



Community Benefit Fund Application 2024

Applicant Information Organization Name **Contact Name** Mailing Address Phone Email Type of Organization Charitable organization Not-for-profit organization School Individual or group **Program/Event/Activity General Information Funding Category Environmental Enhancement** (please check one or Social Welfare more applicable funding Arts & Culture categories) Health & Wellness **Education & Science Emergency Relief** Name of Program/Event/Activity Date Being Held Description **Amount of Funds** Requested **Number of People Impacted** Recognition of Sponsorship Community Enhancement/Enrichment





Environmental		
Protection/Enhancement		
Overall Community		
Impact		
Efficient Use of Funds		
Requested		
Any Additional		
Information		
(You may attach further		
additional information to		
this application)		
Budget Revenues (List all sources of revenue including the requested community benefit grant amount) Expenses (List all anticipated expenditures/costs)	information? Yes	No
that any funds allocated and to the County of Warner. It is	not exclusively utilized for the pro	best of my knowledge. It is understood ogram identified will need to be returned yed over the amount of \$1,000 will require
Signature		 Date

Under the Freedom of information and Protection of Privacy Act (FOIP) s.33(c) personal information is collected for the purpose of applying for the Community Benefit Grant pursuant to provisions of the Municipal Government Act. Question regarding the collection of personal information can be directed to the County of Warner Administration Office at 403-642-3635 or admin@warnercounty.ca.