be hosting its annual Plant and Bake Sale. In addition to being our biggest fund raising event, it also allows for our members and the general public to donate plants of all species and sizes as well as gardening tools and tasty baked goods. The opportunity to purchase these plants allows local residents to individually grow their own garden while collectively contributing to the beautification of West Elgin.

Total Project Budget \$500.00

Amount of Funds requested from the Municipality (For in-kind requests, please provide the monetary equivalent of the grant request) \$500.00

Have you applied to the Municipality for funding in the past?	Yes
Do you want to present your request to Council?	No

Are you a non-profit organization?	Yes				
Charitable registration number (if applicable)	No				
Date of Incorporation	1920				
<u>Grant Category:</u> Youth / Senior Event Community Beautification Arts, Culture & Heritage Tourism Development Community Special Event Capital Funding for a Specific Project Other – one time grant request	Community Beautification				
Please provide a brief history of your organization organization.	n and indicate if it is incorporated as a non-profit				
Founded in 1920, the West Lorne and Community Horticultural Society has been continuously dedicated to the beautification of the Village of West Lorne. In addition we strive to educate the public on various gardening techniques through workshops and experienced guest speakers.					
Is your group able to issue charitable tax receipts on its own? No					
What are the general objectives / services of you	r organization?				
Our aim is to contribute to the beautification of the Village of West Lorne also educate and motivate the public on various aspects of gardening.					
In what geographical area does your organization operate?					
The Municipality of West Elgin.					
Do volunteers participate in your organization? If yes, indicate the number of volunteers and type of involvement.					
YesApproximately 12 volunteers help out annually. These duties include planting, watering, weeding, putting up seasonal displays and helping organize our workshops					
List the Executive Officers of your organization.					
	ident - Jim Hathaway / - Catherine Hayward				

Project Information

Please provide a brief description of the event, program or project. Include goals and timelines.

Bo Horvat Community Centre

Friday, May 16, 2025 our society will require 3 hours (possibly less) to setup for the Plant and Bake Sale on Saturday. These hours would be from 5pm - 8pm.

Saturday, May 17, 2025 we will require the facility from 7am to 1pm. This will allow us to finish our set-up, host the event and conduct a thorough and complete clean-up. These hours are similar to what we requested in the past.

If this is not a new project or initiative, please describe how it will enhance your program or increase participation and or volunteerism.

This event has grown at an unbelievable rate and much of that is attributed to being able to host it at the Bo Horvat Community Centre. We have no worries regarding weather, space or even parking. This has been a win-win for both the Horticultural Society as hosts and all participants

What is the specific purpose that grant funds will be used for?

This in kind grant would help in offsetting any costs we would incur from having to rent the facility. This allows us to hold our major fund raiser in a facility that is favourable for all those involved. In addition having the event advertised on the marquee outside the Arena is another major advantage of being able to host at this location.

For in-kind requests, please provide details on type of request (ex. Materials, equipment, resources, etc.)

In Kind only for the facility. In previous years tables and chairs were set up by the employees for our use which was a benefit when it came to displaying the plants.

Please indicate what other sources of funding are supporting this Event / Program / Project.

N/A

Who will benefit from the purposed Event / Project / Program (ex. Children, seniors, etc.)

People of all ages who have a strong interest in gardening or even those who are purchasing their first plants. Our donations include plants of all shapes and sizes as well as shrubs and a large selection of trees. As this is our major fund raiser, the Village of West Lorne also benefits as we are able to continue to contribute to its beautification.



Financial Review

November 1, 2023 to October 31, 2024

Prepared by: Ann Honchell

Treasurer



General Account - Income Statement Nov.1/23 to Oct. 31/24

	<u>Expenses</u>	Income
Banking	\$2,530.00	\$2,314.00
Donations & Grants	\$0.00	\$8,177.40
Door Prizes	\$153.03	\$0.00
Room Rental	\$175.00	\$0.00
Ontario Horticultural Assoc.	\$719.86	\$0.00
Membership	\$0.00	\$660.00
Planting	\$836.13	\$0.00
Plant & Bake Sale	\$50.82	\$2,462.35
Program	\$4,298.91	\$2,290.92
Publicity & Advertising	\$464.42	\$0.00
Social	\$116.40	\$0.00
Social Media	\$107.35	\$0.00
Yearbook	\$24.71	\$0.00
Treasurer	\$80.70	\$0.00
Decorating	\$91.02	\$0.00
Mis - Legiom Room Rental D10	\$225.00	\$0.00
Projects	<u>\$2,148.42</u>	<u>\$0.00</u>
TOTALS	<u>\$12,021.77</u>	<u>\$15,904.67</u>



General Account - Balance Sheet November 1, 2023 - October 31, 2024

Expenses \$2,530.00 Banking \$0.00 **Donations & Grants** \$153.03 **Door Prizes** \$175.00 Room Rental Ontario Horticulural Assoc. \$719.86 \$0.00 Membership \$836.13 Planting Plant & Bake Sale \$50.82 \$4,298.91 Program Publicity & Advertising \$464.42 Social \$116.40 \$107.35 Social Media \$24.71 Yearbook \$80.70 Treasurer \$91.02 Decorating \$225.00 Misc. \$2,148.42 Projects \$12,021.77 \$12,021.77 **Total Expenses** Income \$2,314.00 Banking \$8,177.40 **Donations & Grants** Membership \$660.00 Plant & Bake Sale \$2,462.35 \$2,290.92 Program \$15,904.67 \$15,904.67 **Total Income** \$3,882.90

Net Gain

Closing Balance Oct.31/24

\$10,826.21



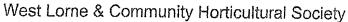
Lottery Account - Balance Sheet November 1, 2023 - October 31, 2024

Income		
Nov. 24 (AGM)		
Door Prize	\$22.00	\$50.00
50/50	\$28.00	
01-Apr		
Door Prize	\$62.00	\$186.00
50/50	\$29.00	
Transferred from float	\$95.00	
16-May		
Door Prize	\$52.00	\$102.00
50/50	\$50.00	
June 22 (Plant Sale		
Door Prize	\$45.00	\$181.00
50/50	\$136.00	
24-Jul		
Door Prize	\$50.00	\$72.00
50/50	\$22.00	
Sept. 13/24		
Door Prize	\$34.00	\$77.00
50/50	\$43.00	
Oct. 25		
Door Prize	\$40.00	\$70.00
50/50	\$30.00	
Total Income		\$738.00
		·
Net Income		\$738.00
Closing Balance Oct.31/24		\$1,605.60



Final - Balance Sheet November 1, 2023 - Octo ber 31, 2024

General Accoount	(Net Income)	\$ 3,882.90
	(Net Income)	\$ 738.00
Totals	Net Income	\$ 4,620.90
General Account	Closing Balance Oct.31/24	\$10.826.21
Lottery Account	Closing Balance Oct.31/24	\$1,605.60



SOCIETY FINANCIAL REVIEW CERTIFICATE (TO BE USED IF NO AUDIT REPORT IS SUPPLIED BY OUTSIDE AUDITORS)

Society/Club financial records must be independently reviewed for the protection of both the Treasurer and the Society/Club.

Submit this signed form unless you have had a professional firm (CPA) conduct an audit and an audit report is provided by the auditor and included with your financial information.

If this form is being used, please note the following:

- Volunteer reviewers must NOT currently be on the Executive or Board; or related to one another; or related to the Treasurer.
- Financial Reviewers review and check off the items on the Review checklist attached.
- Financial Reviewers will verify that the totals shown on the financial statements are correct and will sign the statements.

	Yes/No	Description	Comments
1	<u> </u>	Cheque/Payment issued in accordance with invoice	
2	УY	All Cheques are accounted for - during fiscal year	x · · ·
-3-	YY	If required, two authorized signatories have signed each cheque	
4	YY	Bank Reconciliation is complete for the year and match the amount on the financial statement	
5	YY	Paid invoices have been properly approved for payment	
6	Y Y	Deposits are supported with detail	
7	Y 4	Cash deposits are supported by cash count records	A A A A A
8	44	Cash receipts are supported by numbered tickets etc.	
9	Y Y	Cash over/short is explained satisfactorily	
10	V Y	Petty Cash has been counted	
11	1 1	Etransfers have been properly recorded	
12	Y Y	All Bank Entries are legitimate and have been properly recorded	*****
13	УЧ	Accounts Payable are supported by documentation and date of payment in the new year is noted	
14	YY	Accounts Receivable are supported by documentation and date received in the new year is noted	
15	N/A 1/2	Inventory counts are provided	
16	N/A Ma		
17	N/A ML		
18	ΨY	Revenues are properly presented in the income statement	
19	Y Y	Expenses are properly presented in the income statement	
20	YY	Balance sheet balances and is mathematically correct	
21	¥ 1	Income statement mathematically correct.	
22	NYA	Other	A

Checklist for Financial Reviewers



FINANCIAL REVIEW CERTIFICATE

(TO BE USED IF NO AUDIT REPORT IS SUPPLIED BY OUTSIDE AUDITORS)

Society financial records must be independently reviewed for the protection of both the Treasurer and the Society.

One of the following must be submitted:

 Completed Financial Review Certificate with two signatures. Volunteer reviewers must NOT currently be on the Executive or Board; or related to one another; or related to the Treasurer.

OR

 Audit/Review Report (not a Compilation, also known as, Notice to Reader) that has been completed by a professional firm/individual (CA, CMA, CPA, CGA). Please send a copy of the Audit Report and retain the original for your files. This usually has only one signature.

Note: Compilations, also known as Notice to Readers, will no longer be acceptable as formats for reviews. If your financial statements are in this format, please also supply the Financial Review Certificate signed by the professional firm (one signature); or the two volunteer reviewers appointed by society.

We certify that the statements of receipts & disbursements and assets & liabilities of the

WEST LORNE COMMUNITY HANTICULTURION the fiscal year ended OCT 31, 2024, (Name of Society) Society

are correct, and that our examination of the books and records of the Society included tests to ensure:

- 1. all cash receipts were correctly recorded;
- 2. all recorded vouchers were accurate and authentic;
- 3. all investment and similar assets which were reported exist.

Date Jou 10	·), 20,244	
Financial Reviewer	CiDALIA COFLAG	
Signature	Cidalia Osciko	
Phone	519-719-0271	//
Date <u>Nov.10</u>		
Financial Reviewer	JANET GIVEN	
Signature Junit	Auren	трай нама на конструкций на
Phone 514 768	- 2698	

NOTE: Financial Review and Review Certificate/Report must be completed BEFORE AGM.

Any officer, director or auditor of an organization who makes a false statement in any report or information required under the *Agricultural and Horticultural Organizations Act* is guilty of an offence and on conviction is liable to a fine of not more than \$2000. R.S.O. 1990, c. A.9, s. 16

Ministry of Agricultural, Food and Rural Affairs



Name of Application / Organization / Service Club / Community Group West Lorne and Community Horticultural Society		
Contact Person	Samm Okolisan	Position held President in organization
Mailing Address		Telephone / Cell Phone #
Email Address		Website westlornehort.org

Specifics of Event / Project / Program requesting funds

Program -

The West Lorne Horticultural Society is involved annually in the purchasing, planting and maintaining of flowers for the Village of West Lorne. Our society purchases plants that adorn the village signs in both the North and South end flower beds. The society also purchases plants for the pots that are found in the business core of our village. We have requested this grant in the past and were very honoured to receive it, allowing our society to continue contributing to the beautification of West Lorne.

Total Project Budget \$1,500

Amount of Funds requested from the Municipality (For in-kind requests, please provide the monetary equivalent of the grant request)

Have you applied to the Municipality for funding in the past?	Yes
Do you want to present your request to Council?	No

For Organizations / Service Clubs

é

Are you a non-profit organization?		
	Yes	
Charitable registration number (if applicable)	N/A	
Date of Incorporation	1920	
<u>Grant Category:</u> Youth / Senior Event Community Beautification Arts, Culture & Heritage Tourism Development Community Special Event Capital Funding for a Specific Project Other – one time grant request	Community Beautification	
Please provide a brief history of your organization and indicate if it is incorporated as a non-profit organization.		
Founded in 1920, the West Lorne and Community dedicated to the beautification of the Village of We on various gardening techniques through worksho	est Lorne. In addition we strive to educate the public	
Is your group able to issue charitable tax receipts	on its own?	
No		
What are the general objectives / services of your	organization?	
Our aim is to contribute to the beautification of the public on various aspects of gardening.	Village of West Lorne also educate and motivate the	
In what geographical area does your organization	operate?	
The Municipality of West Elgin		
Do volunteers participate in your organization? If y involvement.	res, indicate the number of volunteers and type of	
YesApproximately 12 volunteers help out annua putting up seasonal displays and helping organize	lly. These duties include planting, watering, weeding, e our workshops	
List the Executive Officers of your organization.		
	dent - Jim Hathaway - Catherine Hayward	

Project Information

Please provide a brief description of the event, program or project. Include goals and timelines.

Our Horticultural Society participates annually in the purchasing, planting and maintaining of flowers through out the Village of West Lorne. The process begins in the May when our vendor delivers the 12 hanging baskets which the parks department sets up. We also have the potted plants delivered at the same time which are Placed in the business core upon arrival to correspond with the hanging baskets. Our society takes the flowering plants that are delivered and plants them at both the North and South beds. Once the planting is completed our society members and volunteers weed and maintain the beds and provide watering when necessary. This continues until the fall when we begin to look at next year and new plants.

If this is not a new project or initiative, please describe how it will enhance your program or increase participation and or volunteerism.

This project of ordering, planting and maintaining has been going on for many years and has become closely identified with the West Lorne and Community Horticultural Society. The grant will allow this project to continue and allow our Horticultural Society to play a vital role in beautifying the Village of West Lorne.

What is the specific purpose that grant funds will be used for?

This grant will allow for the purchase of flowers for the various spots in our community. We believe that it will continue show the pride our society has in the community of West Lorne and allow residents and businesses a like to take pride the Village. In addition we believe that this will be very appealing to all those who visit West Lorne.

For in-kind requests, please provide details on type of request (ex. Materials, equipment, resources, etc.)

N/A

Please indicate what other sources of funding are supporting this Event / Program / Project.

N/A

Who will benefit from the purposed Event / Project / Program (ex. Children, seniors, etc.)

Residents of any ages. Everyone who lives, works or drives through West Lorne will see the beauty in the community from our hanging baskets, potted plants and welcome sign garden beds.



West Lorne 2025

Hanging Baskets

Bee's Knees Yellow Petunia Surfinia Deep Red Petunia Surfinia Giant Blue Petunia Emerald Falls Green Dichondra

Plants

Prince Tut Grass12 6" pots x \$12/pot = \$144Rockin Playin the Blue Salvia36 6" pots x \$12/pot = \$432Flats of Annuals8 flats x \$45/flat = \$36012 plants of Bee's Knees Yellow Petunia12 plants of Deep Red Surfinia Petunia12 plants of Supertunia Tiara Blue Petunia12 plants of Illusion Emerald Lace Ipomoea12 plants of Red Dragon Wing Begonias16 plants of Emerald Lace Ipomoea

Total for Plants: 144 + 432 + 360 = \$936Soil amount estimated: 3 bales x \$40/bale = \$120

Total for 2025

Plants	936
Bag of Fertilizer	100
Soil	120
	1,156
Delivery	50
HST	156.78
	\$1,362.78



Financial Review

November 1, 2023 to October 31, 2024

Prepared by: Ann Honchell

Treasurer



General Account - Income Statement Nov.1/23 to Oct. 31/24

	<u>Expenses</u>	Income
Banking	\$2,530.00	\$2,314.00
Donations & Grants	\$0.00	\$8,177.40
Door Prizes	\$153.03	\$0.00
Room Rental	\$175.00	\$0.00
Ontario Horticultural Assoc.	\$719.86	\$0.00
Membership	\$0.00	\$660.00
Planting	\$836.13	\$0.00
Plant & Bake Sale	\$50.82	\$2,462.35
Program	\$4,298.91	\$2,290.92
Publicity & Advertising	\$464.42	\$0.00
Social	\$116.40	\$0.00
Social Media	\$107.35	\$0.00
Yearbook	\$24.71	\$0.00
Treasurer	\$80.70	\$0.00
Decorating	\$91.02	\$0.00
Mis - Legiom Room Rental D10	\$225.00	\$0.00
<u>Projects</u>	<u>\$2,148.42</u>	<u>\$0.00</u>
TOTALS	<u>\$12,021.77</u>	\$15,904.67



General Account - Balance Sheet November 1, 2023 - October 31, 2024

Expenses

\$2,314.00		
φ12,021.77	Ψ12,021.77	
\$2,148.42	\$12 021 77	
\$80.70		
\$24.71		
•		
\$4,298.91		
\$50.82		
\$836.13		
• 1 1.1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
\$2,530.00 \$0.00		
	\$153.03 \$175.00 \$719.86 \$0.00 \$836.13 \$50.82 \$4,298.91 \$464.42 \$116.40 \$107.35 \$24.71 \$80.70 \$91.02 \$225.00 \$2,148.42 \$12,021.77	\$153.03 \$175.00 \$719.86 \$0.00 \$836.13 \$50.82 \$4,298.91 \$464.42 \$116.40 \$107.35 \$24.71 \$80.70 \$91.02 \$225.00 \$2,148.42 \$12,021.77 \$12,021.77

Closing Balance Oct.31/24

\$10,826.21



Lottery Account - Balance Sheet November 1, 2023 - October 31, 2024

Income		
Nov. 24 (AGM)		
Door Prize	\$22.00	\$50.00
50/50	\$28.00	
01-Apr		
Door Prize	\$62.00	\$186.00
50/50	\$29.00	
Transferred from float	\$95.00	
16-May		
Door Prize	\$52.00	\$102.00
50/50	\$50.00	
June 22 (Plant Sale		
Door Prize	\$45.00	\$181.00
50/50	\$136.00	
24-Jul		
Door Prize	\$50.00	\$72.00
50/50	\$22.00	
Sept. 13/24		
Door Prize	\$34.00	\$77.00
50/50	\$43.00	
Oct. 25		
Door Prize	\$40.00	\$70.00
50/50	\$30.00	
Total Income		\$738.00
Net Income		\$738.00
Closing Balance Oct.31/24		\$1,605.60



Final - Balance Sheet November 1, 2023 - Octo ber 31, 2024

General Accoount	(Net Income)	\$	3,882.90
Lottery Account	(Net Income)	\$	738.00
Totals	Net Income	\$	4,620.90
General Account	Closing Balance Oct.31/24		\$10.826.21
Lottery Account	Closing Balance Oct.31/24		\$1,605.60

West Lorne & Community Horticultural Society



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- Volunteer reviewers must NOT currently be on the Executive or Board; or related to one another; or related to the Treasurer.
- Financial Reviewers review and check off the items on the Review checklist attached.
- Financial Reviewers will verify that the totals shown on the financial statements are correct and will sign the statements.

	Yes	No	Description	Comments
1	V	Y	Cheque/Payment issued in accordance with invoice	
2	Y	Y	All Cheques are accounted for - during fiscal year	
3	y ·	Y	If required, two authorized signatories have signed each cheque	
4	Y	Y	Bank Reconciliation is complete for the year and match the amount on the financial statement	
5	Y	Y	Paid invoices have been properly approved for payment	
6	Ý	Y	Deposits are supported with detail	
7	Y '	Ý	Cash deposits are supported by cash count records	
8	4	1	Cash receipts are supported by numbered tickets etc.	
9	Y	Υ	Cash over/short is explained satisfactorily	
10		<u>Ý</u>	Petty Cash has been counted	
11	<u> </u>	1	Etransfers have been properly recorded	-
12	УY	1	All Bank Entries are legitimate and have been properly recorded	
13	УУ	(Accounts Payable are supported by documentation and date of payment in the new year is noted	
14	4	Ý	Accounts Receivable are supported by documentation and date received in the new year is noted	
15	NIA	1/4-	Inventory counts are provided	
16	NIA	*/c_	Assets and Liabilities have been reviewed	
17	NA	h/4-	All investments and assets which were reported do exist	
18	Ý	Y	Revenues are properly presented in the income statement	
19	¥ ·	1	Expenses are properly presented in the income statement	
20 [YY		Balance sheet balances and is mathematically correct	
21	Y ĭ	1	Income statement mathematically correct.	
22	Jy a		Other	

Checklist for Financial Reviewers



FINANCIAL REVIEW CERTIFICATE

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We certify that the statements of receipts & disbursements and assets & liabilities of the

WEST LORNE COMMUNITY HALTICULTURION the fiscal year ended OCT 31, 2024, (Name of Society) BOWETY

are correct, and that our examination of the books and records of the Society included tests to ensure:

- 1. all cash receipts were correctly recorded;
- 2. all recorded vouchers were accurate and authentic;
- 3. all investment and similar assets which were reported exist.

Date Sou 10	, 20 34	
Financial Reviewer	CIDALIA COFLIC	
Signature	Cidalia Decko	
Phone	519-719-0271	
Date <u>Nov. 10</u>	. 20 24	
Financial Reviewer	JANET GIVEN	
Signature fanit	Auren	
Phone 519 768	- 2698	

NOTE: Financial Review and Review Certificate/Report must be completed BEFORE AGM.

Any officer, director or auditor of an organization who makes a false statement in any report or information required under the *Agricultural and Horticultural Organizations Act* is guilty of an offence and on conviction is liable to a fine of not more than \$2000. R.S.O. 1990, c. A.9, s. 16

Ministry of Agricultural, Food and Rural Affairs



	Dication / Organization / Service	Club / Community Group			
Contact Person	NANCY ROODZANT	Position held SECRETARY in organization			
Mailing Address		Telephone / Cell Phone #			
Email Address Website					

Specifics of Event / Project / Program requesting funds

The lawnbowling greens in West Lorne require daily and seasonal upkeep over our playing season-May to October. Our ongoing happy relationship with municipal workers in supplying bags and sand have helped us greatly, and in addition, we have been supplying over 1200 volunteer hours, and purchasing required maintenance items: fertilizer, seed, moisture control and upkeep of equipment for rolling, dragging, aeration and cutting. We need financial assistance to keep our greens to a playable standard -and without our volunteers, much more money would be required.

Total Project Budget \$2500

Amount of Funds requested from the Municipality (For in-kind requests, please provide the monetary equivalent of the grant request)

\$2500 to be utilized to pay a summer student, up to seven hours a week. We have well-maintained equipment and experiences volunteers who will both train and mentor and be on site for our student.

•	Yes, the municipality has been a great partner: water bills, some other greens expenses
Do you want to present your request to Council?	Not necessary but will happily do so if requested.

Project Information

Please provide a brief description of the event, program or project. Include goals and timelines. As above, our greens require daily maintenance or the very particular grass level and type is easily compromised. It is very demanding on our volunteers to go in every day and to prepare for our twice-weekly regular play as well as for our tournaments and hosting of community groups and schools. We always need funding for maintenance but the addition of a regularly scheduled summer student would enhance both the consistency and quality of our ability to keep our greens playable. We can hire in May and keep the student working until they return to school, or if in the area, until our season end in October.

If this is not a new project or initiative, please describe how it will enhance your program or increase participation and or volunteerism.

We have added players to our membership who summer at the local parks. We are bringing them into our volunteer schedule slowly as not to overwhelm them, so having a volunteer will fill the gaps and be an additional social outlet for our summer visitors to the area. We have seen that word pf the fun and good exercise spread quickly through the parks and we are having more and more people drop in for an evening or two to try it out, and then join. Our Canada Day Open House was a huge community success with over 80 new interested people/families showing up. We had an event for mentally challenged youth from Hutton House in London as well, and it was a sheer pleasure to see the youth celebrate a successful toss of the bowl!

What is the specific purpose that grant funds will be used for? Summer student hire; greens maintenance.

For in-kind requests, please provide details on type of request (ex. Materials, equipment, resources, etc.)

Wages, specifically, and any additional materials they need such as hoes, and maintenance of the equipment and tools.

Please indicate what other sources of funding are supporting this Event / Program / Project. We have yearly membership fees, sponsors who display signs, tournament fees and a small fee each time we come to play (jitney.)

Who will benefit from the purposed Event / Project / Program (ex. Children, seniors, etc.) The summer student will benefit, and, if our greens are safe and well-maintained everyone who comes out to play will benefit.

West Lorne Lawn Bowling Financial Report as of Sept. 30, 2024

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West Lorne Lawn Bowling Financial Report as of Sept. 30, 2023

Income		Expenses		Inc
Memberships	\$ 1,800.00	Hydro	\$ 482.62	<u>Inc</u> Me
Jitneys	\$ 741.75	Greens	\$ 3,944.56	Jitn
Mun. of West Elgin	\$ 1,738.39		+ 0,0 . 1100	Mu
Social fees	\$ 10.00	Club House	\$ 72.35	IVIU
		Insurance	\$ 213.84	
Grippo	\$ 20.00	Fees OLBA	\$ 720.00	Gri
Tournaments	\$ 1,761.00	Gift Cards	\$ 150.00	Tou
Donations	\$ 350.00	Junior Bowls	\$ 805.63	Ref
		Tournaments	\$ 865.00	
		O/C Complete Turf	\$ 1,020.01	
Total Income	\$ 6,421.14	Total Expenses	\$ 8,274.01	Tot
B/B Sept. 30, 2023	\$ 12,897.03	B/B Sept.30,2024	\$ 11,136.41	
O/C OLBA	\$ 200.00	• •		B/B
.,	<i>¥</i> 200.00	Petty Cash	\$ 107.75	0/0
Total	\$ 19,518.17	Total	\$ 19,518.17	Tota

Greens Expenses Detail Fert., spray, grease, oil \$ 1,041.85 Sand \$ 101.26 Gas for Equipment 312.41 \$ Gas for travel \$ 450.00 Repairs \$ 1,717.59 Garbage bags etc. 21.45 \$ Gratitude for Labour \$ 300.00 \$ 3,944.56

Income		Expenses
Memberships	\$ 1,300.00	Hydro \$ 530
Jitneys	\$ 597.00	Greens \$ 5,123
Mun. of West Elgin	\$ 5,407.95	Equipment
		Club House \$ 106
		Insurance \$ 213
Grippo	\$ 60.00	Fees OLBA \$ 494
Tournaments	\$ 2,049.50	Gift Cards \$ 125
Refund OLBA	\$ 35.01	Shed \$ 71
		Tournamei \$ 950
		Rule Books \$ 27
Total Income	\$ 9,449.46	Total Expe \$ 7,641
B/B Sept. 30, 2022	\$ 10,069.04	B/B Sept.3 \$ 12,897
O/C Complete Turf	\$ 1,020.01	_,
Total	\$ 20,538.51	Total \$ 20,538 .

Greens Ex	ber	nses De
Fert., spray	\$	1,514.
Sand	\$	97.
Gas for Equ	\$	377.
Gas for tra	\$	300.
Repairs	\$	1,708.
Garbage ba	\$	54.
Aeration	\$	547.
Gratitude f	\$	525.
	\$	5,123.

Lorne Lawn Bowling cial Report as of Sept. 30, 2024

West Lorne Lawn Bowling		
Financial Report as of Sept. 30, 2023		

le		Expenses	
perships	\$ 1,800.00	Hydro	\$ 482.62
S	\$ 741.75	Greens	\$ 3,944.56
of West Elgin	\$ 1,738.39		
fees	\$ 10.00	Club House	\$ 72.35
		Insurance	\$ 213.84
c	\$ 20.00	Fees OLBA	\$ 720.00
aments	\$ 1,761.00	Gift Cards	\$ 150.00
ions:	\$ 350.00	Junior Bowls	\$ 805.63
		Tournaments	\$ 865.00
		O/C Complete Turf	\$ 1,020.01
Income	\$ 6,421.14	Total Expenses	\$ 8,274.01
ept. 30, 2023	\$ 12,897.03	B/B Sept.30,2024	\$ 11,136.41
LBA	\$ 200.00	Petty Cash	\$ 107.75
	\$ 19,518.17	Total	\$ 19,518.17

Greens Expenses Detail				
Fert., spray, grease, oil	\$	1,041.85		
Sand	\$	101.26		
Gas for Equipment	\$	312.41		
Gas for travel	\$	450.00		
Repairs	\$	1,717.59		
Garbage bags etc.	\$	21.45		
Gratitude for Labour	\$	300.00		
	\$	3,944.56		

Income		Expenses
Memberships	\$ 1,300.00	Hydro \$ 530.28
Jitneys	\$ 597.00	Greens \$ 5,123.89
Mun. of West Elgin	\$ 5,407.95	Equipment
		Club House \$ 106.04
		Insurance \$ 213.84
Grippo	\$ 60.00	Fees OLBA \$ 494.00
Tournaments	\$ 2,049.50	Gift Cards \$ 125.00
Refund OLBA	\$ 35.01	Shed \$ 71.31
		Tourname: \$ 950.00
		Rule Books \$ 27.12
Total income	\$ 9,449.46	Total Expe \$ 7,641.48
B/B Sept. 30, 2022	\$ 10,069.04	B/B Sept.3 \$ 12,897.03
O/C Complete Turf	\$ 1,020.01	
Total	\$ 20,538.51	Total \$ 20,538.51

Greens Expenses Detail				
Fert.,spray	\$	1,514.05		
Sand	\$	97.39		
Gas for Equ	\$	377.10		
Gas for tra	\$	300.00		
Repairs	\$	1,708.92		
Garbage bi	\$	54.08		
Aeration	\$	547.35		
Gratitude f	\$	525.00		
	\$	5,123.89		



Name of Application / Organization / Service Club / Community Group			
Zoe der Kinderen			
Contact	Zoe der Kinderen	Position held	
Person		in	
		organization	
Mailing		Telephone /	
Address			
Email		Website	
Address			

Specifics of Event / Project / Program requesting funds As an advocate for education and community engagement, I am writing to express my keen interest in volunteering as a child's craft educator in the county of West Elgin, specifically West Lorne.

I am a dedicated and compassionate individual with a genuine passion for working with children. Throughout the years I have volunteered in various capacities within the various communities I have resided. Witnessing the profound impact these experiences have on young minds has further heightened my desire to contribute to and make a difference in the lives of children.

Furthermore, I possess exceptional communication skills to interact and establish connections with the children and parents alike. My patience, empathy and enthusiasm allow me to create an environment where children feel comfortable seeking assistance, as well as sharing their thoughts and ideas.

I believe that by contributing my time, energy and talents I will have a positive impact on both their personal growth and development as well as their creativity, imagination and self-esteem. I believe that it is a community program beneficial to the development of self-confidence, well rounded and productive young adults who will in time benefit our community.

Total Project Budget

Amount of Funds requested from the Municipality	(For in-kind requests,	please provide the	• monetary
equivalent of the grant request)			

14 times x 2hrs each x \$35 = \$980.00

Have you applied to the Municipality for funding in the past?	No
Do you want to present your request to Council?	If needed

For Organizations / Service Clubs

Are you a non-profit organization?	Yes			
Charitable registration number (if applicable)				
Date of Incorporation				
Grant Category: Youth / Senior Event Community Beautification Arts, Culture & Heritage Tourism Development Community Special Event Capital Funding for a Specific Project Other – one time grant request	Arts Development			
Please provide a brief history of your organization and indicate if it is incorporated as a non-profit organization. Throughout the years I have volunteered in various capacities within the various communities I have resided. I would like to ask council to allow me to hold this craft program at the Scout Hall, West Lorne, for the period of May 3 rd running through to September 6 th each Saturday from 9:30am to 11:30am, with the exception, of a few Saturdays where I would be out of town. The time frame would allow for set up, time for the crafts and then clean up. The age group would be from age 6 to 12, both boys and girls and with the option of parents attending. I will be supplying ALL supplies needed for each Saturday craft day and there will be NO cost to the children. It is strictly a NOT-FOR-PROFIT program.				
Is your group able to issue charitable tax receipts on its own? No				
What are the general objectives / services of your organization? I believe that by contributing my time, energy and talents I will have a positive impact on both their personal growth and development as well as their creativity, imagination and self-esteem. I believe that it is a community program beneficial to the development of self-confidence, well rounded and productive young adults who will in time benefit our community.				
In what geographical area does your organization operate?				
local				
Do volunteers participate in your organization? If yes, indicate the number of volunteers and type of involvement. I would also like to offer the opportunity for High School students to volunteer to assist them in acquiring necessary hours for their credit course.				
List the Executive Officers of your organization.				

Project Information

Please provide a brief description of the event, program or project. Include goals and timelines. I would like to ask council to allow me to hold this craft program at the Scout Hall, West Lorne, for the period of May 3rd running through to September 6th each Saturday from 9:30am to 11:30am, with the exception, of a few Saturdays where I would be out of town. The time frame would allow for set up, time for the crafts and then clean up. The age group would be from age 6 to 12, both boys and girls and with the option of parents attending. I will be supplying ALL supplies needed for each Saturday craft day and there will be NO cost to the children. It is strictly a NOT-FOR-PROFIT program.

If this is not a new project or initiative, please describe how it will enhance your program or increase participation and or volunteerism.

What is the specific purpose that grant funds will be used for? Hall rental fees

For in-kind requests, please provide details on type of request (ex. Materials, equipment, resources, etc.)

Please indicate what other sources of funding are supporting this Event / Program / Project.

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Who will benefit from the purposed Event / Project / Program (ex. Children, seniors, etc.)

Children ages 6-12