



AGENDA

FOR SPORT, RECREATION AND GRANTS COMMITTEE MEETING TO BE HELD ON

14 NOVEMBER 2016 AT 6:30 PM

IN COMMITTEE ROOM 1, 12 JAMES STREET, SALISBURY

MEMBERS

Cr D Proleta (Chairman)
Mayor G Aldridge (ex officio)
Cr D Balaza
Cr D Bryant (Deputy Chairman)
Cr L Caruso
Cr D Pilkington
Cr B Vermeer
Cr J Woodman
Cr R Zahra

REQUIRED STAFF

Chief Executive Officer, Mr J Harry
General Manager Business Excellence, Mr C Mansueto
General Manager Community Development, Ms P Webb
Manager Governance, Ms T Norman

APOLOGIES

LEAVE OF ABSENCE

PRESENTATION OF MINUTES

Presentation of the Minutes of the Sport, Recreation and Grants Committee Meeting held on 10 October 2016.

REPORTS

Administration

7.0.1	Future Reports for the Sport, Recreation and Grants Committee	7
-------	---	---

Community Grants

7.2.1	Youth Sponsorship - October Applications.....	9
7.2.2	Community Grants Program Applications for November 2016	11
7.2.3	28/2016: Wat Khmer Santipheap Association of SA Inc. - Community Grants Program Application.....	13
7.2.4	32/2016: Meals on Wheels (SA) Inc. - Community Grants Program Application	61
7.2.5	33/2016: Para Hills Conference of the St. Vincent De Paul Society [St. Vincent De Paul Society (SA) Inc.] - Community Grants Program Application	83
7.2.6	34/2016: Para Hills Neighbourhood Watch Area 504 [Neighbourhood Watch Volunteers Association of South Australia Inc.] - Community Grants Program Application	113
7.2.7	35/2016: Uniting Church in Australia Salisbury - Community Grants Program Application	145
7.2.8	36/2016: The Burton Community Centre Inc. - Community Grants Program Application	165
7.2.9	37/2016: Mawson Lakes Photography Club Inc. - Community Grants Program Application	185

OTHER BUSINESS

CLOSE



**MINUTES OF SPORT, RECREATION AND GRANTS COMMITTEE MEETING HELD
IN COMMITTEE ROOM 1, 12 JAMES STREET, SALISBURY ON**

10 OCTOBER 2016

MEMBERS PRESENT

Cr D Proleta (Chairman)
Cr D Bryant (Deputy Chairman)
Cr L Caruso
Cr D Pilkington (*via telephone*)
Cr R Zahra

STAFF

Chief Executive Officer, Mr J Harry
General Manager Business Excellence, Mr C Mansueto
General Manager Community Development, Ms P Webb
Manager Governance, Ms T Norman

The meeting commenced at 6.33pm

The Chairman welcomed the members, staff and the gallery to the meeting.

APOLOGIES

Apologies have been received from Mayor G Aldridge, Cr D Balaza, Cr J Woodman and Cr B Vermeer.

LEAVE OF ABSENCE

Nil

PRESENTATION OF MINUTES

Moved Cr L Caruso
Seconded Cr R Zahra

The Minutes of the Sport, Recreation and Grants Committee Meeting held on 12 September 2016, be taken and read as confirmed.

CARRIED

REPORTS

Administration

7.0.1 Future Reports for the Sport, Recreation and Grants Committee

Moved Cr L Caruso

Seconded Cr D Pilkington

1. The information be received.

CARRIED

Community Grants

7.2.1 Youth Sponsorship - September Applications

Cr D Pilkington declared a perceived conflict of interest on the basis of having worked with an applicant for sponsorship and determined he would remain in the meeting and vote in the best interests of the community.

Moved Cr R Zahra

Seconded Cr L Caruso

1. The information be received.

CARRIED

7.2.2 Community Grants Program Applications for October 2016

Moved Cr R Zahra

Seconded Cr D Bryant

1. The information be received and noted.

CARRIED

7.2.3 27/2016: Salisbury 8 Ball and Sports Association of SA Inc. - Community Grants Program Application

Cr L Caruso declared a conflict of interest on the basis that applicants compete at Cr L Caruso's business premises and members of her family are members of the Salisbury 8 Ball and Sports Association.

Cr L Caruso left the meeting at 06:37 pm.

Due to lack of quorum the item was referred to Council for decision.

Cr L Caruso returned to the meeting at 06:38 pm.

Recommendation

1. Grant No. 27/2016: Salisbury 8 Ball and Sports Association of SA Inc. be awarded the amount of **\$1,704.00** to assist with the purchase of newspaper advertising, junior shirts, office chair, filing cabinet, printer and laminator as outlined in the Community Grant Application.

7.2.4 31/2016: Uniting In Care Salisbury Inc. - Community Grants Program Application

Moved Cr R Zahra

Seconded Cr D Pilkington

1. It be noted that, in accordance with delegated powers set out in the endorsed Terms of Reference, the Sport, Recreation and Grants Committee assessed and allocated funding for the October 2016 round of Community Grants as follows:
 - a. Grant No. 31/2016: Uniting In Care Salisbury Inc. be awarded the amount of **\$2,000.00** to assist with the purchase of \$10 Essential Cards for the Parcel of Love project as outlined in the Community Grant Application.

CARRIED

OTHER BUSINESS

Nil

The meeting closed at 6.39pm.

CHAIRMAN.....

DATE.....

ITEM	7.0.1
	SPORT, RECREATION AND GRANTS COMMITTEE
DATE	14 November 2016
HEADING	Future Reports for the Sport, Recreation and Grants Committee
AUTHOR	Michelle Woods, Projects Officer Governance, CEO and Governance
CITY PLAN LINKS	4.3 Have robust processes that support consistent service delivery and informed decision making.
SUMMARY	This item details reports to be presented to the Sport, Recreation and Grants Committee as a result of a previous Council resolution. If reports have been deferred to a subsequent month, this will be indicated, along with a reason for the deferral.

RECOMMENDATION

1. The information be received.

ATTACHMENTS

There are no attachments to this report.

1. BACKGROUND

- 1.1 Historically, a list of resolutions requiring a future report to Council has been presented to each committee for noting.

2. CONSULTATION / COMMUNICATION

- 2.1 Internal
 - 2.1.1 Report authors and General Managers.
- 2.2 External
 - 2.2.1 Nil.

3. REPORT

- 3.1 The following table outlines reports to be presented to the Sport, Recreation and Grants Committee as a result of a previous Council resolution:

Meeting Item	- Heading and Resolution	Officer
22/02/2016 7.1.1	Sports Development Framework Evaluation 3. Subject to consideration of a further report to Council by December 2016, the Sports Development Program be expanded, based on identification of sporting programs that will deliver greatest return to Council for any investment made. Due: December 2016	Adam Trottman
25/07/2016 7.2.2 further motion	Funding Caps for Youth Sponsorship Applications 1. The criteria for funding applied to individual youth sponsorship applications from the same organisation for the same event be reviewed. Due: March 2017	Mechelle Potter

4. CONCLUSION / PROPOSAL

- 4.1 Future reports for the Sport, Recreation and Grants Committee have been reviewed and are presented to Council for noting.

CO-ORDINATION

Officer: GMCD GMBE
Date: 09/11/2016 09/11/2016

ITEM	7.2.1
	SPORT, RECREATION AND GRANTS COMMITTEE
DATE	14 November 2016
HEADING	Youth Sponsorship - October Applications
AUTHOR	Mechelle Potter, Administrative Coordinator - Business Excellence, Business Excellence
CITY PLAN LINKS	3.3 Be a connected city where all people have opportunities to participate.

RECOMMENDATION

1. The information be received.

ATTACHMENTS

There are no attachments to this report.

1. BACKGROUND

- 1.1 The Sports, Recreation and Grants Committee resolved that a report be provided listing all Youth Sponsorship grants approved.

2. CONSULTATION / COMMUNICATION

- 2.1 Internal
 - 2.1.1 Elected Members
- 2.2 External
 - 2.2.1 Youth Sponsorship applicants

3. REPORT

- 3.1 The following Youth Sponsorship Applications were assessed and approved by the Chairperson and one other member of the Sport, Recreation and Grants Committee in October 2016.

Funding per application	Event	Total Funding
1 @ \$960	One application has been received to represent Australia at the All Ireland Dancing Championships to be held in Belfast, UK in November 2016.	\$960.00
2 @ \$960	Two applications have been received to represent Australia at the 2017 Honolulu International Cheer and Dance Championships to be held in Hawaii, USA in February 2017.	\$1,920.00
3 @ \$240	Three applications have been received to represent South Australia at the 2016 Trans Bass Gymnastics Challenge to be held in Geelong, Victoria in November 2016.	\$720.00
4 @ \$240	Four applications have been received to represent South Australia at the Australian All Star National Cheerleading Championships to be held in Queensland in November 2016.	\$960.00
Total Funding for October 2016:		\$4,560.00

4. CONCLUSION / PROPOSAL

- 4.1 The 2016/17 Youth Sponsorship budget allocation is \$42,000 less expenditure to date of \$29,680 (including funding for October 2016) which leaves a balance remaining of \$12,320.
- 4.2 Due to current spend, consideration of a second quarter budget review bid may be required to ensure sufficient funds are available to the committee to allocate to future applications.

CO-ORDINATION

Officer: EXECUTIVE GROUP
Date: 08/11/2016

ITEM	7.2.2
	SPORT, RECREATION AND GRANTS COMMITTEE
DATE	14 November 2016
HEADING	Community Grants Program Applications for November 2016
AUTHOR	Bronwyn Hatswell, PA to General Manager, Community Development
CITY PLAN LINKS	3.4 Be a proud, accessible and welcoming community.
SUMMARY	This report outlines the Community Grants Program Applications received for the November 2016 round. Each Application is submitted for review by the Sport, Recreation and Grants Committee in an individual report.

RECOMMENDATION

1. The information be received and noted.

ATTACHMENTS

There are no attachments to this report.

1. BACKGROUND

- 1.1 Six (6) applications were received for the November 2016 round of Community Grants.
- 1.2 One (1) application received for the September 2016 round of Community Grants required further information. The further information has been received and the application is submitted for consideration.¹

2. CONSULTATION / COMMUNICATION

- 2.1 Internal
 - 2.1.1 GMCD

3. REPORT

- 3.1 Seven (7) applications are presented for the November 2016 round of Community Grants, all of which are deemed compliant and listed below:
 - 3.1.1 28/2016: Wat Khmer Santipheap Association of SA Inc.¹
 - 3.1.2 32/2016: Meals on Wheels (SA) Inc.
 - 3.1.3 33/2016: Para Hills Conference of the St Vincent De Paul Society (St Vincent De Paul Society (SA) Inc.)
 - 3.1.4 34/2016: Para Hills Neighbourhood Watch Area 504 (Neighbourhood Watch Volunteers Association of South Australia Inc.)

- 3.1.5 35/2016: Uniting Church in Australia Salisbury
- 3.1.6 36/2016: The Burton Community Centre Inc.
- 3.1.7 37/2016: Mawson Lakes Photography Club Inc.
- 3.2 The Community Grant Funding budget allocation for 2016/2017 is \$82,000. In 2016/2017 monies approved for grant funding is \$18,688.00 which leaves an unspent balance of \$63,312.00.
- 3.3 The monies committed to the seven (7) compliant applications for the November 2016 round, if all approved, is **\$11,365.00**.
- 3.4 The remaining balance of the grant funding if all seven (7) applications are approved is **\$51,947.00**.

4. CONCLUSION / PROPOSAL

- 4.1 Seven (7) Community Grants Program applications are presented for funding consideration at the Sport, Recreation and Grants Committee in November 2016.

CO-ORDINATION

Officer: EXECUTIVE GROUP
Date: 08/11/2016

ITEM	7.2.3
	SPORT, RECREATION AND GRANTS COMMITTEE
DATE	14 November 2016
HEADING	28/2016: Wat Khmer Santipheap Association of SA Inc. - Community Grants Program Application
AUTHOR	Bronwyn Hatswell, PA to General Manager, Community Development
CITY PLAN LINKS	3.4 Be a proud, accessible and welcoming community.
SUMMARY	The Wat Khmer Santipheap Association of SA Inc. Application is submitted to the Sport, Recreation and Grants Committee for Consideration.

RECOMMENDATION

1. It be noted that, in accordance with delegated powers set out in the endorsed Terms of Reference, the Sport, Recreation and Grants Committee assessed and did not allocate funding for the November 2016 round of Community Grants for Application Number 28/2016: Wat Khmer Santipheap Association of SA Inc.

ATTACHMENTS

This document should be read in conjunction with the following attachments:

1. 28/2016: Wat Khmer Santipheap Association of SA Inc. - First Application Attachments
2. 28/2016: Wat Khmer Santipheap Association of SA Inc. - Second Application Attachments
3. 28/2016: Wat Khmer Santipheap Association of SA Inc. - Application 1
4. 28/2016: Wat Khmer Santipheap Association of SA Inc. - Application 2

1. BACKGROUND

- 1.1 Wat Khmer Santipheap Association of SA Inc. received \$2,000 Community Grants Program funding in October 2015 to assist with the purchase of costumes, crowns, jewellery, umbrellas and baskets for the Cambodian Traditional Youth Dancing Project.
- 1.2 The original 28/2016: Wat Khmer Santipheap Association of SA Inc. Application was received for the September 2016 round of Community Grants Program funding however the Application was submitted using an outdated Community Grant Application Form and required further information.
- 1.3 The Wat Khmer Santipheap Association of SA Inc. submitted a second application however this was also completed using an outdated Community Grant Application Form and required further information.

- 1.4 The Wat Khmer Santipheap Association of SA Inc. submitted a third application using the current Community Grant Application Form however this also required further information:
 - 1.4.1 The expense budget by item was incomplete;
 - 1.4.2 A detailed, current quote was not provided (a receipt was attached);
 - 1.4.3 The Application Declaration page was incomplete;
- 1.5 The Wat Khmer Santipheap Association of SA Inc. submitted a fourth application using the current Community Grant Application Form however there are concerns regarding the current, detailed quote.

2. CONSULTATION / COMMUNICATION

- 2.1 Internal
 - 2.1.1 GMCD

3. REPORT

- 3.1 Wat Khmer Santipheap Association of SA Inc. submitted four (4) Community Grants Program applications as outlined in *1. Background* in this report.
- 3.2 The first two (2) applications were submitted using the outdated Community Grant Application Form and were incomplete. As a result these application forms are not included as attachments to this report. The applications included photographs of the Cambodian Tradition Dancing Group that are also not attached to this report due to their file size however the two (2) application's attachments are included as attachments to this report (attachment's 1 and 2), for reference.
- 3.3 A receipt and translated document dated 10/07/2016 was provided with the second Application. The Applicant was reminded that funding will not be considered for money already spent and should they wish to submit a new application a detailed, current quote will need to be obtained and attached to the new application.
- 3.4 Wat Khmer Santipheap Association of SA Inc. submitted a third application (attachment 3) using the current Community Grant Application Form however this also required further information as outlined in 1.4 of this report. A quote and translated document was provided by the Applicant with this Application however the 'quote' is the same document as the 'receipt' and translated document provided in attachment 2 and therefore deemed one and the same, a receipt.
- 3.5 The Wat Khmer Santipheap Association of SA Inc. submitted a fourth application (attachment 4) including the additional information requested. The Minutes of Meeting of 21 August 2016 included with the application indicates that the items requested in the Community Grants Program Application have been purchased.

4. CONCLUSION / PROPOSAL

- 4.1 Community Grants Program staff acknowledge the effort undertaken by the Applicant to submit an eligible application however the evidence provided does not demonstrate that the money is yet to be spent on the items listed in the Application.

- 4.2 On the basis that a receipt was provided at the onset and dated 10 July 2016 it is recommended that the Wat Khmer Santipheap Association of SA Inc. is not allocated Community Grants Program funding for this project.

CO-ORDINATION

Officer: EXECUTIVE GROUP
Date: 08/11/2016



សហគមន៍វត្តខ្មែរសន្តិភាពសាធិវត្ត
WAT KHMER SANTIPHEAP ASSOCIATION OF . S . A . INC

172 Burton Road, Paralowie S.A 5108 A.B.N 65 073 088 215 Email wksa_sa@hotmail.com

Telephone: (08) 8281 2793

Date: 23 / 07 / 2016

Check list

- 1.Community Grants Program Application Form
- 2.Picture of dancers
- 3.Background information
- 4.Summarize Experience of Youth Dancing
- 5.Receipt of goods
- 6.Certificate of Incorporation
- 7.Australian Business Register

Chey City Shop Cosmetic sales

Address: 28EO Road 166 Sankat orisey Ti 1 Khan 7 Makara Phnom Penh
 Phone: 02399 1717 / 012717 757 / 011 334 566

No, 000124

Receipt

N.	Name of Goods	Quantity	Retail Price	Total Price
01	Large Costumes for rehearsal dancers	15	\$ 40	\$ 600
02	Small Costumes for rehearsal dancers	7	\$ 25	\$ 175
03	Pheak Cheang Costumes for dancers	9	\$ 250	\$ 1750
04	Grown for blessing dancers	7	\$ 180	\$ 1260
05				
06				
07				
08				
09				
10				
11				
12				
13				
14				
15				
16				
17				
18				
	Total			\$ 3080 ASD

Buyer signature

Beb Sophearom

Seller

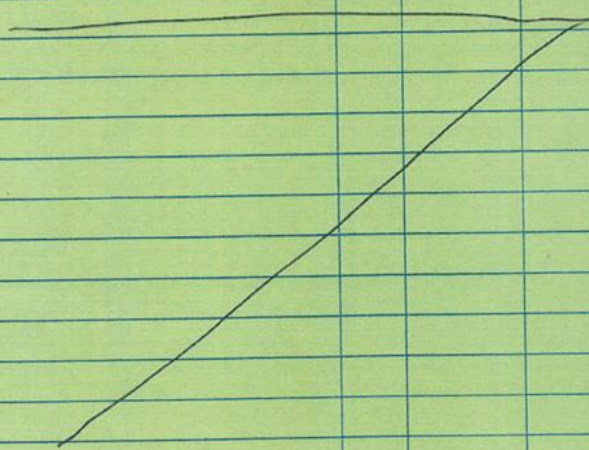
Chey City

Date 10 / 07 / 2016. Seller

វិស័យសិទ្ធិ លក់គ្រឿងសំអាងការ

ផ្ទះលេខ 28E0 ផ្លូវលេខ 166 សង្កាត់ អូរឫស្សីទី 1 ខណ្ឌ 7 មករា ភ្នំពេញ
ទូរស័ព្ទ : 012 723 623 / 012 717 757 / 081 871 888

វិស័យសិទ្ធិ N° 000124

ល.រ	រាយការណ៍ទំនិញ	ចំនួន	តម្លៃរាយ	តម្លៃសរុប
1	ឧបករណ៍បោះដុំ	15 X 40\$	600\$	
2	ឧបករណ៍បោះត្រា	7 X 25\$	175\$	
3	ឧបករណ៍កាត់ស្រូវ	9 X 35\$	315\$	
4	ឧបករណ៍បោះពុម្ព	7 X 180\$	1260\$	
				
សរុប 2350 USA = 3.080 AUP				

អ្នកទិញ *Saint* ថ្ងៃទី...10...ខែ...07...ឆ្នាំ 2016... អ្នកលក់ *[Signature]*



សហគមន៍វត្តខ្មែរសន្តិភាពសាឡិចកម្ម
WAT KHMER SANTIPHEAP ASSOCIATION OF . S . A . INC

172 Burton Road, Paralowie S.A 5108 A.B.N 65 073 088 215 Email wksa_sa@hotmail.com Telephone:
 (08) 8281 2793

23/07/2016

Watt Khmer Sontipheap
 Association of SA Inc.
 172-174 Burton Road
 PARALOWIE SA 5108

Summarize Experience of Youth Dancing

We created a group of Khmer traditional dancing for youth dancers under the Watt Khmer Santipheap Association of SA Inc.

The group dancers of Wat Khmer Santipheap Association was created around 4 years ago. Located at 172-174 Burton road, Paralowie SA 5108. The dancers and people who train, they are volunteers to keep Khmer traditional culture in name Apsara of Khmer Amatak Sontipheap for Youth Dancer.

Since this group was created 4 years ago they did volunteering training for dancing and also to perform for many dances such as: Apara dance, Love moon dance, Robam Kos trolouk, Neary Cheary Chou, and Bopha louk key etc. They are very happy training and dancing by volunteers in the Cambodian Community and outside such as: Community School performance harmony day, Australia Day, Tomato Factory and others.

In December 2015 we had celebrated of Apsara of Khmer Amatak Sontipheap, after we received Community Grants from Salisbury council.

Our Khmer culture of youth group traditional dancing is to keep alive and going in South Australia, they had performed without pay for their activities because they volunteered, but sometimes they get donations from viewers.

To create pride in their culture. To participate in multicultural events to share and show other Communities.

1. Age group from 5 years to 16 years
2. Boy and girls yes
3. Performance in Khmer dancing
4. School performance harmony day when required by invitation.
5. Photos to prove performances
6. Australia day parades



Chief of Buddhist Monk

Nou Sorn

WAT KHMER SANTIPHEAP ASSOCIATION OF SOUTH AUSTRALIA Inc

BACKGROUND INFORMATION

WKSA Profile

Wat Khmer Santipheap Association of South Australia Inc (WKSA)

The Wat Khmer Santipheap Association of South Australia Inc (WKSA) was established on 3rd February 2007 in the suburb of Paralowie South Australia. The beginnings were very humble with the group consisting of 20 not-for-profit members. The association acts as a conduit for Buddhist merit sharing and preserves Khmer culture, custom and tradition for the Cambodian migrants in South Australia.

The purpose of forming this Association was to keep and preserve the Khmer Religion, culture and tradition alive to serve the needs of the Cambodian migrants in South Australia and for the new Khmer generations to come. Since the new modern life was introduced while they have arrived in Australia, the Cambodian has no avenues where they could be provided with their home-land religious guidance, cultural and traditional education and the correct way of maintaining ones racial identity and in some cases the new Cambodian younger generations were left with no choice but to adopt new faith and culture, hence the inception of the Wat Khmer Santipheap committee. Also, as Buddhism is one of the fastest growing religions in the world and Australia, it was felt that there was a need to develop a local organization to cater for the purpose of Khmer custom preservation and the development of Cambodian religious practices. WKSA, which is made up of brothers and sisters from many different Khmer ethnic backgrounds and from different parts of South Australia, welcomes the united support of all in our community.

In the beginning, WKSA was registered with the address located at the president resident itself at 7 Woodland Way, Paralowie S.A. 5108. The association is now shifted to the new rental lot at 172 Burton Road, Paralowie S.A. 5108.

Our Vision

For the community welfare and spiritual needs of Cambodian people in South Australia by preserving, promulgating and promoting Khmer Custom, Culture, Buddhist Religion and Believes.

Our Mission Statement

The Wat Khmer Santipheap Association of S.A. Inc. (WKSA) is the body representing Cambodian community interests and providing Buddhist spiritual needs and promulgating Khmer culture to the Cambodian community in the state of South Australia.

WKSA is a non-profit religious-cultural organization, managed by an elected board and management committee with responsibility for specific Buddhist religious, cultural and community development activities.

WKSA programs, festivals, ceremonies and initiatives are directed toward the following:

- Provide Buddhist welfare service for members of the Cambodian community.
- Maintaining Cambodian Buddhist religion, culture and heritage and language and to create goodwill and friendship between Khmer Buddhist community and other Buddhist communities in Australia.
- To provide a focus of friendship and support for the Khmer Buddhist Community in Australia.
- To facilitate the members of the association in their spiritual life through sharing the teaching and practice of Buddhist rules or Principals for developing virtue and blessing by the monks.
- To preserve, protect and disseminate the Khmer Culture and Tradition and other humanitarian services.
- To provide accommodation and support for all Buddhist monks, who will provide teaching and guidance to members of the Association.
- To buy or rent property that shall be used as a temple where religious practices are carried out and to establish other activities in accordance with the purpose of the association with guidance of Buddhism.
- To collaborate with other organization working for the same purpose.
- To remain independent from any political party or other organization.

Our Values

The WKSA values:

- self responsibility and self determination
- working in co-operation and partnership
- openness, honesty and integrity

Contact Information

E-mail :

Postal Address

Wat Khmer Santipheap Association of S.A INC.
172 Burton Road, Paralowie S.A. 5108,



The Committee

The Board is comprised of an elected group of five

President	Mr Savonn Ly	
Vice President	Mr Dim Yeam	
Secretary	Mr Rouen Ryan Sin	
Treasurer	Mr Bunly Soum	
Treasurer	Mr Huy Sabuy	

Join WKSA

Become a member

To become a member of the Wat Khmer Santipheap Association of South Australia Inc the applicant must be at least 18 years of age or over and needs to fill up the membership application form.

It is established that the applicant should be either:

1. they are born in Cambodia
2. That they have one or more Cambodian parents.
3. That they are Khmer Krom
4. Have a spouse who is Cambodian and that they are a permanent resident of South Australia.

The membership term should be renewed every five years.

Please consult section 5 of the WKSA constitution for further details.

Activities

The Wat Khmer Santipheap Association of South Australia Inc co-ordinates a series of annual activities including , a , as well as and educational Forums throughout the year.

Past events

As part of this event, or

Overview of Cambodian Religion/Culture/Ceremonies

Cambodia Religion

Buddhism

Buddhism is the official religion of the Kingdom of Cambodia. Theravada Buddhism is the religion of virtually all of the ethnic Khmer, who constitute about 90 percent or more of the Cambodian population. Buddhism originated in what are now north India and Nepal during the six century B.G. Theravada Buddhism is tolerant, non prescriptive religion that does not require that each individual take full responsibility for his own actions and omissions.

Buddhism is based on three concepts: dharma (the doctrine of the Buddha, his guide to right actions and belief); karma (the belief that one's life now and in the future lives depends upon one's own deeds and misdeeds and that as an individual one is responsible for, and rewarded on the basis of, the sum total of one's acts and omissions in all one's incarnations past and present); and sangha, the ascetic community within which can improve his karma. The Buddhist salvation is nirvana, a final extinction of one's self. Nirvana may be attained by achieving good karma through earning much merit and avoiding misdeeds. A Buddhist's pilgrimage through existence is a constant attempt to distance himself or herself from the world and finally to achieve complete detachment, or nirvana.

The fundamentals of Buddhist doctrine are the Four Noble Truths: suffering exists; craving (desire) is the cause of suffering; release from suffering can be achieved by stopping all desire; an enlightenment – Buddha hood- can be attained by following the Noble Eightfold Path (right views, right intention, right speech, right action, right livelihood, right effort, right mindfulness, and right concentration) which constitute a middle way between sensuality and asceticism. Enlightenment consists of knowing these truths. The average layperson cannot hope for nirvana after the end of this life, but can by complying better his condition in the next incarnation.

Culture

People

Cambodians comprise a variety of kids who are commonly called Khmer. The Khmer constitute about 90 percent of the population. The population also includes a diversity of other ethnic backgrounds: Chinese, Vietnamese, Chams, and hill tribes, called Khmer Loeu.

The Khmer are believed to have lived in the region from about the 2nd century CE. They may constitute a fusion of Mongul and Melanesian elements. They have been mainly influenced over the centuries by the powerful Indian and Javanese kingdoms. The Khmer-Loeu - or upland-Khmer - are one of the main tribal groups and live in the forested mountain zones, mainly in the North-East. Traditionally, the Khmer-Loeu were semi-nomadic and practiced slash and burn agriculture. In recent years, because of their increasing numbers, they have turned to settled agriculture and adopted many of the customs of the lowland Khmer. .

Arts & Architecture

The height of Khmer art and architecture dates from the Angkor period. All the surviving monuments are built of stone or brick, and all are religious buildings. The culture and art of the early kingdoms of Funan and Chenla were central to the evolution of Angkorian art and architecture. Relics of the pre-Angkorian periods have been found all over South-Cambodia. Most of it is Hindu art, but a number of Mahayana-Buddhist Bodhisattvas have been found also. During Angkor period, architecture and its decoration were governed by a series of mystical and religious beliefs.

Common motifs in Khmer sculpture are apsaras (celestial nymphs), which have become a kind of symbol of the Khmer culture. The apsaras are carved with splendidly ornate jewellery, clothed in the latest Angkor fashion and represented the ultimate ideal of feminine beauty of that time. Other motifs are nagas (sacred aquatic snakes), which play an important part in Hindu mythology and are possibly more than any other motif characteristic of Southeast Asia. Most of these motifs have been taken from Indian art and have been modified into what is now known as traditional Khmer art.

Temples were designed to represent the cosmic Mt. Meru, the home of the gods of Indian cosmology, surrounded by oceans. Angkor literally means "city" or "capital", Wat means "temple". Angkor Wat is the largest and most famous of the architectural masterpieces of Cambodia and probably the largest religious building on earth. Conceived by Suryavarman II, Angkor Wat took an estimated 30 years to build. It is generally believed to have been a funeral temple for the king. It has been continuously occupied by monks and is well preserved.

Intricate bas reliefs surround Angkor Wat on four sides. Each tells a different story. The most celebrated of these is "The Churning of the Ocean of Milk", which is located on the east wing. Again, the central sanctuary of the temple complex represents Mt. Meru, the five towers symbolize Meru's five peaks, the enclosing wall represents the mountains at the edge of the world and the surrounding moat, the ocean beyond.

The symmetrical towers of Angkor Wat are stylized on the Cambodian flag and have become a symbol of Khmer culture.

Language

The official Cambodian language, called Khmer, is part of the Mon-Khmer family, enriched by the Indian Pali and Sanskrit languages. Khmer is related to the languages spoken by hill tribe people of Laos, Vietnam and even Malaysia. It has no tones and the script is derived from the South-Indian alphabet, written from left to right and leaving no space between the words. English and French are spoken also - French mainly by some old people, whereas the younger generation learns English.

There are many kind of ceremonies which are practicing by Cambodian and each ceremony has its own meaning.

Festivals/Ceremonies

Khmer New Year

The most important holiday of the year in Cambodia is the Khmer New Year, usually celebrated on 14, 15, and 16 April. It is a major holiday because of its length but even more because of its cultural significance as the one time of the year when almost all commerce stops and the big cities are suddenly depleted as all the urban dwellers return to the villages in the provinces where they are originally from.

Water Festival

The second greatest celebration--after the Khmer New Year--in Cambodian culture is the annual water festival. Held in November, ostensibly it marks the time of the year when the Tonle Sap River reverses its direction and starts flowing back toward the Mekong River and the sea. The actual dates for the festival are set well in advance, however, because of the unpredictability of the end of the rainy season which is the cause of the river's reversal.

The festival is centered on the Mekong River at Phnom Penh, and approximately one million people migrate from the provinces to the capital for a real national celebration centered on the racing of about 400 boats representing teams and communities from all over the country.

Ceremony after giving birth

Normally 3 days after birth we have a ceremony called "Bangkok Chmorb". This ceremony is to thank and pay respect to the old lady who acts as midwife during labour.

Giving birth is not easy, Cambodian people compare giving birth to a journey across the sea during a storm or cyclone. That is why they have to have this ceremony to really show their appreciation to the midwife.

The parents need to write down the date of birth of the child, not just for the record, but for marriage planning in the future.

Ceremony to have a hair shave

Parents celebrate this ceremony when their child is between 6 and 9 years old, and it lasts about 2 days. This ceremony is to keep the child away from bad luck or for the child to receive a blessing.

The child who receives this sort of ceremony is considered to be a lucky one. He is allowed to keep only a little bit of hair on top of the head until the age of 21. Sometimes until the child becomes a monk, otherwise the parents will have to do another ceremony to shave off that part of hair that has been there since the child's first ceremony.

The Wedding

May is the wedding season in Cambodia. Every day it is easy to ride past one or two, or even five or six, wedding banquets on the streets of Phnom Penh. They're hard to miss because the

families of the bride and groom set up a large tent right in the street, sometimes cutting traffic down to a one lane or just a walkway, or even blocking the street completely.

A major reason this season is so popular for weddings is that the rainy season is soon to be upon us, and dry weather is a major asset when the common people hold their celebrations outside.

The actual wedding ceremony takes place in the morning, usually at the bride's house, with just a couple monks and a few friends present. The real celebration is the evening banquet, also at the house. Here, early in the evening, the wedding party waits for the next guest arrival.

Weddings are a fixed part of the culture. Invited people really must attend because in a country of poor people, the system requires that each guest offer a cash donation upon arrival. No other wedding gifts are given. It is especially bad for the young women. They are invited to many weddings of their friends, and for each they buy a new formal (\$20 USD), fix their hair, pay for a make-up session, and then contribute toward the cost of the banquet.

After greeting the wedding party (first photo above), the guest next encounters this table where the envelope that contained her wedding invitation (and has her name on it) is placed in the silver bowl. The two men then record the amount in the red book behind the bowl, next to the guest's name. Only trusted family members are given this accounting task. Khmer people usually give about \$10 per person. Foreigners are expected to contribute \$20 or \$25. Last week I went to weddings of DDP staff on Monday, Thursday, and Sunday evenings!

At the back of the lot, behind the house, a crew of professional wedding caterers prepares the meal. One company sets up the tent. Another brings the tables and chairs and serves the food.

Funeral

The funeral is very important. It is very much involve in the Buddhist religion. During this ceremony Buddhist monks play an important part in the ceremony. They provide chanting service to the dead and give blessing to the family.

It is also very demanding, both in terms of time and the emotional support required from the community, especially for the family members of the person that died.

The ceremony is held that goes from one day to seven days. Next ceremony will be at 100 days. And last but not least, from that time on, there will be once a year ceremony to commemorate the person who has passed away. After someone dies, people in the community visit the family and give full assistance to the family.

CFN

ABN 65 073 0888215



SOUTH AUSTRALIA
Associations Incorporation Act 1985
Section 20(1)

Incorporation Number: A39378

Certificate of Incorporation

This is to certify that

WAT KHMER SANTIPHEAP ASSOCIATION OF SOUTH AUSTRALIA INCORPORATED

is, on and from the thirteenth day of February 2007
incorporated under the Associations Incorporation Act 1985.

Given under the seal of the Corporate Affairs Commission at Adelaide on this
thirteenth day of February 2007

Commissioner for Corporate Affairs



TO CERTIFY THIS COPY IS
FROM THE ORIGINAL
DOCUMENT SIGHTED BY ME





Leesa Vlahos MP
Member for Taylor



2 September 2016

The Community Grants Officer
City of Salisbury
PO Box 8
SALISBURY SA 5108

Dear Grants Officer

Re Community Grant Application by Wat Khmer Santipheap Association of South Australia Inc.

I write in support of the application lodged by the Wat Khmer Santipheap Association of SA Inc to receive assistance in holding a Cambodian Traditional Youth dancing event.

The Chief Buddhist Monk, the Venerable Nou Sorng is well known to myself and the wider Khmer community within my electorate of Taylor and South Australia. I have no hesitation in supporting the Wat Khmer Santipheap Association in obtaining the grant to be used for the purposes of upholding the traditions of Khmer dance.

The grant will assist to maintain the Khmer culture and to provide at least 20 Khmer youths the opportunity to participate in this important cultural event for public display.

I have supported their efforts over the many years and this year it is again my pleasure to support the grant application on its merits and I wish the Wat Khmer Santipheap Association success in obtaining the grant.

Yours sincerely

Leesa Vlahos

LEESA VLAHOS MP
Member for Taylor

*Minister for Disabilities
Minister for Mental Health and Substance Abuse*

Paralowie Village
Units 1-2, 9 Liberator Drive
Paralowie SA 5108
Telephone +61 8 8280 5144



Australian Government
Australian Taxation Office

Australian Business Register

Australian business number(ABN) : 65 073 088 215

Entity name : WAT KHMER SATIPHEAP ASSOCIATION OF SA INC

ABN Status : Registered

ABN Registration Date : 22 March 2007

Postal Address : 7 WOODLAND WAY
PARALOWIE SA 5108

Business Address : 174 BURTON ROAD
PARALOWIE SA 5108

Type of Entity : Incorporated Entity

Industry Code (ANZSIC) : 99994

Public Officer : MR SA V LY

Please turn over ...

TO CERTIFY THIS COPY IS
FROM THE ORIGINAL
DOCUMENT. SIGNED BY ME

[Signature]

[Circular Stamp: SECRETARY GENERAL, SOUTH AUSTRALIA, 1906]



Community Grants Program

Application Form

Applications for Community Grants must be received by the 15th of each month to be assessed by the Sport, Recreation and Grants Committee the following month (i.e. an application received by the 15th of February will be assessed at the March Meeting).

Please ensure you have read and understood the City of Salisbury Community Grants Program Guidelines and Eligibility Criteria document prior to completing an Application.



Live it up

Application Eligibility Checklist		
Is the Funding For:	Yes	No
• Money already spent?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Salaries (initial or ongoing)? <i>Payment of facilitator or contractor engaged specifically to deliver program / activity under the grant may be considered</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Recurrent administration costs?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Capital development (e.g. renovations or building changes that will be permanently part of the structure)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Upgrading facilities which belong to Local, State or Commonwealth Governments?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Application from Public / Private Schools?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• An organisation trading as a sole trader/individual?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• A group that is a non-incorporated body and does not have a parent incorporated body or is not endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not-for-profits Commission?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have previously received funding and NOT fulfilled reporting obligations, including provision of post event evaluation/report and financial acquittal?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have received Community Grants Program funding from the City of Salisbury within the past twelve (12) months.	<input type="checkbox"/>	<input checked="" type="checkbox"/>

*If you have answered **YES** to any of these questions,
this application is **NOT** eligible for grant funding.*

*to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered***

Community Grant Application - Page 2 of 13

Applicant Organisation Information	
1. GROUP / ORGANISATION DETAILS	
Name:	<i>Wat Khmer Santipheap Association of SA Inc.</i>
Address:	<i>172 - 174 Burton Road</i>
Suburb:	<i>PARALOWIE SA</i> Postcode: <i>5108</i>
2. CONTACT PERSON DETAILS (this is the address that all correspondence will be sent)	
Name:	<i>Mr Nou Sorng</i>
Title (your role with the group/organisation):	<i>Chief of Buddhist Monk</i>
Address:	<i>As above</i>
Phone:	Landline: XXXXXXXXXX Mobile: XXXXXXXXXX
Email:	XXXXXXXXXX@XXXXXX.XX
3. COMMUNITY GRANT RESPONSIBILITY	
Name of Person Responsible for the Grant:	<i>Mr Savonn Ly</i>
Title (role with the group/organisation):	<i>President</i>
4. GROUP / ORGANISATION MANAGEMENT DETAILS	
How is your group/organisation managed:	<i>Committees</i>
Is your organisation:	
a) Incorporated:	<div style="display: flex; justify-content: space-around;"> <div> Yes <input checked="" type="checkbox"/> (go to question c) </div> <div> No <input type="checkbox"/> (go to question b) </div> </div>
ASIC Registration Number:	<i>A39378</i>
b) Operated under a Parent Organisation: <small>(please state which parent organisation you operate under below AND attach a supporting letter from the organisation)</small>	<div style="display: flex; justify-content: space-around;"> <div> Yes <input type="checkbox"/> (go to question c) </div> <div> No <input type="checkbox"/> (go to question c) </div> </div>
Parent Organisation	
Name:	
ASIC Registration Number:	

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 3 of 13

Organisation Information (continued)		
c) Community/Non-Profit:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is your organisation endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not-for-profits Commission?	Yes <input type="checkbox"/> <i>(evidence must be attached to this application)</i>	No <input checked="" type="checkbox"/>
d) Government Funded: <i>(If Yes, please list funding source/s and purpose in part e & f)</i>	Yes <input type="checkbox"/> (go to question e & f)	No <input checked="" type="checkbox"/>
e) Funding source/s:	Community Support	
f) Purpose:	Khmer Traditional Dancing for Youth Group	
g) Other (please specify):	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
5. BANKING INFORMATION		
<i>Your organisation must have its own Bank/Credit Union Account or similar</i>		
Full Account Name: <i>Wat Khmer Santipheap Association of SA Inc.</i> <i>*do not provide account or BSB numbers*</i>	Financial Institution Name: [REDACTED] Branch Location: [REDACTED]	
6. REFEREE INFORMATION		
<i>Please provide the name and contact details of a referee – preferably someone who can verify the bona fide status of your group/organisation (NOT Members of the Committee)</i>		
Referee's Name:	Leesa Vlahos MP	
Referee's Contact Information:	[REDACTED]	

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 4 of 13

GST Declaration		
I agree upon signing of this document that I will provide Council with the following information in regards to my Australian Business Number and Goods and Services Tax registration status.		
Does your group/organisation have an ABN <i>(If Yes - Please Quote ABN:)</i> 6 5 0 7 3 0 8 8 2 1 5 <i>(If No, the ABN Declaration Form attached must be signed)</i>	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is your group/organisation registered for GST	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
NB: GST Registration <i>If your group IS registered for GST you are required to provide a Tax Invoice to Council before an approved grant amount can be provided to your organisation. The invoice must clearly state the words TAX INVOICE, Business Name, ABN and the approved grant amount including GST.</i>		

to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered**

Community Grant Application - Page 5 of 13

Project/Event Budget Information	
Will the project or event generate income (e.g. ticket sales, entry fee etc.)?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (enter '0' dollar amounts below)
If Yes, provide details:	
INCOME	\$ AMOUNT
Project or event generated income:	
Organisation's contribution:	
Income received from other Grants: (list organisation(s) providing Grant funding and their contribution)	
Income received from sponsors: (list sponsor(s) and their contribution)	
Donations: (please specify the source, product or service and estimated amount of funding requested)	
Have you sought any other funding for the project: (please specify the source and amount of funding requested)	<input type="checkbox"/> Yes <input type="checkbox"/> No
TOTAL (including GST):	\$ 0
What resources will you and your group contribute to the project e.g. in-kind donations, labour, time etc.?	20 Youth Dancers and Time
EXPENSES (specify the proposed expense budget by item:)	\$ AMOUNT
TOTAL (including GST):	\$ 0

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 6 of 13

Summary of Project/Event Information	
Is the funding for: <i>(please tick which is applicable)</i>	<input type="checkbox"/> Event <input checked="" type="checkbox"/> Project <input type="checkbox"/> Ongoing <input type="checkbox"/> New Group
Name of Project/Event Requiring Funding	<i>Cambodian Traditional Dancing Group</i>
Date(s) of Project/Event <i>(if ongoing please state "ongoing")</i>	<i>On going</i>
Total cost of Project/Event	<i>\$ 0 \$2350</i>
Amount of Community Grant Funding Requested	<i>\$ 2,000</i>
Is there any other information that you may feel is relevant to your application?	<i>I would like to get support from Salisbury Council or state government for Khmer cultural dance group. To keep an ongoing future with the Salisbury Regional Council, in anticipation of money that might help to promote the Cambodian Community.</i>
<input type="checkbox"/> There are no relevant attachments.	<input checked="" type="checkbox"/> There are relevant attachments and the following documents are attached: 1. <i>Already provided see ref. 28/2016</i> 2.
Which category best describes your project/event? <i>(please check all that apply)</i>	
Health	<input checked="" type="checkbox"/>
Establishment of a new group	<input type="checkbox"/>
Education and Training	<input checked="" type="checkbox"/>
Culture / Arts	<input checked="" type="checkbox"/>
Sport / Recreation	<input checked="" type="checkbox"/>
Environment	<input type="checkbox"/>
Disability	<input type="checkbox"/>
Youth	<input checked="" type="checkbox"/>
Crime Prevention	<input checked="" type="checkbox"/>
Aged	<input type="checkbox"/>

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 7 of 13

Project/Event Details	
Previous Community Grants Program Funding	
Has your Organisation previously received a Community Grant? <i>(If Yes – when, amount granted and what the grant was for:)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(go to Group/Organisation Information)</i>
When was the Grant funding received (month & year):	
What amount of Grant funding was provided:	\$ 2,000
When was the previous Grant acquitted (month & year):	12/10/2015
Group/Organisation Information	
Group/Organisation Name	Wat Khmer Santipheap Association of SA Inc.
Group/Organisation Description	Khmer Culture religious group to provide for youth traditional dancing
Group/Organisation Registered Address	Number/Street: 172-174 Burton Road Suburb: PARALOWIE SA Postcode: 5108
Is the Club Incorporated?	yes
Number of Members	400 to 500 at Burton
% of Membership that reside in the City of Salisbury	85 % at least
Project/Event Details	
Project/Event Name	Cambodian Traditional for youth dancing.
Project/Event Summary	To keep alive Khmer Traditional of youth dancing on weekend
Date(s) of Project/Event	On going
Location of Project/Event:	Number/Street: 172-174 Burton Road Suburb: PARALOWIE SA Postcode: 5108
How will the Project/Event benefit the residents of the City of Salisbury?	A Structured look in to the Cambodian dance style
How many individuals will benefit from the Project/Event?	400 people minimum
% of project/event participants that reside in the City of Salisbury	100 %
If it is an Event, is it open to the public?	Yes
How will the Project/Event be promoted?	Word of mouth, information sent to MP

to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered**

Community Grant Application - Page 9 of 13

Project or Event Scope

Provide a description of the proposed project or event:

To provide for the Cambodian youth to keep alive the Khmer dancing culture. Wat Khmer Santipheap is to always to promote youth dancing on the weekends. To Keep the young people to avoid the use of drugs, alcohol and gambling.

To create pride in their culture. To participate in multicultural events to share and show other Communities.

- 1. Age group from 5 years to 16 years*
- 2. Boy and girls yes*
- 3. Performance is Khmer dancing*
- 4. School performance harmony day when required by invitation.*
- 5. Photos to prove performances*
- 6. Australia day parades*

Attachments

- ☐ There are no attachments relating to the Project or Event Scope.
- ☒ The following documents are attached relating to the Project or Event Scope:

- 1. have already been sent*
- 2.*
- 3.*

Benefits and Outcomes of the Project or Event

Provide a description of the benefits and outcomes of the proposed project or event to the residents of the City of Salisbury and/or the wider community:

Cambodian community shares a closer understanding of Khmer dance and to keep alive their traditional culture and background. To promote for youth health, confidence, education, training and friendships.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 10 of 13

Support for the Project or Event

Demonstrate how the proposed project or event is supported by residents of the City of Salisbury and/or the wider community:

(include a list of key partners and/or stakeholders, community members and organisations that have been consulted, how and why they support the project or event and any other information that demonstrates support.

Peoples donations, time and experience by helping to teach the Khmer youth dance and awareness of the Cambodian Community.

There are some pictures of Wat Khmer Santipheap's dancing group performing in Khmer's traditional dance and to be involved with other community's cultures. They will volunteer to perform and share Khmer culture.

Attachments

- ☐ There are no attachments relating to Support for the Project or Event.
- ☐ The following documents are attached relating to Support for the Project or Event:
1. *have already been sent*
 - 2.
 - 3.

Project or Event Management

Ongoing Projects or Events

Describe how the proposed project or event will be managed into the future:

(outline how you will ensure sustainability and achieve outcomes for the project or activity)

One-off Projects or Events

Describe how the proposed project or event will be managed:

(outline how you will achieve outcomes for the project or activity)

Group Committee to look after with Nou Sorng chief Monk of Wat Khmer Santipheap Association of SA Inc. and Trainer by Ms Sotheary Kuy

Including new dancers all the time to keep up with people leaving.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 11 of 13

Application Declaration

Please note that this declaration must be signed by two current senior office holders of the group/organisation (ie President, Secretary, Treasurer)

Please read, tick the S1 and S2 boxes and sign:

S1 **S2**

☒ ☐ I acknowledge that I am authorised to make this application on behalf of the Organisation.

☒ ☒ I acknowledge that the information provided in this application is true and correct.

☒ ☒ I acknowledge that our Organisation may be required to supply further information prior to consideration of this application by the City of Salisbury Community Grants Program.

☒ ☒ I acknowledge that, should this Application be successful in obtaining Community Grant funding, our Organisation must complete the acquittal and reporting requirements as set out in the Acceptance of Community Grant – Form 1 and City of Salisbury Community Grants Program Guidelines and Eligibility Criteria.

☒ ☒ I acknowledge that any changes in circumstances with regard to this Application must be notified in writing and the City of Salisbury Community Grants Program may request further information.

On behalf of Wat Khmer Santipheap (Group/Organisation)

Nou Sorng / 23/09/2016
(Name/Position)


(Signature 1)

(Date)

Contact (phone number):

and

Savonn Ly / 23/09/2016
(Name/Position)


(Signature 2)

(Date)

Contact (phone number):



Both signatories will be contacted to verify the application - a contact phone number must be provided for each.
Your Application will **not** be submitted until contact and verification has occurred, **no exception**.

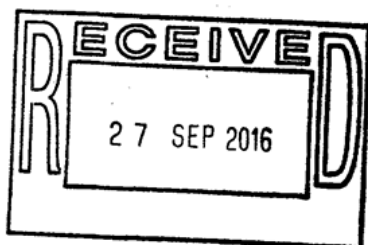
to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered**

Phone: 02299 1717 / 012717757 / 011334 566

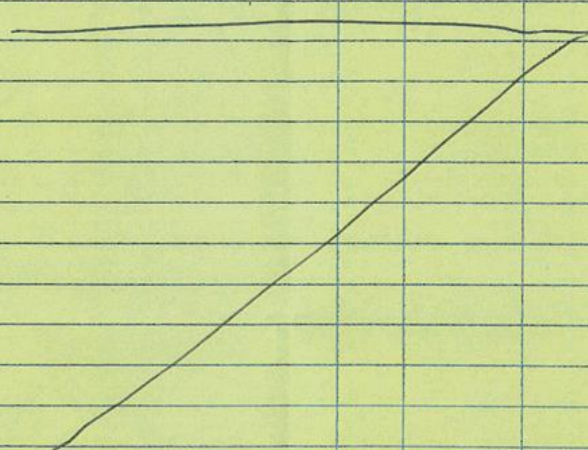
No. 000124

[illegible]

Chey City



វត្តសង្ឃ វេត្យាសង្ឃ
 ផ្ទះលេខ 28E0 ផ្លូវលេខ 166 សង្កាត់ អូរឫស្សី ខណ្ឌ 7 មករា ភ្នំពេញ
 ទូរស័ព្ទ : 012 723 623 / 012 717 757 / 081 871 888
វិក័យប័ត្រ N° 000124

ល.រ	រាយការណ៍	ចំនួន	តម្លៃរាយ	តម្លៃសរុប
1	ឧបត្ថម្ភធន	15 X 40\$	600\$	
2	ឧបត្ថម្ភធន	7 X 25\$	175\$	
3	ឧបត្ថម្ភធន	9 X 35\$	315\$	
4	ឧបត្ថម្ភធន	7 X 180\$	1.260\$	
				
សរុប 2350 USA = 3080 AUD				

អ្នកទិញ *Saint* ថ្ងៃទី 10 ខែ 07 ឆ្នាំ 2016 អ្នកលក់ *[Signature]*

Community Grants Program

Nou Sorng

Wat Khmer Santipheap Association of AS Inc.

172 – 174 Burton Road, Paralowie SA 5108

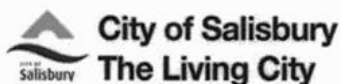




Community Grants Program Application Form

Applications for Community Grants must be received by the 15th of each month to be assessed by the Sport, Recreation and Grants Committee the following month (i.e. an application received by the 15th of February will be assessed at the March Meeting).

Please ensure you have read and understood the City of Salisbury Community Grants Program Guidelines and Eligibility Criteria document prior to completing an Application.



**City of Salisbury
The Living City**

live it up

Application Eligibility Checklist		
Is the Funding For:	Yes	No
• Money already spent?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Salaries (initial or ongoing)? <i>Payment of facilitator or contractor engaged specifically to deliver program / activity under the grant may be considered</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Recurrent administration costs?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Capital development (e.g. renovations or building changes that will be permanently part of the structure)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Upgrading facilities which belong to Local, State or Commonwealth Governments?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Application from Public / Private Schools?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• An organisation trading as a sole trader/individual?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• A group that is a non-incorporated body and does not have a parent incorporated body or is not endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not-for-profits Commission?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have previously received funding and NOT fulfilled reporting obligations, including provision of post event evaluation/report and financial acquittal?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have received Community Grants Program funding from the City of Salisbury within the past twelve (12) months.	<input type="checkbox"/>	<input checked="" type="checkbox"/>

*If you have answered **YES** to any of these questions,
this application is **NOT** eligible for grant funding.*

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 2 of 13

Applicant Organisation Information		
1. GROUP / ORGANISATION DETAILS		
Name:	Wat Khmer Santipheap Association of SA Inc.	
Address:	172 - 174 Burton Road,	
Suburb:	PARLALOWIE SA	Postcode: 5108
2. CONTACT PERSON DETAILS (this is the address that all correspondence will be sent)		
Name:	Mr Nou Sorng	
Title (your role with the group/organisation):	Chief of Buddhist Monk	
Address:	As above	
Phone:	Landline: XXXXXXXXXX Mobile: XXXXXXXXXX	
Email:	XXXXXXXXXX@XXXXXX.XX	
3. COMMUNITY GRANT RESPONSIBILITY		
Name of Person Responsible for the Grant:	Mr Savonn Ly	
Title (role with the group/organisation):	President	
4. GROUP / ORGANISATION MANAGEMENT DETAILS		
How is your group/organisation managed:	Committees and Minutes of Meeting	
Is your organisation:		
a) Incorporated:	Yes <input checked="" type="checkbox"/> (go to question c)	No <input type="checkbox"/> (go to question b)
ASIC Registration Number:	A39378	
b) Operated under a Parent Organisation: (please state which parent organisation you operate under below AND attach a supporting letter from the organisation)	Yes <input type="checkbox"/> (go to question c)	No <input type="checkbox"/> (go to question c)
Parent Organisation		
Name:		
ASIC Registration Number:		

to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered**

Community Grant Application - Page 3 of 13

Organisation Information (continued)		
c) Community/Non-Profit:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is your organisation endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not- for-profits Commission?	Yes <input type="checkbox"/> <i>(evidence must be attached to this application)</i>	No <input checked="" type="checkbox"/>
d) Government Funded: <i>(If Yes, please list funding source/s and purpose in part e & f)</i>	Yes <input type="checkbox"/> (go to question e & f)	No <input checked="" type="checkbox"/>
e) Funding source/s:	<i>Community Support</i>	
f) Purpose:	<i>Khmer Traditional Dancing for Youth Group</i>	
g) Other (please specify):	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
5. BANKING INFORMATION		
<i>Your organisation must have its own Bank/Credit Union Account or similar</i>		
Full Account Name: <i>Wat Khmer Santipheap Association of SA Inc.</i> <i>*do not provide account or BSB numbers*</i>	Financial Institution Name: [REDACTED] Branch Location: [REDACTED]	
6. REFEREE INFORMATION		
<i>Please provide the name and contact details of a referee – preferably someone who can verify the bona fide status of your group/organisation (NOT Members of the Committee)</i>		
Referee's Name:	<i>Leesa Vlahos MP</i>	
Referee's Contact Information:	[REDACTED]	

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 4 of 13

GST Declaration		
I agree upon signing of this document that I will provide Council with the following information in regards to my Australian Business Number and Goods and Services Tax registration status.		
Does your group/organisation have an ABN <i>(If Yes - Please Quote ABN:)</i> 6 5 0 7 3 0 8 8 2 1 5 <i>(If No, the ABN Declaration Form attached must be signed)</i>	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is your group/organisation registered for GST	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<p>NB: GST Registration</p> <p><i>If your group IS registered for GST you are required to provide a Tax Invoice to Council before an approved grant amount can be provided to your organisation. The invoice must clearly state the words TAX INVOICE, Business Name, ABN and the approved grant amount including GST.</i></p>		

to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered**

Community Grant Application - Page 5 of 13

Project/Event Budget Information	
Will the project or event generate income (e.g. ticket sales, entry fee etc.)?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (enter '0' dollar amounts below)
If Yes, provide details:	
INCOME	\$ AMOUNT
Project or event generated income:	
Organisation's contribution:	
Income received from other Grants: (list organisation(s) providing Grant funding and their contribution)	
Income received from sponsors: (list sponsor(s) and their contribution)	
Donations: (please specify the source, product or service and estimated amount of funding requested)	
Have you sought any other funding for the project: (please specify the source and amount of funding requested)	<input type="checkbox"/> Yes <input type="checkbox"/> No
TOTAL (including GST):	\$ 0
What resources will you and your group contribute to the project e.g. in-kind donations, labour, time etc.?	20 Youth Dancers and Time
EXPENSES (specify the proposed expense budget by item:)	\$ AMOUNT
Large Costumes for rehearsal 15	\$ 600
Small Costumes for rehearsal dancer 7	\$ 175
Pheak Cheang Costumes for dancer 9	\$ 315
Crown for blessing Dancers 7	\$ 1,260
TOTAL (including GST):	\$ 2,350

to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered**

Community Grant Application - Page 6 of 13

Summary of Project/Event Information	
Is the funding for: <i>(please tick which is applicable)</i>	<input type="checkbox"/> Event <input checked="" type="checkbox"/> Project <input type="checkbox"/> Ongoing <input type="checkbox"/> New Group
Name of Project/Event Requiring Funding	Cambodian Traditional Dancing Group
Date(s) of Project/Event <i>(if ongoing please state "ongoing")</i>	On Going
Total cost of Project/Event	\$ 2,350
Amount of Community Grant Funding Requested	\$ 2,000
Is there any other information that you may feel is relevant to your application?	<p><i>I would like to get support from Salisbury Council or state government for Khmer cultural dance group. To keep an ongoing future with the Salisbury Regional Council, in anticipation of extra money that might help to promote the Cambodian Community.</i></p>
<input type="checkbox"/> There are no relevant attachments.	<input checked="" type="checkbox"/> There are relevant attachments and the following documents are attached: 1. <i>Already provided see ref. 28/2016</i> 2.
Which category best describes your project/event? <i>(please check all that apply)</i>	
Health	<input checked="" type="checkbox"/>
Establishment of a new group	<input type="checkbox"/>
Education and Training	<input checked="" type="checkbox"/>
Culture / Arts	<input checked="" type="checkbox"/>
Sport / Recreation	<input checked="" type="checkbox"/>
Environment	<input type="checkbox"/>
Disability	<input type="checkbox"/>
Youth	<input checked="" type="checkbox"/>
Crime Prevention	<input checked="" type="checkbox"/>
Aged	<input type="checkbox"/>

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 7 of 13

Project/Event Details	
Previous Community Grants Program Funding	
Has your Organisation previously received a Community Grant? (If Yes – when, amount granted and what the grant was for:)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (go to Group/Organisation Information)
When was the Grant funding received (month & year):	
What amount of Grant funding was provided:	\$ 2,000
When was the previous Grant acquitted (month & year):	12/10/2015
Group/Organisation Information	
Group/Organisation Name	Wat Khmer Santipheap Association of SA Inc.
Group/Organisation Description	Khmer Culture Religious to provide for youth traditional dancing
Group/Organisation Registered Address	Number/Street: 172-174 Burton Road Suburb: PARALOWIE SA Postcode: 5108
Is the Club Incorporated?	Yes
Number of Members	400 to 500 at Burton
% of Membership that reside in the City of Salisbury	85 % at least
Project/Event Details	
Project/Event Name	Cambodian Traditional for youth dancing
Project/Event Summary	To keep alive Khmer Traditional of youth dancing on weekend
Date(s) of Project/Event	On Going
Location of Project/Event:	Number/Street: 172-174 Burton Road Suburb: PARALOWIE SA Postcode: 5108
How will the Project/Event benefit the residents of the City of Salisbury?	A Structured look in the Cambodian dance style
How many individuals will benefit from the Project/Event?	400 People minimum
% of project/event participants that reside in the City of Salisbury	100 %
If it is an Event, is it open to the public?	Yes
How will the Project/Event be promoted?	Word of mouth information sent to MP

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 8 of 13

Grant Money Requested	
Amount Requested	\$ 2,000
Itemised Breakdown of Costs:	
<i>An itemised breakdown of costs must be provided. Please attach a separate sheet if there is insufficient space.</i>	
Large Costumes for rehearsal cancers 15	\$ 600
Small Costumes for rehearsal for dancers 9	\$ 175
Pheak Cheang Costumes for dancers 9	\$ 315
Crown for blessing dancers 7	\$ 1,260
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
TOTAL (including GST):	\$ 2,350
Quote Attached: <i>A detailed, current quote <u>must</u> be provided with the application.</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(please refer to the City of Salisbury Guide to completing the Community Grants Program Application Form)</i>


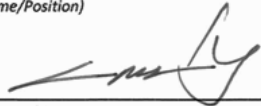
to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 9 of 13

Page 55

Support for the Project or Event
<p><i>Demonstrate how the proposed project or event is supported by residents of the City of Salisbury and/or the wider community:</i></p> <p><i>(include a list of key partners and/or stakeholders, community members and organisations that have been consulted, how and why they support the project or event and any other information that demonstrates support.</i></p> <p><i>Peoples donations, time and experience by helping to teach the Khmer youth dance and awareness of the Cambodian Community.</i></p> <p><i>There are some pictures of Wat Khmer Santipheap's dancing group performing in Khmer's traditional dance and to be involved with other community's cultures. They will volunteer to perform and share Khmer culture.</i></p>
<p>Attachments</p> <p><input type="checkbox"/> There are no attachments relating to Support for the Project or Event.</p> <p><input checked="" type="checkbox"/> The following documents are attached relating to Support for the Project or Event:</p> <ol style="list-style-type: none"> 1. <i>have already been sent</i> 2. 3.
Project or Event Management
<p><u><i>Ongoing Projects or Events</i></u></p> <p><i>Describe how the proposed project or event will be managed into the future:</i> (outline how you will ensure sustainability and achieve outcomes for the project or activity)</p> <p><u><i>One-off Projects or Events</i></u></p> <p><i>Describe how the proposed project or event will be managed:</i> (outline how you will achieve outcomes for the project or activity)</p> <p><i>Group Committee to look after with Nou Sorng chief Monk of Wat Khmer Santipheap Association of SA Inc. and Trainer by Ms Sotheary Kuy</i></p> <p><i>Including new dancers all the time to keep up with people leaving.</i></p>

to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered**

Application Declaration	
<p><i>Please note that this declaration must be signed by two current senior office holders of the group/organisation (ie President, Secretary, Treasurer)</i></p>	
<p>Please read, tick the S1 and S2 boxes and sign:</p>	
S1	S2
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
I acknowledge that I am authorised to make this application on behalf of the Organisation.	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
I acknowledge that the information provided in this application is true and correct.	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
I acknowledge that our Organisation may be required to supply further information prior to consideration of this application by the City of Salisbury Community Grants Program.	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
I acknowledge that, should this Application be successful in obtaining Community Grant funding, our Organisation must complete the acquittal and reporting requirements as set out in the Acceptance of Community Grant – Form 1 and City of Salisbury Community Grants Program Guidelines and Eligibility Criteria.	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
I acknowledge that any changes in circumstances with regard to this Application must be notified in writing and the City of Salisbury Community Grants Program may request further information.	
<p>On behalf of <u>Wat Khmer Santipheap</u> (Group/Organisation)</p>	
<p>Ven. Nou Sorng / Chief of Monk (Name/Position)</p>	<p>Mr. SAVONN LY / President (Name/Position)</p>
	
(Signature 1)	(Signature 2)
21 October 2016	21 October 2016
(Date)	(Date)
Contact (phone number): [REDACTED]	Contact (phone number): [REDACTED]

Both signatories will be contacted to verify the application - a contact phone number must be provided for each.
Your Application will **not** be submitted until contact and verification has occurred, **no exception**.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered



សហគមន៍វត្តខ្មែរសន្តិភោគសាមីចកម្ម
WAT KHMER SANTIPHEAP ASSOCIATION OF . S . A . INC
 172 Burton Road, Paralowie S.A . 5108, A B N : 65 073 088 215

Minutes of Meeting

21 August 2016

At Wat Khmer Santipheap Association of SA Inc 172 Burton Rd, Paralowie SA 5108

MEETING OPENED: 6.00 PM

CHAIRMAN: Savonn Ly

ATTENDEES: Savonn Ly. Tol Phorn.Kuy Chorn. Kean Khen .Tim Sam.Doeun
 Long.ouy Soung.Srey oun. Ty.Srey Cheat.It hou.bunly.Samen Heng.Sameth Heng.heng
 Sim.Thi Chich Thach.Soun Bo.Chim Sok.Lim Mao.Ven Nou Sorng.ven Beb Pirom.Ven
 Mok Sara.Ven Sot Ron.Ven Seung Vuthy.Ven Yin Kimhorn.Ven Choeun Doeuk.Peng
 Sarob.Hem Chorn..Roeun Sin.Doeum ork

APOLOGIES: Mom Sarath.Sin Sokhom.Huy Sabuy.Tym Hy.Nao Sareth

MINUTES OF PREVIOUS MEETING 22 May 2016 were read and confirmed

AGENDA ITEM: (1)Bought costume and Dancing material for classical dancing from
 Cambodia \$2,000 AUD Grant from City Of Salisbury and cash direct Donation from the
 Member (2) discussed and preparations for Kanben – Pchuben Celebration go on for
 Fifteen day

Conclusion: the meeting agreed in both Agenda

MEETING CLOSED: 8.30 PM

Signed

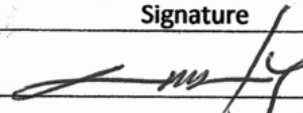



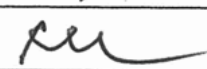
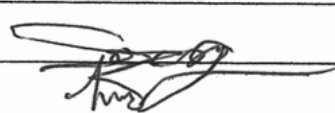




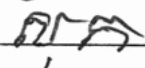
President

Dated: 21/08/2016

Wat Khmer Santipheap Association of S.A Inc.

Meeting Attendance Recorded

Meeting Time 6, 00 pm Sunday 21/08/2016

No.	Print Name	Signature
1	LY Savonn	
2	TOL PHORN	
3	Mr. Mr.	CHARN KUN
4	MISS 525	
5	គឹម រតនា	
6	DOU N + LONG	
7	គឹម រតនា គឹម រតនា	
8	គឹម រតនា + គឹម រតនា	
9	គឹម រតនា + គឹម រតនា	
10	គឹម រតនា + គឹម រតនា	May.
11	គឹម រតនា + គឹម រតនា	
12	Bunly	Bull
13	គឹម រតនា គឹម រតនា	គឹម រតនា គឹម រតនា
14	SAMET Heng	គឹម រតនា គឹម រតនា
15	HEA គឹម រតនា	
16	Thi chich Thach	
17	គឹម រតនា	
18	Chim SOK	
19		1
20	គឹម រតនា	MAO

21	ឧបាសម	Sue
22	សមាជិក	Suisto
23	សមាជិក	Sau
24	សមាជិក	Sau
25	សមាជិក	Sau
26	សមាជិក	Sau
27	Choenn Daeuk:	Sau
28	PIENG SAROB	Sau
29	HEM CHHORN	Sau
30	ROEUN SIN	Sau
31	DOEUM ORK	DOEUM
32		
33		
34		
35		
36		
37		
38		
39		
40		
41		
42		
43		
44		

ITEM	7.2.4
	SPORT, RECREATION AND GRANTS COMMITTEE
DATE	14 November 2016
HEADING	32/2016: Meals on Wheels (SA) Inc. - Community Grants Program Application
AUTHOR	Bronwyn Hatswell, PA to General Manager, Community Development
CITY PLAN LINKS	3.4 Be a proud, accessible and welcoming community.
SUMMARY	The Meals on Wheels (SA) Inc. Application is submitted to the Sport, Recreation and Grants Committee for consideration.

RECOMMENDATION

1. It be noted that, in accordance with delegated powers set out in the endorsed Terms of Reference, the Sport, Recreation and Grants Committee assessed and allocated funding for the November 2016 round of Community Grants as follows:
 - a. Grant No. 32/2016: Meals on Wheels (SA) Inc. be awarded the amount of **\$1,200.00** to assist with the purchase of foodstuff and gift bags as outlined in the Community Grant Application.

ATTACHMENTS

This document should be read in conjunction with the following attachments:

1. 32/2016: Meals on Wheels (SA) Inc. - Application
2. 32/2016: Meals on Wheels (SA) Inc. - Additional Information

1. BACKGROUND

- 1.1 Meals on Wheels (SA) Inc. received \$1,000 Community Grants Program funding in October 2015 to assist with the purchase of foodstuff and gift bags for the 2015 Christmas Hampers project.

2. CONSULTATION / COMMUNICATION

- 2.1 Internal
 - 2.1.1 GMCD

3. REPORT

- 3.1 The Meals on Wheels (SA) Inc. Application meets the eligibility criteria for the requested Community Grants Program funding.

4. CONCLUSION / PROPOSAL

- 4.1 The Meals on Wheels (SA) Inc. Application is submitted for consideration by the Sport, Recreation and Grants Committee.

CO-ORDINATION

Officer: EXECUTIVE GROUP
Date: 08/11/2016



Community Grants Program Application Form

Applications for Community Grants must be received by the 15th of each month to be assessed by the Sport, Recreation and Grants Committee the following month (i.e. an application received by the 15th of February will be assessed at the March Meeting).

Please ensure you have read and understood the City of Salisbury Community Grants Program Guidelines and Eligibility Criteria document prior to completing an Application.

Application Eligibility Checklist		
Is the Funding For:	Yes	No
• Money already spent?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Salaries (initial or ongoing)? <i>Payment of facilitator or contractor engaged specifically to deliver program / activity under the grant may be considered</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Recurrent administration costs?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Capital development (e.g. renovations or building changes that will be permanently part of the structure)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Upgrading facilities which belong to Local, State or Commonwealth Governments?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Application from Public / Private Schools?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• An organisation trading as a sole trader/individual?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• A group that is a non-incorporated body and does not have a parent incorporated body or is not endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not-for-profits Commission?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have previously received funding and NOT fulfilled reporting obligations, including provision of post event evaluation/report and financial acquittal?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have received Community Grants Program funding from the City of Salisbury within the past twelve (12) months.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

*If you have answered **YES** to any of these questions,
this application is **NOT** eligible for grant funding.*

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 2 of 13

Applicant Organisation Information		
1. GROUP / ORGANISATION DETAILS		
Name:	Salisbury Meals on Wheels	
Address:	3 Brown Tee	
Suburb:	Salisbury	Postcode: 5
2. CONTACT PERSON DETAILS (this is the address that all correspondence will be sent)		
Name:	Mr <input type="checkbox"/> Ms <input checked="" type="checkbox"/> Ms <input type="checkbox"/> Dr <input type="checkbox"/> Other <input type="checkbox"/> Judith Oates	
Title (your role with the group/organisation):	Chairperson	
Address:	[REDACTED]	
Phone:	Landline: [REDACTED] Mobile: [REDACTED]	
Email:	salisbury@mealsonwheelssa.org.au	
3. COMMUNITY GRANT RESPONSIBILITY		
Name of Person Responsible for the Grant:	Mr <input type="checkbox"/> Ms <input checked="" type="checkbox"/> Ms <input type="checkbox"/> Dr <input type="checkbox"/> Other <input type="checkbox"/> Judith Oates	
Title (role with the group/organisation):	Chairperson	
4. GROUP / ORGANISATION MANAGEMENT DETAILS		
How is your group/organisation managed:	SA Central Office Management. Salisbury Branch Committee.	
Is your organisation:		
a) Incorporated:	Yes <input checked="" type="checkbox"/> (go to question c)	No <input type="checkbox"/> (go to question b)
ASIC Registration Number:		
b) Operated under a Parent Organisation: (please state which parent organisation you operate under below AND attach a supporting letter from the organisation)	Yes <input type="checkbox"/> (go to question c)	No <input type="checkbox"/> (go to question c)
Parent Organisation		
Name:		
ASIC Registration Number:		

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 3 of 13

Organisation Information (continued)		
c) Community/Non-Profit:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is your organisation endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not-for-profits Commission?	Yes <input type="checkbox"/> <i>(evidence must be attached to this application)</i>	No <input type="checkbox"/>
d) Government Funded: <i>(If Yes, please list funding source/s and purpose in part e & f)</i>	Yes <input checked="" type="checkbox"/> <i>(go to question e & f)</i>	No <input type="checkbox"/>
e) Funding source/s:	Federal Health Department. Partial fundin	
f) Purpose:	from Fed. Gov & State Gov	
g) Other (please specify):	Yes <input type="checkbox"/> Clients pay for their meal.	No <input type="checkbox"/>
5. BANKING INFORMATION		
Your organisation must have its own Bank/Credit Union Account or similar		
Full Account Name: Meals on Wheels Salisbury Branch <i>*do not provide account or BSB numbers*</i>	Financial Institution Name: [REDACTED] Branch Location: [REDACTED]	
6. REFEREE INFORMATION		
Please provide the name and contact details of a referee – preferably someone who can verify the bona fide status of your group/organisation (NOT Members of the Committee)		
Referee's Name:	John Bennett	
Referee's Contact Information:	[REDACTED]	

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 4 of 13

GST Declaration		
I agree upon signing of this document that I will provide Council with the following information in regards to my Australian Business Number and Goods and Services Tax registration status.		
Does your group/organisation have an ABN <small>(If Yes - Please Quote ABN:)</small> 76 069 475 196 <small>(If No, the ABN Declaration Form attached must be signed)</small>	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is your group/organisation registered for GST	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
NB: GST Registration <i>If your group IS registered for GST you are required to provide a Tax Invoice to Council before an approved grant amount can be provided to your organisation. The invoice must clearly state the words TAX INVOICE, Business Name, ABN and the approved grant amount including GST.</i>		

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 5 of 13

Project/Event Budget Information		
Will the project or event generate income (e.g. ticket sales, entry fee etc.)?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
If Yes, provide details:		
INCOME	\$ AMOUNT	
Project or event generated income:	\$	
Organisation's contribution:	\$	
Income received from other Grants: <i>(list organisation(s) providing Grant funding and their contribution)</i>	\$	
Income received from sponsors: <i>(list sponsor(s) and their contribution)</i>	\$	
Donations: <i>(please specify the source, product or service and estimated amount of funding requested)</i>	\$	
Have you sought any other funding for the project: <i>(please specify the source and amount of funding requested)</i>	\$	
TOTAL (including GST):	\$	
What resources will you and your group contribute to the project e.g. in-kind donations, labour, time etc.?	A small group of volunteers will pack the food in small gift bags, which will be delivered to clients with their Christmas meals.	
EXPENSES <i>(specify the proposed expense budget by item:)</i>	\$ AMOUNT	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
TOTAL (including GST):	\$	

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 6 of 13

Summary of Project/Event Information	
Is the funding for: <i>(please tick which is applicable)</i>	<input type="checkbox"/> Event <input checked="" type="checkbox"/> Project <input type="checkbox"/> Ongoing <input type="checkbox"/> New Group
Name of Project/Event Requiring Funding	Small food hampers for our clients
Date(s) of Project/Event <i>(if ongoing please state "ongoing")</i>	December 2016
Total cost of Project/Event	\$1,200 - 00
Amount of Community Grant Funding Requested	\$1,200 - 00
Is there any other information that you may feel is relevant to your application?	
<input type="checkbox"/> There are no relevant attachments.	<input type="checkbox"/> There are relevant attachments and the following documents are attached: 1. 2.
Which category best describes your project/event? <i>(please check all that apply)</i>	
Health	<input checked="" type="checkbox"/>
Establishment of a new group	<input type="checkbox"/>
Education and Training	<input type="checkbox"/>
Culture / Arts	<input type="checkbox"/>
Sport / Recreation	<input type="checkbox"/>
Environment	<input type="checkbox"/>
Disability	<input type="checkbox"/>
Youth	<input type="checkbox"/>
Crime Prevention	<input type="checkbox"/>
Aged	<input checked="" type="checkbox"/>

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 7 of 13

Project/Event Details		
Previous Community Grants Program Funding		
Has your Organisation previously received a Community Grant? (If Yes – when, amount granted and what the grant was for:)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No (go to Group/Organisation Information)
When was the Grant funding received (month & year):	December 2015	
What amount of Grant funding was provided:	\$1,000 - 00	
When was the previous Grant acquitted (month & year):	March 2016	
Group/Organisation Information		
Group/Organisation Name	Salisbury Meals on Wheels	
Group/Organisation Description	Prepare & deliver hot, 3 course, fresh cooking meal	
Group/Organisation Registered Address	Number/Street: 3 Brown Tee Suburb: Salisbury Postcode: 5	
Is the Club Incorporated?	Yes	
Number of Members	clients 200	
% of Membership that reside in the City of Salisbury	100%	
Project/Event Details		
Project/Event Name	Christmas Hampers for clients	
Project/Event Summary		
Date(s) of Project/Event	December 2016	
Location of Project/Event:	Number/Street: 3 Brown Tee Suburb: Salisbury Postcode: 5109	
How will the Project/Event benefit the residents of the City of Salisbury?	To give our clients some special food items that they wouldn't normally receive	
How many individuals will benefit from the Project/Event?	200	
% of project/event participants that reside in the City of Salisbury	100%	
If it is an Event, is it open to the public?	No	
How will the Project/Event be promoted?	_____	

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 8 of 13

Grant Money Requested	
Amount Requested	\$1,200 - 00
Itemised Breakdown of Costs:	
<i>An itemised breakdown of costs must be provided. Please attach a separate sheet if there is insufficient space.</i>	
Small Christmas Puddings	\$ 180 - 00
Small fruit mince Pies	\$ 180 - 00
Sweet Biscuits	\$ 90 - 00
Individual Flavoured Jellies	\$ 230 - 00
Small Gift Bags	\$ 200 - 00
Small pkts Breakfast Cereal	\$ 350 - 00
	\$
	\$
	\$
	\$
These costs may vary slightly when we purchase the goods in November 2016	
	\$
	\$
	\$
	\$
	\$
	\$
TOTAL (including GST):	\$1,230 - 00
Quote Attached:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<i>A detailed, current quote <u>must</u> be provided with the application.</i>	<i>(please refer to the City of Salisbury Guide to completing the Community Grants Program Application Form)</i>

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 9 of 13

Provide a description of the proposed project or event:

☐ There are no attachments relating to the Project or Event Scope.

☐ The following documents are attached relating to the Project or Event Scope:

- 1.
- 2.
- 3.

Provide a description of the benefits and outcomes of the proposed project or event to the residents of the City of Salisbury and/or the wider community:

Community Grant Application - Page 10 of 13

Demonstrate how the proposed project or event is supported by residents of the City of Salisbury and/or the wider community:

(include a list of key partners and/or stakeholders, community members and organisations that have been consulted, how and why they support the project or event and any other information that demonstrates support.

Attachments

☐ There are no attachments relating to Support for the Project or Event.

☐ The following documents are attached relating to Support for the Project or Event:

- 1.
- 2.
- 3.

Ongoing Projects or Events

*Describe how the proposed project or event will be managed into the future:
(outline how you will ensure sustainability and achieve outcomes for the project or activity)*

One-off Projects or Events

*Describe how the proposed project or event will be managed:
(outline how you will achieve outcomes for the project or activity)*

Community Grant Application - Page 11 of 13

Application Declaration

Please note that this declaration must be signed by two current senior office holders of the group/organisation (ie President, Secretary, Treasurer)

Please read, tick the S1 and S2 boxes and sign:

S1 S2

- ☒ ☒ I acknowledge that I am authorised to make this application on behalf of the Organisation.
- ☒ ☒ I acknowledge that the information provided in this application is true and correct.
- ☒ ☒ I acknowledge that our Organisation may be required to supply further information prior to consideration of this application by the City of Salisbury Community Grants Program.
- ☒ ☒ I acknowledge that, should this Application be successful in obtaining Community Grant funding, our Organisation must complete the acquittal and reporting requirements as set out in the Acceptance of Community Grant – Form 1 and City of Salisbury Community Grants Program Guidelines and Eligibility Criteria.
- ☒ ☒ I acknowledge that any changes in circumstances with regard to this Application must be notified in writing and the City of Salisbury Community Grants Program may request further information.

On behalf of Salisbury Meals on Wheels

Judith Oates, Chair
(Name/Position)

and

LINDA HOBART, TREASURER
(Name/Position)

J. Oates
(Signature 1)

L. Hobart
(Signature 2)

13.9.16
(Date)

14/9/16
(Date)

Contact (phone number):

Contact (phone number):

Both signatories will be contacted to verify the application - a contact phone number must be provided for each. Your application will not be submitted for consideration until contact and verification has occurred, **no exception**.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

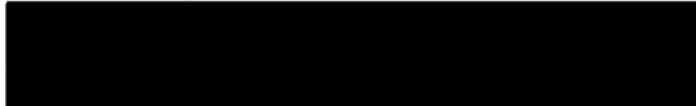
MINUTES OF GENERAL MEETING 29TH AUGUST 2016-09-09

PRESENT: J.Oates, R.Handke, R.Handke, R.Whysall, J.Lohmann, K.Lohmann, J.Curtin, R.Smith, D.Russell, B.Hein, C.Bugg, K.Bowman.

APOLOGIES: L.Hobart, D.Thomson, S.Lovell, T.Slape, D.Witt.

MINUTES OF PREVIOUS MEETING, were read and accepted after the names of J.Lohmann, D.Thomson, J.Curtin and K. Cunningham were added to the attendance list. **MOVED:** R.Handke 2nd: J.Lohmann

REPORTS:



GENERAL BUSINESS

1. The chair proposed a motion for the branch to complete the application form for the "Community Grant" from the Salisbury Council, to enable us to provide a small food hamper for our clients at Christmas time. A motion was moved by B. Hein that we apply for the "Community Grant" seconded by Robert Handke. All in favour. Due to the increase in the number of clients we have, the application will be for \$1200.00.

2. 

3. 

4. [REDACTED]
5. [REDACTED]
6. [REDACTED]
7. [REDACTED]
8. [REDACTED]
9. [REDACTED]
10. [REDACTED]

The next meeting will be held on Monday October 24th 2016

Project or Event Scope*Provide a description of the proposed project or event:*

Approx 200 clients who are recipients of a hot three course meal on a regular basis, will receive a small gift bag containing 'special' food items, prior to Christmas Day. Many of these people are house bound and some have very little family support. Some of our clients are unable to shop for themselves & some are unable to prepare their own meals. We also provide frozen meals for many people for their weekend and for holiday meals.

These men & women are all residents of the Salisbury Council Area.

Attachments

- ☐ There are no attachments relating to the Project or Event Scope.
- ☐ The following documents are attached relating to the Project or Event Scope:
- 1.
 - 2.
 - 3.

Benefits and Outcomes of the Project or Event*Provide a description of the benefits and outcomes of the proposed project or event to the residents of the City of Salisbury and/or the wider community:*

Our clients are very grateful for this small gift; for some of them it is the only 'present' they receive at Christmas time.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 10 of 13

Support for the Project or Event
<p><i>Demonstrate how the proposed project or event is supported by residents of the City of Salisbury and/or the wider community:</i> <i>(include a list of key partners and/or stakeholders, community members and organisations that have been consulted, how and why they support the project or event and any other information that demonstrates support.)</i></p> <p>Support for this event is provided by a group of volunteers at the Salisbury branch of Meals on Wheels, who assist with the packing of the gift bags. These are distributed to the clients by our delivery people when they take the special 'Christmas drive' prior to Christmas Day.</p> <p>Attachments</p> <p><input type="checkbox"/> There are no attachments relating to Support for the Project or Event.</p> <p><input type="checkbox"/> The following documents are attached relating to Support for the Project or Event:</p> <ol style="list-style-type: none"> 1. 2. 3.
<p align="center">Project or Event Management</p> <p><u>Ongoing Projects or Events</u></p> <p><i>Describe how the proposed project or event will be managed into the future:</i> <i>(outline how you will ensure sustainability and achieve outcomes for the project or activity)</i></p> <p><u>One-off Projects or Events</u></p> <p><i>Describe how the proposed project or event will be managed:</i> <i>(outline how you will achieve outcomes for the project or activity)</i></p> <p>Hopefully our branch can continue to provide this service in the future.</p>

to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered**

Community Grant Application - Page 11 of 13

St	Qty	Product	Quoted	St	Qty	Product	Quoted
		Coleslaw 1921				Party Pies x72 690	
		Potato Salad 1911				Party Pasties x72 680	
						Party Mix x72 6919	
		Pasta 1000 Island 19213				Party S/Rolls x72 691	
		Tabouli 19111				Flamegrill Meatballs 215	
		Curried Rice 1915				Darshan C/T S/Rolls 122	
		Fruit Salad Chunky 19261				I&J C/T Spring Rolls 205	
		Egg & Bacon Potato 1924				I&J C/T Samosas 207	
		Seafood 2.5kg salad 1922				Mini Veg Dim Sim 127	
		Greek Salad Kit n/let 1913				Mini Beef Dim Sim 123	
		Creamy Pasta 1912				Mini Chick Dim sim 125	
		Sliced Onions 19105				Oven Spring Rolls cf 129	
						Oven Samosas c/f 130	
		Cocktail Franks 1337				Patties Party Pizza 114	
						Mini Quiche 193	
		Knives 6610				T/P	
		Forks 6620				T/P	
		Tablespoons 6600				C/C Round	
		Teaspoons 6590				C/C Round	
	4x	P/C CTN Plum Pudding 48x8 - \$195.80					
	3x	Cream Biscuits - \$135.90					
	2x	Wheat Bix - 60 Per Box - \$69.60					
	4x	Corn Flakes - 30 Per Box - \$88.20					
	5x	Sultana Bran - 30 Per Box - \$110.25					
		Total - \$599.75					

Order Taken By <i>Matt</i>			Special Notes	
Date Order Taken <i>05/10/16</i>				
Order paid No / Yes Rec. No.			Ring When Stock In Yes / No	
Order packed by			Phone	
FRESH Ctn	FROZEN Ctn	Dry Ctn	Time Of P/U (Salad Orders Only) AM / PM	
			Mon Tues Wed Thu Fri Sat / / 16	
Customer Name <i>Salisbury meals on wheels</i>				

26.9.16

Community Grants
Application

re quotes

Enclosed a quote from



I am unable to get a quote
from the [redacted] for small
gift bags as they don't know
what the prices will be
until they receive the goods.
Hopefully we can still purchase
them for a dollar each

Yours Sincerely
Lucy Oates

MEALS
ON WHEELS
Driven by nutrition.



Meals on Wheels (SA) Incorporated
70 Greenhill Road
Wayville SA 5034
T 8271 8700
F 8271 8101
E meals@mealsonwheelssa.org.au
PO Box 406 Unley SA 5061
www.mealsonwheelssa.org.au

Patron
His Excellency
Rear Admiral Kevin Scarce
AC CSC RANR
Governor of South Australia



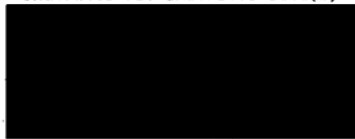
TAX INVOICE

Sales Receipt

Transaction #: 397974
 Date: 21/09/2016 Time: 11:10:28 AM
 Cashier: 45 Register #: 2

Item	Description	Amount
3795	*P/C CTN PLUM PUDDING 48X8	\$195.80
	4 @ \$48.95	
01	CREAM BISCUITS	\$135.90
Item	Description	Amount
	3 @ \$45.30	
01	WHEAT BIX - 60 PER BOX	\$69.60
	2 @ \$34.80	
01	CORN FLAKES - 30 PER BOX	\$88.20
	4 @ \$22.05	
01	SULTANA BRAN - 30 PET BOX	\$110.25
	5 @ \$22.05	
Sub Total		\$581.95
GST		\$17.80
Total		\$599.75
Cash Tendered		\$599.75
Change Due		\$0.00

*Indicates GST Inclusive Item(s)



Meals on wheels Salisbury
customer # [REDACTED]

Attention: Judy Oats FAX: 8295 9595

210819 71 Gm x 112 Baked Fruit mince pies
@ \$82.84 per doz x 2 = \$165.68

051937 Pineapple Jelly cups 140g x 48
@ \$38.64 x 5 = \$240.00
\$ 905.68

Quote for xmas hampers from [REDACTED]

Regrards
[REDACTED]

ITEM	7.2.5
	SPORT, RECREATION AND GRANTS COMMITTEE
DATE	14 November 2016
HEADING	33/2016: Para Hills Conference of the St. Vincent De Paul Society [St. Vincent De Paul Society (SA) Inc.] - Community Grants Program Application
AUTHOR	Bronwyn Hatswell, PA to General Manager, Community Development
CITY PLAN LINKS	3.4 Be a proud, accessible and welcoming community.
SUMMARY	The Para Hills Conference of St. Vincent De Paul Society [St. Vincent De Paul Society (SA) Inc.] Application is submitted to the Sport, Recreation and Grants Committee for consideration.

RECOMMENDATION

1. It be noted that, in accordance with delegated powers set out in the endorsed Terms of Reference, the Sport, Recreation and Grants Committee assessed and allocated funding for the November 2016 round of Community Grants as follows:
 - a. Grant No. 33/2016: Para Hills Conference of the St. Vincent De Paul Society [St. Vincent De Paul Society (SA) Inc.] be awarded the amount of **\$2,500.00** to assist with the purchase of foodstuff for the Christmas Hampers 2016 project as outlined in the Community Grant Application.

ATTACHMENTS

This document should be read in conjunction with the following attachments:

1. 33/2016: Para Hills Conference of the St. Vincent De Paul Society - Application
2. 33/2016: Para Hills Conference of the St. Vincent De Paul Society - Additional Information

1. BACKGROUND

- 1.1 Para Hills Conference of the St. Vincent De Paul Society received \$596 community grants funding in October 2009 to assist with the purchase of storage cupboards for ongoing use.

2. CONSULTATION / COMMUNICATION

- 2.1 Internal
 - 2.1.1 GMCD

3. REPORT

- 3.1 The Para Hills Conference of St. Vincent De Paul Society is auspiced by St. Vincent De Paul Society (SA) Incorporated.
- 3.2 The Para Hills Conference of St. Vincent De Paul Society [St. Vincent De Paul Society (SA) Inc.] Application meets the eligibility criteria for the upper limit Community Grants Program funding.

4. CONCLUSION / PROPOSAL

- 4.1 The Para Hills Conference of St. Vincent De Paul Society [St. Vincent De Paul Society (SA) Inc.] Application is submitted for consideration by the Sport, Recreation and Grants Committee.

CO-ORDINATION

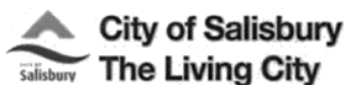
Officer: EXECUTIVE GROUP
Date: 08/11/2016



Community Grants Program Application Form

Applications for Community Grants must be received by the 15th of each month to be assessed by the Sport, Recreation and Grants Committee the following month (i.e. an application received by the 15th of February will be assessed at the March Meeting).

Please ensure you have read and understood the City of Salisbury Community Grants Program Guidelines and Eligibility Criteria document prior to completing an Application.



**City of Salisbury
The Living City**

live it up

Application Eligibility Checklist		
Is the Funding For:	Yes	No
• Money already spent?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Salaries (initial or ongoing)? <i>Payment of facilitator or contractor engaged specifically to deliver program / activity under the grant may be considered</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Recurrent administration costs?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Capital development (e.g. renovations or building changes that will be permanently part of the structure)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Upgrading facilities which belong to Local, State or Commonwealth Governments?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Application from Public / Private Schools?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• An organisation trading as a sole trader/individual?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• A group that is a non-incorporated body and does not have a parent incorporated body or is not endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not-for-profits Commission?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have previously received funding and NOT fulfilled reporting obligations, including provision of post event evaluation/report and financial acquittal?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have received Community Grants Program funding from the City of Salisbury within the past twelve (12) months.	<input type="checkbox"/>	<input checked="" type="checkbox"/>

*If you have answered **YES** to any of these questions,
this application is **NOT** eligible for grant funding.*

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 2 of 13

Applicant Organisation Information	
1. GROUP / ORGANISATION DETAILS	
Name:	<i>Para Hills Conference of the St Vincent De Paul Society</i>
Address:	<i>3 James Street</i>
Suburb:	<i>Para Hills</i> Postcode: <i>5096</i>
2. CONTACT PERSON DETAILS (this is the address that all correspondence will be sent)	
Name:	<i>Mr Graeme Cooper</i>
Title (your role with the group/organisation):	<i>President</i>
Address:	[REDACTED]
Phone:	Landline: [REDACTED] Mobile: [REDACTED]
Email:	<i>N/A</i>
3. COMMUNITY GRANT RESPONSIBILITY	
Name of Person Responsible for the Grant:	<i>Mrs</i> <input checked="" type="checkbox"/> <i>Corrie Bowman</i>
Title (role with the group/organisation):	<i>Secretary</i> <i>TREASURER.</i>
4. GROUP / ORGANISATION MANAGEMENT DETAILS	
How is your group/organisation managed:	<i>Local management committee, under parent organisation.</i>
Is your organisation:	
a) Incorporated:	<div> Yes <input type="checkbox"/> (go to question c) </div> <div> No <input checked="" type="checkbox"/> (go to question b) </div>
ASIC Registration Number:	
b) Operated under a Parent Organisation: <small>(please state which parent organisation you operate under below AND attach a supporting letter from the organisation)</small>	<div> Yes <input checked="" type="checkbox"/> (go to question c) </div> <div> No <input type="checkbox"/> (go to question c) </div>
Parent Organisation	
Name:	<i>St Vincent De Paul Society of SA</i>
ASIC Registration Number:	<i>A1125</i>

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 3 of 13

Organisation Information (continued)		
c) Community/Non-Profit:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is your organisation endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not-for-profits Commission?	Yes <input checked="" type="checkbox"/> <i>(evidence must be attached to this application)</i>	No <input type="checkbox"/>
d) Government Funded: <i>(If Yes, please list funding source/s and purpose in part e & f)</i>	Yes <input type="checkbox"/> <i>(go to question e & f)</i>	No <input checked="" type="checkbox"/>
e) Funding source/s:	<i>Donations, cake stalls etc Para Hills conference is not Govt funded</i>	
f) Purpose:	<i>Provide food, clothing and support to local needy individuals and families</i>	
g) Other (please specify):	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
5. BANKING INFORMATION		
<i>Your organisation must have its own Bank/Credit Union Account or similar</i>		
Full Account Name: <i>The Society of St Vincent De Paul - State Council</i> <i>*do not provide account or BSB numbers*</i>	Financial Institution Name: [REDACTED] Branch Location: [REDACTED]	
6. REFEREE INFORMATION		
<i>Please provide the name and contact details of a referee – preferably someone who can verify the bona fide status of your group/organisation (NOT Members of the Committee)</i>		
Referee's Name:	<i>Mr Tony Zappia MHR</i>	
Referee's Contact Information:	[REDACTED]	

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

GST Declaration		
I agree upon signing of this document that I will provide Council with the following information in regards to my Australian Business Number and Goods and Services Tax registration status.		
Does your group/organisation have an ABN <i>(If Yes - Please Quote ABN:)</i> <u>7 3 5 9 1 4 0 1 5 9 2</u> <i>(If No, the ABN Declaration Form attached must be signed)</i>	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is your group/organisation registered for GST	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
NB: GST Registration <i>If your group IS registered for GST you are required to provide a Tax Invoice to Council before an approved grant amount can be provided to your organisation. The invoice must clearly state the words TAX INVOICE, Business Name, ABN and the approved grant amount including GST.</i>		

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 5 of 13

Project/Event Budget Information	
Will the project or event generate income (e.g. ticket sales, entry fee etc.)?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (enter '0' dollar amounts below)
If Yes, provide details:	
INCOME	\$ AMOUNT
Project or event generated income:	\$ 0
Organisation's contribution:	\$ 4,000
Income received from other Grants: (list organisation(s) providing Grant funding and their contribution)	N/A
Income received from sponsors: (list sponsor(s) and their contribution)	N/A
Donations: (please specify the source, product or service and estimated amount of funding requested)	N/A
Have you sought any other funding for the project: (please specify the source and amount of funding requested)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
TOTAL (including GST):	\$ 4,000
What resources will you and your group contribute to the project e.g. in-kind donations, labour, time etc.?	Group members purchase the goods, assemble the hampers, contact recipients, staff the pick up days and home deliver if required, all as volunteers. The \$4,000 income (above) is raised from donations, cake stalls etc
EXPENSES (specify the proposed expense budget by item:)	\$ AMOUNT
65 hampers at average cost of \$100 each	\$ 6,500
refer attachment for approx costs	
TOTAL (including GST):	\$ 6,500

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Summary of Project/Event Information	
Is the funding for: <i>(please tick which is applicable)</i>	<input type="checkbox"/> Event <input checked="" type="checkbox"/> Project <input type="checkbox"/> Ongoing <input type="checkbox"/> New Group
Name of Project/Event Requiring Funding	<i>Christmas Hampers 2016</i>
Date(s) of Project/Event <i>(if ongoing please state "ongoing")</i>	<i>December 2016</i>
Total cost of Project/Event	<i>\$ 6,500</i>
Amount of Community Grant Funding Requested	<i>\$ 2,500</i>
Is there any other information that you may feel is relevant to your application?	<i>Cost per hamper is dependent on number of people per hamper, but averages \$100 of foodstuffs, plus gifts for the children. Gifts are from the annual Motor Cycle Riders Toy Run and other donations throughout the year. EG Donations under the tree at Para Hills Library this coming Christmas.</i>
<input checked="" type="checkbox"/> There are no relevant attachments.	<input type="checkbox"/> There are relevant attachments and the following documents are attached: 1. 2.
Which category best describes your project/event? <i>(please check all that apply)</i>	
Health	<input checked="" type="checkbox"/>
Establishment of a new group	<input type="checkbox"/>
Education and Training	<input type="checkbox"/>
Culture / Arts	<input type="checkbox"/>
Sport / Recreation	<input type="checkbox"/>
Environment	<input type="checkbox"/>
Disability	<input checked="" type="checkbox"/>
Youth	<input checked="" type="checkbox"/>
Crime Prevention	<input type="checkbox"/>
Aged	<input checked="" type="checkbox"/>

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 7 of 13

Project/Event Details	
Previous Community Grants Program Funding	
Has your Organisation previously received a Community Grant? (If Yes – when, amount granted and what the grant was for:)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (go to Group/Organisation Information)
When was the Grant funding received (month & year):	November 2009 - shelving and roof exhaust fan
What amount of Grant funding was provided:	\$ 651
When was the previous Grant acquitted (month & year):	December 2009
Group/Organisation Information	
Group/Organisation Name	St Vincent De Paul Society - Para Hills Cpnference
Group/Organisation Description	Assists local poor and disadvantaged members of the community
Group/Organisation Registered Address	Number/Street: 3 James Street Suburb: Para Hills Postcode: 5096
Is the Club Incorporated?	No
Number of Members	8
% of Membership that reside in the City of Salisbury	100 %
Project/Event Details	
Project/Event Name	Christmas Hampers 2016
Project/Event Summary	Provision of 65 christmas hampers and gifts to locals in need
Date(s) of Project/Event	December 2016
Location of Project/Event:	Number/Street: 3 James Street Suburb: Para Hills Postcode: 5096
How will the Project/Event benefit the residents of the City of Salisbury?	Provide an element of Christmas cheer to disadvantaged community mebers at Christmas - practical demonstration of care
How many individuals will benefit from the Project/Event?	250
% of project/event participants that reside in the City of Salisbury	100 %
If it is an Event, is it open to the public?	No
How will the Project/Event be promoted?	To existing 'clients' and via Head Office

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

**St Vincent De Paul Society
Para Hills Conference
Christmas Hampers 2016**

Actual costs 2015

Item	Price
Christmas Cake	\$10.00
Christmas Pudding	\$10.00
Tin of Ham	\$8.00
Mince Pies	\$3.00
Tin of Fruit	\$4.00
Red and Green Jellies	\$2.50
Custurd	\$3.60
Sweets or Nuts	\$5.00
Tin of Corn	\$1.30
Tin of Peas/Carrots	\$1.99
Tin of Beetroot	\$2.00
Tin of Green Beans	\$1.80
Tin of Fish	\$3.00
Milk 3 litres	\$3.00
Coffee	\$6.00
Tea	\$2.00
Bread/Rolls	\$3.00
Biscuits/Crisps	\$3.00
Cordial/Soft Drink	\$5.00
Breakfast Cereal	\$5.00
Bon Bons	\$2.00
Margarine	\$3.00
Meat Voucher	\$12.00
Total	\$100.19

*NB : Meat Voucher
\$12 - \$25
depending on number in family*

Grant Money Requested	
Amount Requested	\$ 2,500
Itemised Breakdown of Costs:	
<i>An itemised breakdown of costs must be provided. Please attach a separate sheet if there is insufficient space.</i>	
Refer attached sheet for example	\$
of hamper contents and prices per item	\$
Hampers/baskets are donated or purchased	\$
by PH members.	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
Total based on average of \$100 per hamper	\$
and 65 hampers	\$ 6,500
TOTAL (including GST):	\$ 6,500
Quote Attached: <i>A detailed, current quote <u>must</u> be provided with the application.</i>	<input checked="checked" type="checkbox"/> Yes <input type="checkbox"/> No <i>(please refer to the City of Salisbury Guide to completing the Community Grants Program Application Form)</i>

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Project or Event Scope
<p><i>Provide a description of the proposed project or event:</i></p> <p><i>Annual distribution of Christmas Hampers to local singles.couples/families identified throughout the year by St Vincent De Paul as requiring support (food, clothing, furniture, help with bills etc).</i></p> <p><i>At least 65 recipients for 2016.</i></p> <p><i>Hampers are 'assembled' by the Para Hills Conference.</i></p> <p><i>Contents are food staples, Christmas fare and gifts for children.</i></p> <p><i>Recipients are invited to attend the PH Church to collect their hampers and select gifts for their children.</i></p> <p><i>Transport of hampers can be arranged by additional volunteers on the day.</i></p>
<p>Attachments</p> <p><input checked="" type="checkbox"/> There are no attachments relating to the Project or Event Scope.</p> <p><input type="checkbox"/> The following documents are attached relating to the Project or Event Scope:</p> <ol style="list-style-type: none"> 1. 2. 3.
Benefits and Outcomes of the Project or Event
<p><i>Provide a description of the benefits and outcomes of the proposed project or event to the residents of the City of Salisbury and/or the wider community:</i></p> <p><i>Benefits are essentially limited to the recipient families.</i></p> <p><i>Recipients would be advised of Council's support.</i></p> <p><i>Recipients would feel valued at Christmas and appreciative of community support.</i></p>

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 10 of 13

Support for the Project or Event

Demonstrate how the proposed project or event is supported by residents of the City of Salisbury and/or the wider community:

(include a list of key partners and/or stakeholders, community members and organisations that have been consulted, how and why they support the project or event and any other information that demonstrates support.

The project is conducted annually by the Para Hills Conference of SVDP.

Each year some local businesses are approached for food donations and the Para Hills Community Club has been financially supportive over several years, but not yet approached for 2016.

Any additional donations defray the costs to the Conference itself, thereby leaving funds to apply to other supports (eg emergency food, clothing etc) throughout the next year.

Attachments

- ☒ There are no attachments relating to Support for the Project or Event.
- ☐ The following documents are attached relating to Support for the Project or Event:
- 1.
 - 2.
 - 3.

Project or Event Management

Ongoing Projects or Events

*Describe how the proposed project or event will be managed into the future:
(outline how you will ensure sustainability and achieve outcomes for the project or activity)*

One-off Projects or Events

*Describe how the proposed project or event will be managed:
(outline how you will achieve outcomes for the project or activity)*

The 2016 one off project will be managed by conference volunteers, as in previous years.

Aim is to deliver at least 65 hampers before Christmas 2016.

Success will be measured by number of hampers actually delivered, feedback from recipients, number of additional volunteers to help with transport, financial assistance obtained from new sources, donations of food from local suppliers etc.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Application Declaration

Please note that this declaration must be signed by two current senior office holders of the group/organisation (ie President, Secretary, Treasurer)

Please read, tick the S1 and S2 boxes and sign:

S1 S2

- ☒ ☒ I acknowledge that I am authorised to make this application on behalf of the Organisation.
- ☒ ☒ I acknowledge that the information provided in this application is true and correct.
- ☒ ☒ I acknowledge that our Organisation may be required to supply further information prior to consideration of this application by the City of Salisbury Community Grants Program.
- ☒ ☒ I acknowledge that, should this Application be successful in obtaining Community Grant funding, our Organisation must complete the acquittal and reporting requirements as set out in the Acceptance of Community Grant – Form 1 and City of Salisbury Community Grants Program Guidelines and Eligibility Criteria.
- ☒ ☒ I acknowledge that any changes in circumstances with regard to this Application must be notified in writing and the City of Salisbury Community Grants Program may request further information.

On behalf of Para Hills Conference - SVDP (Group/Organisation)

Graeme Cooper / President
(Name/Position)

and

Corrie Bowman / Treasurer
(Name/Position)

(Signature 1)

(Signature 2)

(Date)

(Date)

Contact (phone number):

Contact (phone number):

Both signatories will be contacted to verify the application - a contact phone number must be provided for each.
Your Application will **not** be submitted until contact and verification has occurred, **no exception**.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 12 of 13



Declaration Where No Australian Business Number is Required

I hereby certify that I am not required under the New Taxation System to hold an Australian Business Number (ABN), as I am not carrying out an enterprise under the New Tax System definition.

I am providing my services as:

	Yes	No
A private recreational pursuit or hobby	<input checked="" type="checkbox"/>	<input type="checkbox"/>
As an individual without a reasonable expectation of profit or gain	<input checked="" type="checkbox"/>	<input type="checkbox"/>

As such the Council is not obliged to withhold 48.5% from payments made to me.

I confirm that the above declaration is valid for all payments made by Council to our organisation. Should the situation change and I am required to hold an Australian Business Number, I will notify Council immediately.

(Group/Organisation)

Givane Cooper - President
(Name/Position)

(Signature)

29-8-2016
(Date)

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 13 of 13



St Vincent de Paul Society
SA
good works

ABN 73 591 401 592

Ozanam House
202 Franklin Street, Adelaide SA 5000

GPO Box 1804, Adelaide SA 5001

Administration: Ph (08) 8112 8700
Fax: (08) 8112 8799
Donation Enquiries: Ph: (08) 8112 8777
Fax: (08) 8112 8797

Email: svdp@svdpsa.org.au
Website: www.vinnies.org.au

8 September 2016

City of Salisbury
Community Grants Program
PO Box 8
SALISBURY SA 5108

To whom it may concern,

On behalf of the St Vincent de Paul Society in South Australia, I would like to endorse the application from the St Vincent de Paul Society Para Hills Conference for a Community Grant on behalf of St Vincent de Paul Society (SA) Inc. If successful, this grant will be used to purchase the contents for 20 food hampers (valued at \$100 each) to be distributed to people in the Salisbury community who are facing disadvantage and need our support this Christmas.

The St Vincent de Paul Society (Vinnies), is an important part of the fabric of South Australia. Since 1884, Vinnies has been integral in the local communities throughout the State providing a hand up to those we are committed to serve. Our services continue to evolve as we uphold the core activity of home visitation providing whatever is required to assist people keep their families together, their lives together and maintain a sense of dignity during their difficult times.

Each year Vinnies helps in excess of 100,000 South Australians by providing accommodation services, assistance to migrants and refugees, supplying food, clothing and furniture, budget counselling, youth programs and Fred's Van meals. Our 35 Vinnies shops across South Australia are patronised by nearly 600,000 shoppers each year.

Vinnies can only continue to give a hand up to South Australians in need with the support of more than 3,000 tireless volunteers and the generosity of our donors, corporate partners and community supporters.

Thank you for your consideration of this application.

Kind regards,

David Wark
Chief Executive Officer

The St Vincent de Paul Society (SA) Inc helps many thousands of people through Home Visitation, Migrant and Refugee Assistance, Hospital and Prison Visitation, Vinnies Centres, Accommodation for Homeless Men, Overseas Partnership Development, School and Youth Programs and Fred's Vans.

Current details for ABN 73 591 401 592 | ABN Lookup

Page 1 of 2

**ABN Lookup**

Current details for ABN 73 591 401 592

ABN details

Entity name:	ST VINCENT DE PAUL SOCIETY (SA) INC
ABN status:	Active from 01 Nov 1999
Entity type:	Other Incorporated Entity
Goods & Services Tax (GST):	Registered from 01 Jul 2000
Main business location:	SA 5000

Australian Charities and Not-for-profits Commission (ACNC)

ST VINCENT DE PAUL SOCIETY (SA) INC is registered with the Australian Charities and Not-for-profits Commission (ACNC) as follows:

ACNC registration	From
Registered as a charity view ACNC registration	03 Dec 2012

Charity tax concession status

ST VINCENT DE PAUL SOCIETY (SA) INC is a Public Benevolent Institution endorsed to access the following tax concessions:

Tax concession	From
GST Concession	01 Jul 2005
FBT Exemption	01 Jul 2005
Income Tax Exemption	01 Jul 2000

Deductible gift recipient status

ST VINCENT DE PAUL SOCIETY (SA) INC is endorsed as a Deductible Gift Recipient (DGR) from 01 Jul 2000. It is covered by **Item 1** of the table in section 30-15 of the *Income Tax Assessment Act 1997*.

! Important

Please read [Deductible Gift Recipient \(DGR\)](#) information before making a gift.

ABN last updated: 22 Jul 2016

Record extracted: 24 Aug 2016

Disclaimer

<http://www.abr.business.gov.au/SearchByAbn.aspx?SearchText=73591401592>

24/08/2016

Current details for ABN 73 591 401 592 | ABN Lookup

Page 2 of 2

The Registrar makes every reasonable effort to maintain current and accurate information on this site. The Commissioner of Taxation advises that if you use ABN Lookup for information about another entity for taxation purposes and that information turns out to be incorrect, in certain circumstances you will be protected from liability. For more information see [disclaimer](#).

<http://www.abr.business.gov.au/SearchByAbn.aspx?SearchText=73591401592>

24/08/2016

From: [REDACTED]
Sent: Tuesday, 11 October 2016 6:15:04 PM
To: City of Salisbury
Subject: Att: Bronwyn and/or Sally - Re Community Grant

Good afternoon ladies

You have been helping my mother (Ursula Moore) with a grant application for the Para Hills Conference of St Vincent De Paul – thank you!

I understand that SVDP State Office (Jenny Papps) has been in contact with Council today to accept legal and financial responsibility for any grant that may be approved next month.

Please find attached to this email the additional information sought by Council to assist in assessing the application:

- Minutes from last night's meeting of the Para Hills conference re the grant application.
- A document describing the contents of each hamper.
- Screen shots from Woolworths On Line shopper indicating the current price for the basket of goods.

Please note that in addition to the attached price list, the Para Hills Conference will be paying for the following, from donations and fund raising activities.

- The hampers/baskets
- Toys for all children
- Additional foodstuffs including, Christmas pudding, custard, lollies and bon bons etc
- Meat vouchers (\$12 to \$25) for redemption at the Para Hills butcher.

Please do not hesitate to contact Ursula on [REDACTED] or me ([REDACTED]) if you require any further information.

Kind regards

Declan

file:///C:/DataWrks/te... 24/10/2016



St Vincent de Paul Society
SA
good works

ABN 73 591 401 592

Ozanam House
202 Franklin Street, Adelaide SA 5000

GPO Box 1804, Adelaide SA 5001

Administration: Ph: (08) 8112 8700

Fax: (08) 8112 8799

Donation Enquiries: Ph: (08) 8112 8777

Fax: (08) 8112 8797

Email: svdp@svdpsa.org.au

Website: www.vinnies.org.au

October 14, 2016

The Community Grants Program
City of Salisbury
PO Box 8
Salisbury SA 5108

Dear Community Grants Program Managers,

The St Vincent de Paul Society (SA) Inc auspices the Para Hills Conference and will take legal and financial responsibility for any grant monies received on their behalf from the City of Salisbury.

Yours sincerely,

David Wark
Chief Executive Officer

The St Vincent de Paul Society (SA) Inc helps many thousands of people through Home Visitation, Migrant and Refugee Assistance, Hospital and Prison Visitation, Vinnies Centres, Accommodation for Homeless Men, Overseas Partnership Development, School and Youth Programs, Fred's Vans, Social Justice and Compeer Mental Health Friendship Programs.

St. Vincent de Paul Para Hills Conference

Minutes of meeting held 10th October, 2016

Meeting opened at 7.00 pm

Present: Ursula, Corrie, Charmaine, Lynda, Dudley & A-M.

Apologies: Helen, Anne, Graeme.



Dudley welcomed all present.

Meeting opened with prayers.

Minutes of previous meeting read:

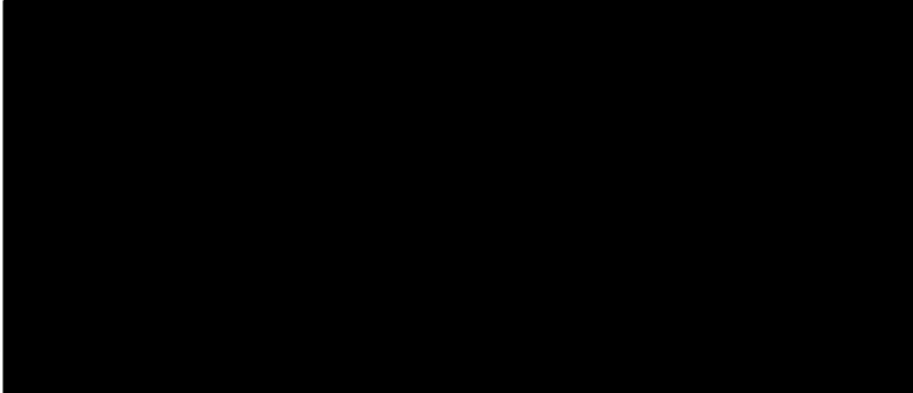
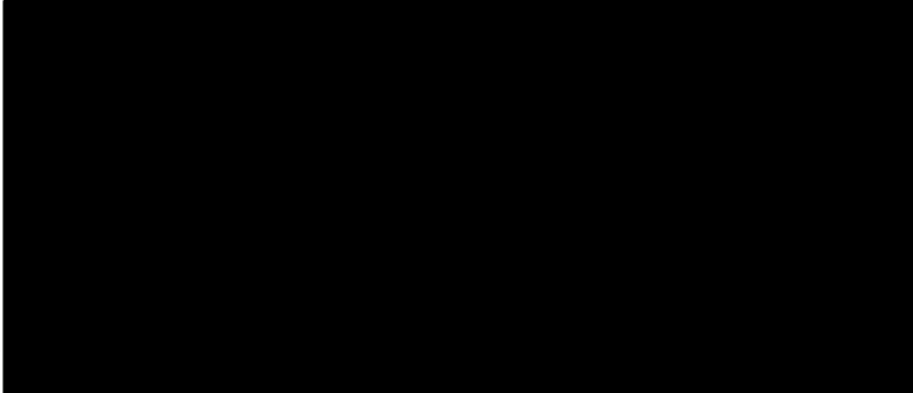
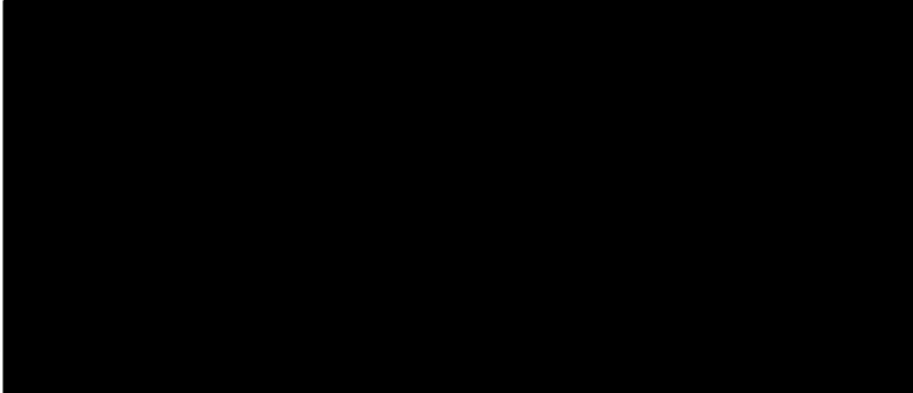
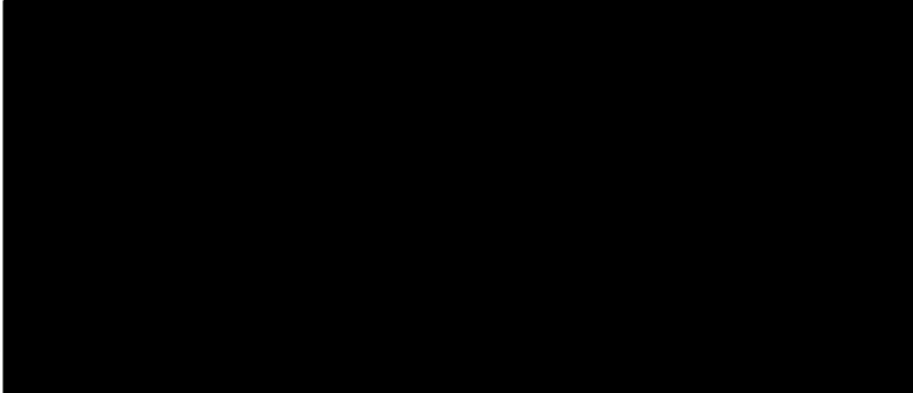
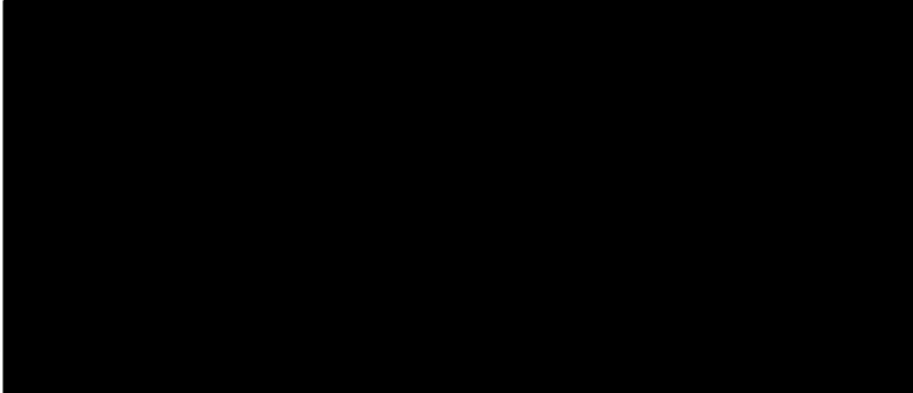
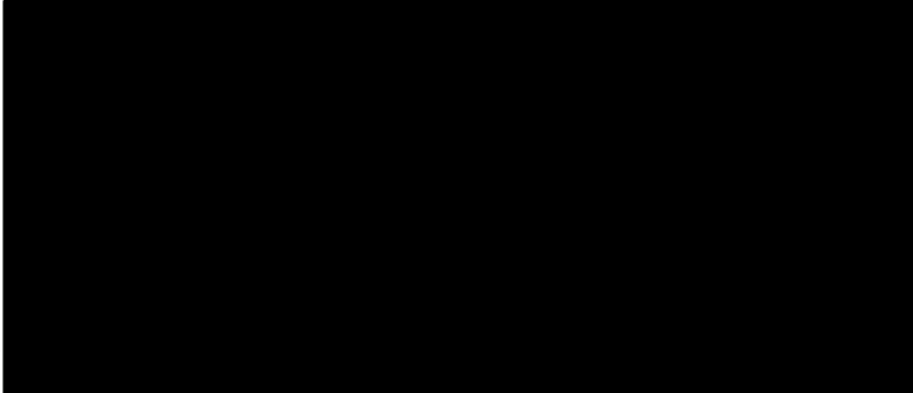
Moved -Ursula, Seconded – Lynda, A.I.F.

Business Arising:

1. 
2. 
3. Grant - As per our verbal discussion at the previous meeting it is confirmed that a Community Grant application has been submitted to the City of Salisbury for the Christmas Hampers Project 2016.
4. Quote for stock for hampers is required a.s.a.p. Lynda to process.
5. Butcher is happy to repeat 2015 process.

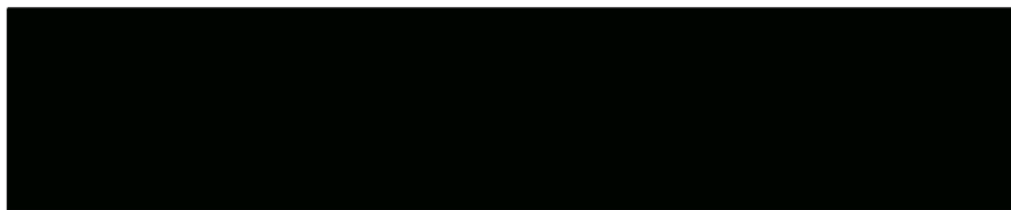
Correspondence:

Received:-

- 
- 
- 
- 
- 
- 

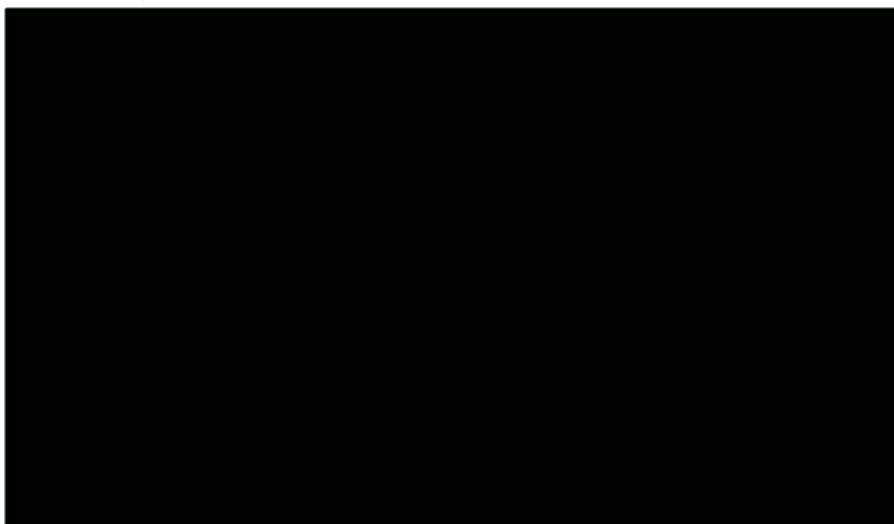
Sent:-

- 



General Business:

-
-
-
-
-



Meeting closed 8.15 pm with prayers.

Next Cake Stall - Sunday 30th October, 2016

Next Meeting – 7pm Monday, 14th November, 2016.

**Para Hills Conference
SVDP
2016 Christmas Hampers**

Council Grant Funded

<i>Item</i>	<i>Size</i>	<i>Price Woolworths On Line</i>
Big Sister Christmas Cake	700 g	\$9.00
Mighty Soft Wholemeal Rolls	6 pack	\$3.00
Arnotts Family Assorted Biscuits	500g	\$4.50
Cool Pak Butter Popcorn	10 packs x 20 g each	\$3.79
Macs Traditional Shortbread	180g	\$3.00
Smith's Chips Multipack	20 packs – 380 g total	\$5.50
Kelloggs Corn Flakes	725g	\$4.00
Edgell Green Beans Sliced	410g	\$1.35
Edgell Corn	420g	\$1.50
Edgell Beetroot Baby	450g	\$2.00
Golden Circle Peas	410g	\$1.79
Plumrose Leg Ham	450g	\$8.95
Woolworths Carrots	410g	\$1.50
Woolworths Tuna	124g	\$4.00
Dozen Country Fresh Eggs	700g	\$3.99
Cadbury Lolly Bag	160g	\$4.00
Western Star Butter	500g	\$4.00
Aeroplane Jelly - raspberry	85g	\$1.15
Aeroplane Jelly - lime	85g	\$1.15
Long Life Custard	1 litre	\$1.89
Bushells Blue Label Tea Bags	100 bags - 180g	\$3.00
Kirks Lemonade Cans	10 x 350 ml	\$6.50
Nescafe Instant Coffee	200g	\$8.99
Paul's Long Life Low Fat Milk	2 litres	\$2.00
IXL Strawberry Jam	250g	\$2.60
Dolmio Pasta Sauce	500g	\$2.00
San Remo Penne	2 x 500g	\$3.90
	Total	\$99.05

Plus SVDP Funded or Donated

Hampers/Baskets
Additional food including: <ul style="list-style-type: none"> • Christmas pudding, • custard, • lollies
And bon bons
Meat vouchers (\$12 to \$25) for redemption at the Para Hills butcher
Toys for all children in the family





Checkout - Woolwo x


https://www.woolworths.com.au/checkout


Other bookmarks

< Continue shopping

Pick up



I'd like to pick up my groceries  from Woolworths MAWSON LAKES , Tomorrow between 4:00pm and 8:00pm . For this order I'd like to use the billing address 18 Warrigal St, PARA HILLS .









































I don't  have instructions for my pick up store.

Confirmed 

Review order & substitutions

Total (27 Items): \$99.05
You have saved: \$6.45

 My personal shopper can replace all  unavailable items

	Essentials Long Life Custard 1l	\$1.89				1	
	Bushells Blue Label Tea Bags 100pk 180g	\$3.00				1	
	Kirks Lemonade Cans 10x375ml pack	\$6.50				1	
	Nescafe Instant Coffee Original Roast 200g	\$8.99				1	
	Pauls Longlife Milk Low Fat 2l	\$2.00				1	
	Ixl Strawberry Conserve 250g	\$2.60				1	
	Dolmio Extra Pasta Sauce Tomato Onion Roast Garlic 500g	\$2.00				1	
	San Remo Penne Wholemeal Pasta 500g	\$3.90				2	

Confirm

Payment

Subtotal \$99.05
Delivery Fee \$0.00
Total (incl GST) \$99.05

By placing this order, you confirm that you agree to Woolworths [terms and conditions](#) (including our [privacy policy](#)).

© Woolworths Ltd 1997-2016 - All Rights Reserved | Privacy Policy | Collection Notice | Cookies Statement | Terms & Conditions

Page 108
Sport, Recreation and Grants Committee Agenda - 14 November 2016

City of Salisbury





Checkout - Woolwo x


https://www.woolworths.com.au/checkout


Other bookmarks

< Continue shopping

Pick up


I'd like to pick up my groceries 
from Woolworths MAWSON LAKES
 Tomorrow between 4:00pm and
8:00pm . For this order I'd like to
use the billing address 18 Warrigal
St, PARA HILLS .































I don't  have instructions for my
pick up store.

Confirmed 

Review order & substitutions

Total (27 Items): \$99.05
You have saved: \$6.45

My personal shopper
can replace all  unavailable Items

	Woolworths Yellowfin Tuna In Springwater 425g	\$4.00			1	
	Country Fresh Caged Eggs Extra Large 12pk 700g	\$3.99			1	
	Cadbury Lolly Bag 160g bag	\$4.00			1	
	Western Star Salt Reduced Butter 500g	\$4.00			1	
	Aeroplane Jelly Original Lime 85g	\$1.15			1	
	Aeroplane Jelly Original Raspberry 85g	\$1.15			1	
	Essentials Long Life Custard 1l	\$1.89			1	
	Bushells Blue Label Tea Bags				1	

Confirm

Payment

Subtotal \$99.05
Delivery Fee \$0.00
Total (incl GST) \$99.05

By placing this order, you confirm
that you agree to Woolworths [terms
and conditions](#) (including
our [privacy policy](#)).

© Woolworths Ltd 1997-2016 - All Rights Reserved | Privacy Policy | Collection Notice | Cookies Statement | Terms & Conditions





Checkout - Woolwo x


https://www.woolworths.com.au/checkout


Other bookmarks

< Continue shopping

Pick up



I'd like to pick up my groceries  from Woolworths MAWSON LAKES , Tomorrow between 4:00pm and 8:00pm . For this order I'd like to use the billing address 18 Warrigal St, PARA HILLS .









































I don't  have instructions for my pick up store.

Confirmed 

Review order & substitutions

Total (27 Items): \$99.05
You have saved: \$6.45

 My personal shopper can replace all  unavailable items

	Smith's Chips Multipack Crinkle Cut Variety 20pk 380g	\$5.50				1	
	Kellogg's Corn Flakes 725g	\$4.00				1	
	Edgell Beans Green Sliced 410g	\$1.35				1	
	Edgell Corn Super Sweet 420g	\$1.50				1	
	Golden Circle Beetroot Baby Whole 450g	\$2.00				1	
	Golden Circle Peas Green 410g	\$1.79				1	
	Plumrose Ham Leg 450g	\$8.95				1	
	Woolworths Select Carrots Baby 410g	\$1.50				1	

Confirm

Payment

Subtotal	\$99.05
Delivery Fee	\$0.00
Total (incl GST)	\$99.05

By placing this order, you confirm that you agree to Woolworths [terms and conditions](#) (including our [privacy policy](#)).

© Woolworths Ltd 1997-2016 - All Rights Reserved | Privacy Policy | Collection Notice | Cookies Statement | Terms & Conditions





Checkout - Woolwo x


https://www.woolworths.com.au/checkout


Other bookmarks

< Continue shopping

Pick up


I'd like to pick up my groceries  from Woolworths MAWSON LAKES , Tomorrow between 4:00pm and 8:00pm . For this order I'd like to use the billing address 18 Warrigal St, PARA HILLS .




I don't  have instructions for my pick up store.


Confirmed 































Review order & substitutions

Total (27 Items): **\$99.05**
You have saved: **\$6.45**

My personal shopper can replace all  unavailable Items

 Woolworths Rewards  

Delivery Fee
Get FREE delivery on all orders \$100 or more with a Delivery Saver **\$0.00** 

	Big Sister Christmas Cake Rich Fruit 700g	\$9.00				<input type="text" value="1"/>	
	Mighty Soft Wholemeal Roll 6pk	\$3.00				<input type="text" value="1"/>	
	Arnott's Family Assorted 500g	\$4.50				<input type="text" value="1"/>	
	Cool Pak Multipack Butter Corn Original 10pk 200g	\$3.79				<input type="text" value="1"/>	
	Macs Traditional Shortbread Thistle 180g	\$3.00				<input type="text" value="1"/>	
	Smith's Chips Multipack Crinkle Cut Variety 20pk 280g	\$5.50				<input type="text" value="1"/>	

Confirm

Payment

Subtotal **\$99.05**
Delivery Fee **\$0.00**
Total (incl GST) **\$99.05**

By placing this order, you confirm that you agree to Woolworths [terms and conditions](#) (including our [privacy policy](#)).

© Woolworths Ltd 1997-2016 - All Rights Reserved | Privacy Policy | Collection Notice | Cookies Statement | Terms & Conditions

ITEM	7.2.6
	SPORT, RECREATION AND GRANTS COMMITTEE
DATE	14 November 2016
HEADING	34/2016: Para Hills Neighbourhood Watch Area 504 [Neighbourhood Watch Volunteers Association of South Australia Inc.] - Community Grants Program Application
AUTHOR	Bronwyn Hatswell, PA to General Manager, Community Development
CITY PLAN LINKS	3.4 Be a proud, accessible and welcoming community.
SUMMARY	The Para Hills Neighbourhood Watch Area 504 [Neighbourhood Watch Volunteers Association of South Australia Inc.] Application is submitted to the Sport, Recreation and Grants Committee for consideration.

RECOMMENDATION

1. It be noted that, in accordance with delegated powers set out in the endorsed Terms of Reference, the Sport, Recreation and Grants Committee assessed and allocated funding for the November 2016 round of Community Grants as follows:
 - a. Grant No. 34/2016: Para Hills Neighbourhood Watch Area 504 [Neighbourhood Watch Volunteers Association of South Australia Inc.] be awarded the amount of **\$735.00** to assist with the purchase of venue hire, catering (excluding alcohol), decorations, posters, invitations and award certificates as outlined in the Community Grant Application.

ATTACHMENTS

This document should be read in conjunction with the following attachments:

1. 34/2016: Para Hills Neighbourhood Watch Area 504 - Application
2. 34/2016: Para Hills Neighbourhood Watch Area 504 - Additional Information

1. BACKGROUND

- 1.1 The Para Hills Neighbourhood Watch Area 504 [Neighbourhood Watch Volunteers Association of South Australia Inc.] has not received previous Community Grants Program funding.

2. CONSULTATION / COMMUNICATION

- 2.1 Internal
 - 2.1.1 GMCD

3. REPORT

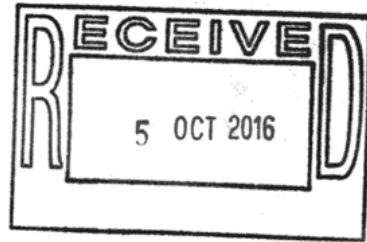
- 3.1 The Para Hills Neighbourhood Watch Area 504 is auspiced by Neighbourhood Watch Volunteers Association of South Australia Inc.
- 3.2 The Para Hills Neighbourhood Watch Area 504 (Neighbourhood Watch Volunteers Association of South Australia Inc.) Application meets the eligibility criteria for the requested Community Grants Program funding.

4. CONCLUSION / PROPOSAL

- 4.1 The Para Hills Neighbourhood Watch Area 504 (Neighbourhood Watch Volunteers Association of South Australia Inc.) Application is submitted for consideration by the Sport, Recreation and Grants Committee.

CO-ORDINATION

Officer: EXECUTIVE GROUP
Date: 08/11/2016



Community Grants Program

Application Form

Applications for Community Grants must be received by the 15th of each month to be assessed by the Sport, Recreation and Grants Committee the following month (i.e. an application received by the 15th of February will be assessed at the March Meeting).

Please ensure you have read and understood the City of Salisbury Community Grants Program Guidelines and Eligibility Criteria document prior to completing an Application.

Application Eligibility Checklist

Is the Funding For:	Yes	No
• Money already spent?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Salaries (initial or ongoing)? <i>Payment of facilitator or contractor engaged specifically to deliver program / activity under the grant may be considered</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Recurrent administration costs?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Capital development (e.g. renovations or building changes that will be permanently part of the structure)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Upgrading facilities which belong to Local, State or Commonwealth Governments?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Application from Public / Private Schools?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• An organisation trading as a sole trader/individual?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• A group that is a non-incorporated body and does not have a parent incorporated body or is not endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not-for-profits Commission?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have previously received funding and NOT fulfilled reporting obligations, including provision of post event evaluation/report and financial acquittal?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have received Community Grants Program funding from the City of Salisbury within the past twelve (12) months.	<input type="checkbox"/>	<input checked="" type="checkbox"/>

*If you have answered **YES** to any of these questions,
this application is **NOT** eligible for grant funding.*

*to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered***

Applicant Organisation Information		
1. GROUP / ORGANISATION DETAILS		
Name:	NEIGHBOURHOOD WATCH	
Address:	AREA 504	
Suburb:	PARA HILLS	Postcode: 5096
2. CONTACT PERSON DETAILS (this is the address that all correspondence will be sent)		
Name:	Mrs BARBARA SMITHSON	
Title (your role with the group/organisation):	SECRETARY	
Address:	[REDACTED]	
Phone:	Landline: [REDACTED] Mobile: [REDACTED]	
Email:	[REDACTED]	
3. COMMUNITY GRANT RESPONSIBILITY		
Name of Person Responsible for the Grant:	Other: BARBARA SMITHSON	
Title (role with the group/organisation):	SECRETARY	
4. GROUP / ORGANISATION MANAGEMENT DETAILS		
How is your group/organisation managed:	VOLUNTEER COMMITTEE/POLICE CO-ORDINATION	
Is your organisation:		
a) Incorporated:	Yes <input checked="" type="checkbox"/> (go to question c)	No <input type="checkbox"/> (go to question b)
ASIC Registration Number:		
b) Operated under a Parent Organisation: (please state which parent organisation you operate under below AND attach a supporting letter from the organisation)	Yes <input checked="" type="checkbox"/> (go to question c)	No <input type="checkbox"/> (go to question c)
Parent Organisation		
Name:	NEIGHBOURHOOD WATCHSA	
ASIC Registration Number:		

to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered**

Organisation Information (continued)		
c) Community/Non-Profit:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is your organisation endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not- for-profits Commission?	Yes <input type="checkbox"/> <i>(evidence must be attached to this application)</i>	No <input checked="" type="checkbox"/>
d) Government Funded: <i>(If Yes, please list funding source/s and purpose in part e & f)</i>	Yes <input type="checkbox"/> (go to question e & f)	No <input checked="" type="checkbox"/>
e) Funding source/s:		
f) Purpose:	COMMUNITY CRIME PREVENTION	
g) Other (please specify):	Yes <input type="checkbox"/>	No <input type="checkbox"/>
5. BANKING INFORMATION		
<i>Your organisation must have its own Bank/Credit Union Account or similar</i>		
Full Account Name: NEIGHBOURHOOD WATCH PARA HILLS AREA 504 <i>*do not provide account or BSB numbers*</i>	Financial Institution Name: [REDACTED] Branch Location: [REDACTED]	
6. REFEREE INFORMATION		
<i>Please provide the name and contact details of a referee – preferably someone who can verify the bona fide status of your group/organisation (NOT Members of the Committee)</i>		
Referee's Name:	JACK SNELLING MP	
Referee's Contact Information:	(08) 8263 3777 or playford@parliament.sa.gov.au	

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

GST Declaration		
I agree upon signing of this document that I will provide Council with the following information in regards to my Australian Business Number and Goods and Services Tax registration status.		
Does your group/organisation have an ABN <i>(If Yes - Please Quote ABN:)</i> ----- <i>(If No, the ABN Declaration Form attached must be signed)</i>	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Is your group/organisation registered for GST	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
NB: GST Registration <i>If your group IS registered for GST you are required to provide a Tax Invoice to Council before an approved grant amount can be provided to your organisation. The invoice must clearly state the words TAX INVOICE, Business Name, ABN and the approved grant amount including GST.</i>		

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 5 of 13

Project/Event Budget Information		
Will the project or event generate income (e.g. ticket sales, entry fee etc.)?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/> (enter '0' dollar amounts below)
If Yes, provide details:		
INCOME	\$ AMOUNT	
Project or event generated income:		
Organisation's contribution:		
Income received from other Grants: (list organisation(s) providing Grant funding and their contribution)		
Income received from sponsors: (list sponsor(s) and their contribution)		
Donations: (please specify the source, product or service and estimated amount of funding requested)	NHW/WATCHSA PARAPHERNALIA TO BE USED IN "SHOWBAGS" GIVEAWAYS TO COMMUNITY ATTENDING	
Have you sought any other funding for the project: (please specify the source and amount of funding requested)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
TOTAL (including GST):	\$ 0	
What resources will you and your group contribute to the project e.g. in-kind donations, labour, time etc.?	CONSIDERABLE TIME, ADMIN- SELECTING & POSTING INVITES, ADVERTISING, PRINTING CERTIFICATES, ORG MEDALS & AWARDS, FOLLOWING UP RSVP's 805, CATERING FOR EVENT.	
EXPENSES (specify the proposed expense budget by item:)	\$ AMOUNT	
VENUE HIRE	\$ 80	
AWARDS/CERTIFICATES	\$ 125	
SPECIAL RECOGNITION AWARDS	\$ 100	
FOOD PLATTERS/FINGER FOOD	\$ 200	
BEVERAGES	\$ 75	
DISPOSAL TABLE WARE	\$ 30	
ROOM/HALL DECORATIONS	\$ 30	
15TH YEAR ANNIVERSARY CAKE	\$ 165	
TOTAL (including GST):	\$ 805	

to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered**

Summary of Project/Event Information	
Is the funding for: <i>(please tick which is applicable)</i>	<input checked="" type="checkbox"/> Event <input type="checkbox"/> Project <input type="checkbox"/> Ongoing <input type="checkbox"/> New Group
Name of Project/Event Requiring Funding	15TH YEAR ANNIVERSARY NHW 504 - ACKNOWLEDGE VOL
Date(s) of Project/Event <i>(if ongoing please state "ongoing")</i>	TUESDAY EVENING ON 22ND NOVEMBER 2016
Total cost of Project/Event	\$ 805
Amount of Community Grant Funding Requested	\$ 805
Is there any other information that you may feel is relevant to your application?	<p>THIS IS A SPECIAL OCCASION TO CELEBRATE THE NHW 504, 15 YEAR'S SERVICE TO THE COMMUNITY.</p> <p>THE NHW 504 ALSO WISHES TO ACKNOWLEDGE AND RECOGNISE THE VALUABLE SERVICE GIVEN BY ITS VOLUNTEERS.</p>
<input type="checkbox"/> There are no relevant attachments.	<input checked="" type="checkbox"/> There are relevant attachments and the following documents are attached: 1. QUOTE FOR 15TH ANNIVERSARY NHW 504 CAKE 2.
Which category best describes your project/event? <i>(please check all that apply)</i>	
Health	<input type="checkbox"/>
Establishment of a new group	<input type="checkbox"/>
Education and Training	<input type="checkbox"/>
Culture / Arts	<input type="checkbox"/>
Sport / Recreation	<input type="checkbox"/>
Environment	<input type="checkbox"/>
Disability	<input type="checkbox"/>
Youth	<input type="checkbox"/>
Crime Prevention	<input checked="" type="checkbox"/>
Aged	<input type="checkbox"/>

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Project/Event Details		
Previous Community Grants Program Funding		
Has your Organisation previously received a Community Grant? <i>(If Yes – when, amount granted and what the grant was for:)</i>	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No <i>(go to Group/Organisation Information)</i>
When was the Grant funding received (month & year):		
What amount of Grant funding was provided:		
When was the previous Grant acquitted (month & year):		
Group/Organisation Information		
Group/Organisation Name	NEIGHBOURHOOD WATCH - PARA HILLS AREA 504	
Group/Organisation Description	COMMUNITY CRIME AWARENESS & PREVENTION	
Group/Organisation Registered Address	Number/Street: N/A Suburb: Postcode:	
Is the Club Incorporated?	YES	
Number of Members	1,000	
% of Membership that reside in the City of Salisbury	100 %	
Project/Event Details		
Project/Event Name	NHW 504 - 15YEAR ANNIVERSARY AND AWARD NIGHT	
Project/Event Summary	ACKNOWLEDGE SERVICE OF VOLUNTEERS & 15 YEARS HNW	
Date(s) of Project/Event	22ND NOVEMBER 2016	
Location of Project/Event:	Number/Street: UNITING CHURCH HALL Suburb: PARA HILLS Postcode: 5096	
How will the Project/Event benefit the residents of the City of Salisbury?	ACKNOWLEDGE THE SERVICE OF INDIVIDUALS/VOLUNTEER	
How many individuals will benefit from the Project/Event?	1,000 DIRECTLY 100 VOLUNTEERS, INDIRECTLY 900 RESIDENTS	
% of project/event participants that reside in the City of Salisbury	100 %	
If it is an Event, is it open to the public?	Yes	
How will the Project/Event be promoted?	COMMUNITY ADVERTISING & INVITATION	

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Grant Money Requested	
Amount Requested	\$ 805
Itemised Breakdown of Costs: <i>An itemised breakdown of costs must be provided. Please attach a separate sheet if there is insufficient space.</i>	
HIRE HALL	\$ 80
PAPER-5 REAMS	\$ 30
POSTAGE	\$ 45
LAMINATE	\$ 30
INK	\$ 20
DECORATE HALL	\$ 30
DISPOSAL TABLE WARE	\$ 30
FOODPLATTERS FROM WOOLWORTHS	\$ 140
NIBBLES,PIES/PASTIES, CAKE ETC	\$ 60
TEA,COFFEE, CHAMPAGNE,SOFTDRINK	\$ 75
SPECIAL RECOGNITION AWARDS	\$ 100
15TH ANNIV CAKE	\$ 165
	\$
	\$
	\$
	\$
	\$
TOTAL (including GST):	\$ 805
Quote Attached: <i>A detailed, current quote <u>must</u> be provided with the application.</i>	<input checked="checked" type="checkbox"/> Yes <input type="checkbox"/> No <i>(please refer to the City of Salisbury Guide to completing the Community Grants Program Application Form)</i>

to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered**

Project or Event Scope

Provide a description of the proposed project or event:

TO ACKNOWLEDGE THE SERVICE OF NHW 504 FOR 15 YEARS CONTRIBUTION TO THE COMMUNITY OF PARA HILLS.

TO RECOGNISE AND ACKNOWLEDGE THE RESIDENTS WHO HAVE AND CONTINUE TO VOLUNTEER THEIR TIME AND EFFORT TO THEIR FELLOW RESIDENTS BY SUPPORTING THE LOCAL NHW 504.

SOME RESIDENTS HAVE GIVEN IN EXCESS 15 YEARS SERVICE, THROUGH THEIR COMMITTEE DUTIES AND EXCELLING EXPECTATIONS. FOR 15 YEARS PLUS, RESIDENTS HAVE AND MANY CONTINUE TO DELIVER THE NHW NEWSLETTERS AND SHOW SUPPORT TO THEIR LOCAL NHW GROUP.

THIS IS AN OUTSTANDING CONTRIBUTION TO THE LOCAL COMMUNITY OF PARA HILLS BY MANY UNSUNG VOLUNTEERS WHO HAVE PUT IN COUNTLESS HOURS TO HELP THEIR LOCAL AREA; AND DESERVED TO BE RECOGNISED AND ACKNOWLEDGED

Attachments

- ☒ There are no attachments relating to the Project or Event Scope.
- ☐ The following documents are attached relating to the Project or Event Scope:
- 1.
 - 2.
 - 3.

Benefits and Outcomes of the Project or Event

Provide a description of the benefits and outcomes of the proposed project or event to the residents of the City of Salisbury and/or the wider community:

THE BENEFITS AND OUTCOMES FOR THIS EVENT ARE TWOFOLD - FIRSTLY TO ACKNOWLEDGE THAT THROUGH THE TIME AND EFFORTS OF THE MANY VOLUNTEERS THIS NHW HAS FOR 15 YEARS PROVIDED MANY CRIME PREVENTION IDEAS AND PERSONNEL SECURITY AWARENESS.

AS A REAL COMMUNITY GROUP IT HAS CONTINUED TO ENGAGE WITH THE PARA HILLS COMMUNITY THROUGH THE LOCAL NHW NEWSLETTER, ORGANISING GUEST SPEAKERS, AND ENSURING POLICE ARE IN ATTENDANCE AT OUR MEETINGS AND PROVIDING A VENUE TO MEET WITH NEIGHBOURS.

THIS HAS CONTINUED AND GROWN OVER THE LAST 15 YEARS - OUR GROUP CONTINUES TO ATTRACT A LARGE NUMBER OF RESIDENTS TO OUR MEETINGS SOMETHING WE AS A GROUP ARE IMMENSELY PROUD OF. THIS COULD ONLY BEEN ACHIEVED BY HAVING A DEDICATED AND EXTREMELY HARD WORKING GROUP OF VOLUNTEERS, SOMETHING THAT SHOULD BE ACKNOWLEDGED AND RECOGNISED. SO THIS EVENT WILL BE CELEBRATING 15 YEARS OF NHW 504 BUT ALSO A BIG "THANK YOU" TO THE TIRELESS AND HARDWORKING VOLUNTEERS AND COMMITTEE OF THE PARA HILLS 504

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Support for the Project or Event

Demonstrate how the proposed project or event is supported by residents of the City of Salisbury and/or the wider community:

(include a list of key partners and/or stakeholders, community members and organisations that have been consulted, how and why they support the project or event and any other information that demonstrates support.

OUR SUPPORT COMES FOR THE FACT THAT MANY RESIDENTS HAVE AND CONTINUE TO ATTEND OUR MEETINGS. THOSE WHO DON'T ATTEND HAVE PROVIDED FEEDBACK THAT THEY ENJOY AND ARE INFORMED ABOUT CRIME PREVENTION AND PERSONAL SAFETY THROUGH THE ARTICLES IN THE NEWSLETTER.

MANY LOCAL DIGNITIES, AND OTHER NEIGHBOURING NHW HAVE INDICATED A WILLNESS TO ATTEND THE EVENT SUCH A S THE MAYOR OF SALISBURY, STATE AND FEDERAL GOVERNMENT MEMBERS, HIGH RANKING POLICE, AND KEY MEMBERS OF NHW , LOCAL BUSINESS SUPPORTERS AND MANY LOCAL RESIDENTS.

Attachments

- ☒ There are no attachments relating to Support for the Project or Event.
- ☐ The following documents are attached relating to Support for the Project or Event:
- 1.
 - 2.
 - 3.

Project or Event Management

Ongoing Projects or Events

*Describe how the proposed project or event will be managed into the future:
(outline how you will ensure sustainability and achieve outcomes for the project or activity)*

One-off Projects or Events

*Describe how the proposed project or event will be managed:
(outline how you will achieve outcomes for the project or activity)*

IT IS OUR HOPE THAT THROUGH THIS EVENT WE CAN FURTHER PROMOTE THE VALUES AND BENEFITS OF THE NHW. CRIME PREVENTATION AND PERSONAL SECURITY AWARENESS IS THE MOST IMPORTANT ASPECT OF NHW AND BY PROMOTING THIS WE HOPE TO REDUCE CRIME IN THE LOCAL COMMUNITY.

THE EVENT WILL BE MANAGED BY LOCAL VOLUNTEERS OF THIS GROUP, AND ORGANISED AND PROMOTED BY THE COMMITTEE OF NHW 504.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Application Declaration

Please note that this declaration must be signed by two current senior office holders of the group/organisation (ie President, Secretary, Treasurer)

Please read, tick the S1 and S2 boxes and sign:

S1 S2

- ☒ ☒ I acknowledge that I am authorised to make this application on behalf of the Organisation.
- ☒ ☒ I acknowledge that the information provided in this application is true and correct.
- ☒ ☒ I acknowledge that our Organisation may be required to supply further information prior to consideration of this application by the City of Salisbury Community Grants Program.
- ☒ ☒ I acknowledge that, should this Application be successful in obtaining Community Grant funding, our Organisation must complete the acquittal and reporting requirements as set out in the Acceptance of Community Grant – Form 1 and City of Salisbury Community Grants Program Guidelines and Eligibility Criteria.
- ☒ ☒ I acknowledge that any changes in circumstances with regard to this Application must be notified in writing and the City of Salisbury Community Grants Program may request further information.

On behalf of NHN AREA 504 (Group/Organisation)

(Name/Position)

and

(Name/Position)

BARBARA SMITHSON (SECRETARY)
(Signature 1)

SHIRAZEE REARDON J.P.
(Signature 2) AREA CO-ORDINATOR

B. Smithson
(Date)

Shirazee Reardon
(Date)

10/9/16

10/9/16

Contact (phone number):

Contact (phone number):

Both signatories will be contacted to verify the application - a contact phone number must be provided for each.
Your Application will **not** be submitted until contact and verification has occurred, **no exception**.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered



Declaration Where No Australian Business Number is Required

I hereby certify that I am not required under the New Taxation System to hold an Australian Business Number (ABN), as I am not carrying out an enterprise under the New Tax System definition.

I am providing my services as:

	Yes	No
A private recreational pursuit or hobby	<input checked="" type="checkbox"/>	<input type="checkbox"/>
As an individual without a reasonable expectation of profit or gain	<input checked="" type="checkbox"/>	<input type="checkbox"/>

As such the Council is not obliged to withhold 48.5% from payments made to me.

I confirm that the above declaration is valid for all payments made by Council to our organisation. Should the situation change and I am required to hold an Australian Business Number, I will notify Council immediately.

NEIGHBOURHOOD WATCH PARA HILLS AREA 504
(Group/Organisation)

TREASURER
(Name/Position)

[Signature]
(Signature)

19/9/16
(Date)

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 13 of 13

Original

27

ORDER QUOTE

DATE 21st Sep 2016

TO Barbara Smithson
Neighbourhood Watch

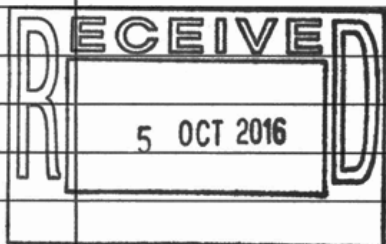
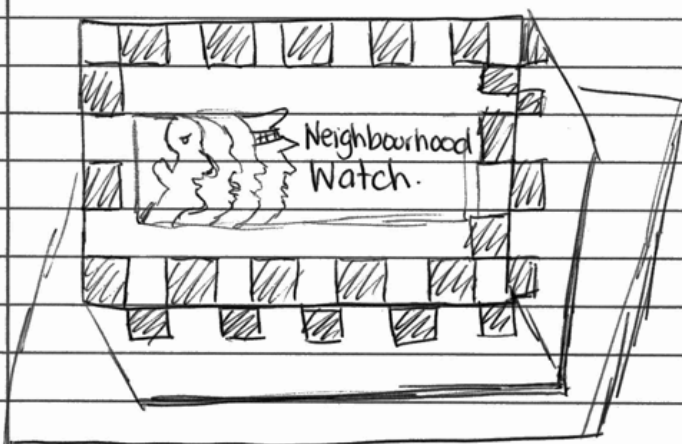
22nd Nov 2016
Tuesday

FROM



PLEASE SUPPLY THE FOLLOWING ITEMS.
QUOTE THE ABOVE NUMBER ON INVOICE

60 Coffee Serv

QTY	DESCRIPTION
	<p><u>14" x 9" Rectangle - Cake flavour TBC.</u></p> <ul style="list-style-type: none"> <u>- white fondant Iced.</u> <u>- Edible image on top of the Neighbourhood watch logo</u> <u>(green and white)</u> <u>- green + white checker board, boarder.</u>
	
	
	<p><u>\$165⁰⁰.</u></p>

HEREBY QUOTE ABN

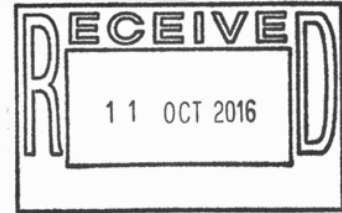


NAME OF PERSON AUTHORIZED TO QUOTE



SIGNATURE OF PERSON AUTHORIZED TO QUOTE

[Handwritten Signature]

NHW PARA HILLS AREA 504 EXECUTIVE MEETING MINUTES**HELD WEDNESDAY JULY 7TH 2016****Meeting opened 10.00 am.**

1. Present: Shiralee Reardon, Helen Wilson, Colin Jeffs, Rosemare Jeffs, Barbara Smithson.
2. Apologies: John & Kay Fabian
3. [REDACTED]
4. [REDACTED]
5. The Awards night confirmed for November 22nd
6. Awards night: Tasks allocated

Application to Salisbury Council re grant to help cover costs. SHIRALEE & BARBARA

Invitations to VIP's & Key members in our Zone BARBARA

Invitations to Award recipients. BARBARA

Quote for Cake BARBARA

Award Certificates Badges (Printed & Laminated) Signed by Secretary & Facilitator BARBARA,

Advertising Local: 20 posters A4 to be placed in Library, Community Club/ Paddocks House etc. Notice to go into October Newsletter

BARBARA

Supper---Food & Drinks (to be catered)

Tableware

Room Decoration (balloons etc)

Show bags for those who attend (how many?)

ALL TO HELP WITH THE SETTING UP ON THE NIGHT

The rest of the tasks to be allocated, i.e speeches, photography and someone to greet guests

Meeting closed 11.15 am.

Minutes Pro Helen Wilson Sec Colin Jeffs Minutes passed

Barbara Smithson (Secretary)

Shiralee Reardon (Facilitator)

Stationery

Paper	Copy Mart	\$X 500	21	35
Envelopes	2 Spt Business		1	75

Prices as of 10/10/16.

Reception

<div style="background-color: black; width: 500px; height: 40px; margin: 0 auto;"></div>		
CHEESE - BAIE		12.30
CHEESE		7.00
CHEDDAR		10.00
CABARDS -		6.00
Twiggy Sticks -		8.00
CHICKEN WINGS -		20.00
HY ROMA -		40.00
SANDWICHES X 2		60.00
ARMOT CHOC BISC. DRY:		8.00
ASST. BISCUITS		20.00
DANISH PASTRIES		12.00
BITUOT SNACKS -		8.00
		<u>209.</u>
LEMONADE: X 2		4.60
L.H. BITTERS: X 1		2.30
ORANGE JUICE:		4.00
COKE		2.30
MILK		3.50
		<u>50.00</u>
CHAMPAGNE		
CUPS		
PLATES		
SERVILETTES		
SPOONS		
TABLECLOTH		
BALLOONS & DECORATIONS:		



Confirming new rates per hour for the [REDACTED]

Hall Hire in 2016 is \$20.00 per hour.

Booking for Neighbourhood Watch 504 – 15 Year Anniversary – Awards Night

is for the 22nd November.

Commencing from 6.00pm to 10.00pm

(this includes 1hour setup and ½ hour clean up time)

TOTAL amount payable is \$80.00

27.

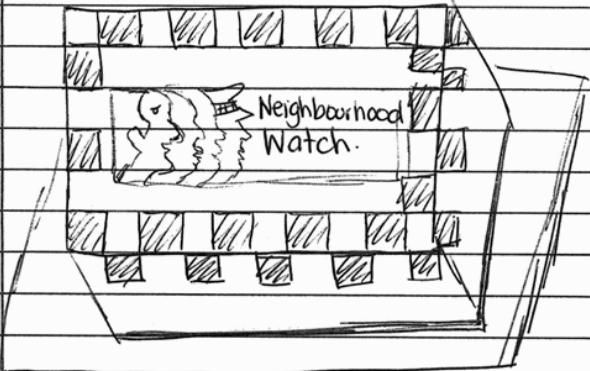
~~ORDER~~
QUOTE

TO Barbara Smithson 22nd Nov 2016
Neighbour hood Watch Tuesday.

FROM [REDACTED]
[REDACTED] - [REDACTED]

PLEASE SUPPLY THE FOLLOWING ITEMS.
QUOTE THE ABOVE NUMBER ON INVOICE

60 Coffee Serves.

QTY	DESCRIPTION
	<p>14" x 9" Rectangle - Cake flavour TBC.</p> <ul style="list-style-type: none"> - white fondant Iced. - Edible image on top of the Neighbourhood watch logo (green and white). - green + white checker board, boarder.
	 <p>\$165⁰⁰.</p>

I HEREBY QUOTE ABN [REDACTED]

NAME OF PERSON AUTHORISED TO QUOTE

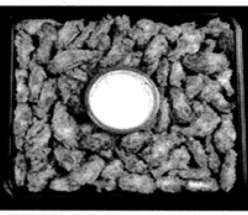
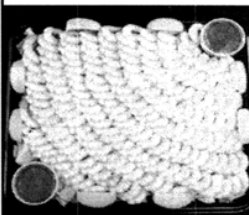


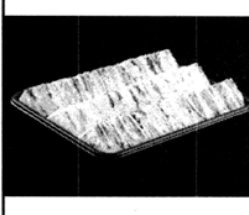
SS. 100.1

SIGNATURE OF PERSON AUTHORISED TO QUOTE

COSTCO WHOLESALE

DELI PLATTER ORDER FORM

48 HOURS ADVANCED NOTICE IS REQUIRED

Chicken Wing Platter with Cheese Dip - Serves 5 per kg Minimum 3.0kg - \$11.99 per kg Quantity:		Prawn Platter with Cocktail Sauce - Serves 8 1.58 kg - \$49.98 each Quantity:	
	3.0kg \$35.97		
	Sushi Platter Smoked Salmon, Spicy Tuna, Crispy and Teriyaki Chicken, - Serves 24 - 2.1kg - \$34.99 each Quantity:		
Assorted Hye Roller Platter Roast Beef, Turkey, Ham, Cheese - 40 pieces - 3 kg - \$39.99 each Quantity:		Sandwich Platter Chicken, Egg Mayo, Roast Beef, Ham & Cheese - Serves 9 - 1.95 kg - \$29.99 each Quantity:	
	1		2 \$59.98

35.97
59.98
39.99

MEMBER INFORMATION:

TOTAL \$135.94

Name (please print):	Contact Number:
Membership card #:	Pickup at:
Pick-up date:	Pick-up time:

Please email completed forms to:

AUBURN: W05102-servicedeli@costco.com.au
 CROSSROADS: W05105-servicedeli@costco.com.au
 CANBERRA: W05103-servicedeli@costco.com.au
 DOCKLANDS: W05101-servicedeli@costco.com.au
 RINGWOOD: W05104-servicedeli@costco.com.au
 NORTHLAKES: W05106-servicedeli@costco.com.au
 KILBURN: W05107-servicedeli@costco.com.au
 MOORABBIN: W05108-servicedeli@costco.com.au



TODAY'S SPECIAL

Tea Tree Plaza PH: 8314 5468

Your Store Manager is: Jenni

WOOLWORTHS TAX INVOICE - ABN 88 000 014 675

*JACOBS CREEK SPARK CHARD P/NOIR 750ML

Qty	6	@	\$11.00 ea	66.00
WINE 3 FOR \$25				-16.02
6	SUBTOTAL			\$49.98

VOIDED TRANSACTION

VALUE: \$49.98

VOID REASON:

STORE 5654 POS 012 TRANS 7591 0007 16:02 7/10/16

Thank you for shopping at BWS

Visit www.bws.com.au

Bronwyn Hatswell

From: Shiralee Reardon
Sent: Wednesday, 12 October 2016 3:43 PM
To: Bronwyn Hatswell
Subject: (DWS Doc No 4150924) FW: CoS Community Grant

Importance: High

Good morning Bronwyn,

Does the following attached email from Phil Tavender sufficient for the Community Grant?

Can you please advise receipt of this email and whether it is acceptable.

Regards

Cr Shiralee Reardon JP

Elected Member
Hills Ward
WK: 08 8406 8222
E: sreardon@salisbury.sa.gov.au

From: Phil & Barb Tavender [philandbarb@bettanet.net.au]
Sent: Wednesday, 12 October 2016 11:54 AM
To: Shiralee Reardon
Subject: RE: CoS Community Grant

To whom it may concern,

The **Neighbourhood Watch Volunteers Association Of South Australia Incorporated** (NHW VASA Inc.) with the **ABN 18501596358**, is established as a legally incorporated organisation.
By virtue of its membership as part of this incorporated organisation (being the overseeing body) **Neighbourhood Watch Area 504**, along with all Neighbourhood Watch Areas, comes under the umbrella of the NHW VASA Inc.

As such, the NHW VASA Inc. will take legal and financial responsibility for any grant monies received from the City of Salisbury.

Yours Sincerely



Phil Tavender
Vice President
Neighbourhood Watch Volunteers Association Of South Australia Incorporated

12/10/2016

From: Shiralee Reardon [mailto:SReardon@salisbury.sa.gov.au]
Sent: Wednesday, 12 October 2016 10:51 AM

To: Tavender, Philip (SAPOL)
Cc: [REDACTED]
Subject: RE: CoS Community Grant
Importance: High

Good Morning Phil,

Thanks for your prompt reply, attached below is the original email the second paragraph (reprinted below) explains what is required.

Basically two things - first you have to state that the Association is a legit incorporated body (and the NHW 504 is a member) and secondly that you (the Association) is willing to take legal and financial responsibility for any monies received from the City of Salisbury.

REPRINTED

One of the eligible conditions states " *The group/organisation must be **established as a legally constituted incorporated organisation** or can demonstrate they are **auspiced by an incorporated organisation** who will take **legal and financial responsibility** for any grant monies received from the City of Salisbury.*"

Hope the above all makes sense, I have tried to explain as best I can if still not clear please ring me on [REDACTED] or [REDACTED].

Cheers

Cr Shiralee Reardon JP

Elected Member

Hills Ward

sreardon@salisbury.sa.gov.au

From: Tavender, Philip (SAPOL) [REDACTED]
Sent: Thursday, 6 October 2016 4:31 PM
To: Shiralee Reardon
Subject: RE: CoS Community Grant

Hi Shiralee,

Your Area is covered by the Association of which you (Area) is a part of the "legally constituted incorporated organisation".

We have an ABN for you to use as part of the organisation; Neighbourhood Watch Volunteers Association of South Australia Inc.

18501596358

That's all that's legally required for your application.

Regards,

Phil Tavender

Volunteer, NHW ID Card Team (74)

South Australia Police

100 Angas Street

ADELAIDE SA 5000

[W www.police.sa.gov.au](http://www.police.sa.gov.au)

SOUTH AUSTRALIA POLICE

KEEPING SA SAFE

The information contained in this message and any attachment is confidential and may also be the subject of legal, professional privilege or public interest immunity. If you are not the intended recipient, any use, disclosure or copying of this document and or its attachments is unauthorised. Please advise us by reply and then delete it from your system. Any views or opinions presented are solely those of the author and do not necessarily represent those of SAPOL.

From: Shiralee Reardon [<mailto:SReardon@salisbury.sa.gov.au>]
Sent: Thursday, 6 October 2016 9:47 AM
To: Tavender, Philip (SAPOL)
Subject: FW: CoS Community Grant
Importance: High

2nd go

Cr Shiralee Reardon JP
Elected Member
Hills Ward
sreardon@salisbury.sa.gov.au

From: Shiralee Reardon
Sent: Thursday, 6 October 2016 9:42 AM
To: [REDACTED]
Subject: FW: CoS Community Grant

Hi again,

Please see the attached, forwarded email. Hope this has go thru okay as well as one below, can I be a pest and request that if you have received this that you contact me and advise; either by return email or phone as listed below. Just a short note, of yes received will suffice.

Regards

Cr Shiralee Reardon JP
Elected Member
Hills Ward
MOB: 0427 095 566 WK: 08 8406 8222
E: sreardon@salisbury.sa.gov.au

From: Shiralee Reardon
Sent: Thursday, 6 October 2016 9:24 AM
To: philandbarb@bettanet.net.au
Subject: CoS Community Grant

G'day Phil,

Following on from our phone conversation yesterday I would like to formally request written confirmation that the NHW 504 is covered as "auspiced by an incorporated organisation". (see full text below)

One of the eligible conditions states "The group/organisation must be established as a legally constituted incorporated organisation or can demonstrate they are auspiced by an incorporated organisation who will take legal and financial responsibility for any grant monies received from the City of Salisbury."

If you also wanted to include a short support letter that would be great, but the main request is for the acknowledgement above.

The actual request is for \$805.00 dollars to offset some of the costs involved in celebrating and acknowledging NHW 504 15 year anniversary and award night.

The cut off date for the above is next week, so it would be very appreciated if this could be returned promptly.

Kind regards

Cr Shiralee Reardon JP
Elected Member
Hills Ward

[REDACTED]
E: sreardon@salisbury.sa.gov.au



This email has been checked for viruses by Avast antivirus software.
www.avast.com

Bronwyn Hatswell

From: Shiralee Reardon
Sent: Wednesday, 12 October 2016 4:13 PM
To: Bronwyn Hatswell
Subject: Community Grant
Attachments: neighbourhoodwatch 11102016.doc

Importance: High

Hello Bronwyn,

Just received this email in which the cost of the Hall is different, previously we were advised that the cost would be \$20.00 per hour. It clearly states \$15.00 per hour are you able to amend this please.

Hall hire would need to be amended from \$80.00 down to \$60.00 for the Anniversary/Awards night.

Regards

Cr Shiralee Reardon JP
Elected Member
Hills Ward
sreardon@salisbury.sa.gov.au



QUOTE FOR USE OF HALL BY NEIGHBOURHOOD WATCH, PARA HILLS

DATE: Tuesday, 22 November, 2016

PERIOD OF USE: Four (4) hours

COST: \$15.00 per hour (Total of \$60.00)

ITEM	7.2.7
	SPORT, RECREATION AND GRANTS COMMITTEE
DATE	14 November 2016
HEADING	35/2016: Uniting Church in Australia Salisbury - Community Grants Program Application
AUTHOR	Bronwyn Hatswell, PA to General Manager, Community Development
CITY PLAN LINKS	3.4 Be a proud, accessible and welcoming community.
SUMMARY	The Uniting Church in Australia Salisbury Application is submitted to the Sport, Recreation and Grants Committee for consideration.

RECOMMENDATION

1. It be noted that, in accordance with delegated powers set out in the endorsed Terms of Reference, the Sport, Recreation and Grants Committee assessed and allocated funding for the November 2016 round of Community Grants as follows:
 - a. Grant No. 35/2016: Uniting Church in Australia Salisbury be awarded the amount of **\$1,930.00** to assist with the purchase of advertising banner, animal farm hire and catering for the 2016 Carols on the Lawn event as outlined in the Community Grant Application.

ATTACHMENTS

This document should be read in conjunction with the following attachments:

1. 35/2016: Uniting Church in Australia Salisbury - Application

1. BACKGROUND

- 1.1 Uniting Church in Australia Salisbury received \$1,756 Community Grants Program funding in November 2015 to assist with the purchase of food, beverages, craft activities and advertising for the Christmas Carols on the Lawn event.

2. CONSULTATION / COMMUNICATION

- 2.1 Internal
 - 2.1.1 GMCD

3. REPORT

- 3.1 The Uniting Church in Australia Salisbury Application meets the eligibility criteria for the requested Community Grants Program funding.

4. CONCLUSION / PROPOSAL

- 4.1 The Uniting Church in Australia Salisbury Application is submitted for consideration by the Sport, Recreation and Grants Committee.

CO-ORDINATION

Officer: EXECUTIVE GROUP
Date: 08/11/2016



Community Grants Program Application Form

Applications for Community Grants must be received by the 15th of each month to be assessed by the Sport, Recreation and Grants Committee the following month (i.e. an application received by the 15th of February will be assessed at the March Meeting).

Please ensure you have read and understood the City of Salisbury Community Grants Program Guidelines and Eligibility Criteria document prior to completing an Application.

Application Eligibility Checklist		
Is the Funding For:	Yes	No
• Money already spent?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Salaries (initial or ongoing)? <i>Payment of facilitator or contractor engaged specifically to deliver program / activity under the grant may be considered</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Recurrent administration costs?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Capital development (e.g. renovations or building changes that will be permanently part of the structure)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Upgrading facilities which belong to Local, State or Commonwealth Governments?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Application from Public / Private Schools?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• An organisation trading as a sole trader/individual?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• A group that is a non-incorporated body and does not have a parent incorporated body or is not endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not-for-profits Commission?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have previously received funding and NOT fulfilled reporting obligations, including provision of post event evaluation/report and financial acquittal?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have received Community Grants Program funding from the City of Salisbury within the past twelve (12) months.	<input type="checkbox"/>	<input checked="" type="checkbox"/>

***If you have answered YES to any of these questions,
this application is NOT eligible for grant funding.***

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 2 of 13

Applicant Organisation Information		
1. GROUP / ORGANISATION DETAILS		
Name:	Salisbury Uniting Church	
Address:	59-61 Park terrace	
Suburb:	Salisbury SA	Postcode: 5108
2. CONTACT PERSON DETAILS (this is the address that all correspondence will be sent)		
Name:	Mrs Cheryl Sachse	
Title (your role with the group/organisation):	Treasurer	
Address:	[REDACTED]	
Phone:	Landline: [REDACTED] Mobile: [REDACTED]	
Email:	salisburyuca@bigpond.com	
3. COMMUNITY GRANT RESPONSIBILITY		
Name of Person Responsible for the Grant:	Mrs Cheryl Sachse	
Title (role with the group/organisation):	Treasurer	
4. GROUP / ORGANISATION MANAGEMENT DETAILS		
How is your group/organisation managed:	by Church Council	
Is your organisation:		
a) Incorporated:	Yes <input type="checkbox"/> (go to question c)	No <input checked="" type="checkbox"/> (go to question b)
ASIC Registration Number:		
b) Operated under a Parent Organisation: (please state which parent organisation you operate under below AND attach a supporting letter from the organisation)	Yes <input type="checkbox"/> (go to question c)	No <input checked="" type="checkbox"/> (go to question c)
Parent Organisation		
Name:		
ASIC Registration Number:		

to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered**

Community Grant Application - Page 3 of 13

Organisation Information (continued)		
c) Community/Non-Profit:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is your organisation endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not- for-profits Commission?	Yes <input type="checkbox"/> <i>(evidence must be attached to this application)</i>	No <input checked="" type="checkbox"/>
d) Government Funded: <i>(If Yes, please list funding source/s and purpose in part e & f)</i>	Yes <input type="checkbox"/> (go to question e & f)	No <input checked="" type="checkbox"/>
e) Funding source/s:	<i>We are funded by our church members</i>	
f) Purpose:	<i>Religious education</i>	
g) Other (please specify): <i>rooms available for hire to local community and multicultural churches.</i>	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
5. BANKING INFORMATION		
<i>Your organisation must have its own Bank/Credit Union Account or similar</i>		
Full Account Name: <i>Salisbury Uniting Church</i> <i>*do not provide account or BSB numbers*</i>	Financial Institution Name: [REDACTED] Branch Location: [REDACTED]	
6. REFEREE INFORMATION		
<i>Please provide the name and contact details of a referee – preferably someone who can verify the bona fide status of your group/organisation (NOT Members of the Committee)</i>		
Referee's Name:	<i>Shirley Abbott</i>	
Referee's Contact Information:	[REDACTED]	

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 4 of 13

GST Declaration		
I agree upon signing of this document that I will provide Council with the following information in regards to my Australian Business Number and Goods and Services Tax registration status.		
Does your group/organisation have an ABN <i>(If Yes - Please Quote ABN:)</i> <u>5</u> <u>8</u> <u>4</u> <u>1</u> <u>2</u> <u>4</u> <u>3</u> <u>5</u> <u>4</u> <u>9</u> <u>1</u> <i>(If No, the ABN Declaration Form attached must be signed)</i>	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is your group/organisation registered for GST	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
<p>NB: GST Registration</p> <p><i>If your group IS registered for GST you are required to provide a Tax Invoice to Council before an approved grant amount can be provided to your organisation. The invoice must clearly state the words TAX INVOICE, Business Name, ABN and the approved grant amount including GST.</i></p>		

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 5 of 13

Project/Event Budget Information	
Will the project or event generate income (e.g. ticket sales, entry fee etc.)?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (enter '0' dollar amounts below)
If Yes, provide details:	
INCOME	\$ AMOUNT
Project or event generated income:	\$ 0
Organisation's contribution:	\$ 0
Income received from other Grants: (list organisation(s) providing Grant funding and their contribution)	\$ 0
Income received from sponsors: (list sponsor(s) and their contribution)	\$ 0
Donations: (please specify the source, product or service and estimated amount of funding requested)	0.00
Have you sought any other funding for the project: (please specify the source and amount of funding requested)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
TOTAL (including GST):	\$ 0
What resources will you and your group contribute to the project e.g. in-kind donations, labour, time etc.?	<i>We will provide funds for advertising, safety fencing, and craft activities for children. We will supply and manage BBQ, activities with children letterbox drop. We will supply singers, musicians and preacher.</i>
EXPENSES (specify the proposed expense budget by item:)	\$ AMOUNT
<i>Advertising Banner</i>	<i>\$ 240</i>
<i>Sausages & onions</i>	<i>\$ 171</i>
<i>Ic Creams</i>	<i>\$ 184</i>
<i>Asst drinks</i>	<i>\$ 231</i>
<i>Rainbow Animal farm & ponies</i>	<i>\$ 1,100</i>
TOTAL (including GST):	\$ 1,926

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Summary of Project/Event Information	
Is the funding for: <i>(please tick which is applicable)</i>	<input checked="" type="checkbox"/> Event <input type="checkbox"/> Project <input type="checkbox"/> Ongoing <input type="checkbox"/> New Group
Name of Project/Event Requiring Funding	'Carols on the Lawn'
Date(s) of Project/Event <i>(if ongoing please state "ongoing")</i>	18/12/2016 at 7pm
Total cost of Project/Event	\$ 1,926
Amount of Community Grant Funding Requested	\$ 1,926
Is there any other information that you may feel is relevant to your application?	<i>This event will be open to the community a time for families to gather and have free BBQ drinks and entertainment.</i>
<input type="checkbox"/> There are no relevant attachments.	<input checked="" type="checkbox"/> There are relevant attachments and the following documents are attached: 1. quotes for event 2.
Which category best describes your project/event? <i>(please check all that apply)</i>	
Health	<input type="checkbox"/>
Establishment of a new group	<input type="checkbox"/>
Education and Training	<input type="checkbox"/>
Culture / Arts	<input type="checkbox"/>
Sport / Recreation	<input checked="" type="checkbox"/>
Environment	<input type="checkbox"/>
Disability	<input type="checkbox"/>
Youth	<input type="checkbox"/>
Crime Prevention	<input type="checkbox"/>
Aged	<input type="checkbox"/>

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 7 of 13

Project/Event Details	
Previous Community Grants Program Funding	
Has your Organisation previously received a Community Grant? <i>(If Yes – when, amount granted and what the grant was for:)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(go to Group/Organisation Information)</i>
When was the Grant funding received (month & year):	December 16th 2015
What amount of Grant funding was provided:	\$ 1,766
When was the previous Grant acquitted (month & year):	May 2016
Group/Organisation Information	
Group/Organisation Name	Salisbury Uniting Church
Group/Organisation Description	Uniting church
Group/Organisation Registered Address	Number/Street: 59-61 Park terrace Suburb: Salisbury SA Postcode: 5108
Is the Club Incorporated?	NO
Number of Members	150
% of Membership that reside in the City of Salisbury	98 %
Project/Event Details	
Project/Event Name	'Carols on the lawn'
Project/Event Summary	Christmas carols on the lawn, free event for the local community.
Date(s) of Project/Event	18/12/2016
Location of Project/Event:	Number/Street: 59-61 Park terrace Suburb: Salisbury SA Postcode: 5108
How will the Project/Event benefit the residents of the City of Salisbury?	It will be a free family fun event open to the local community.
How many individuals will benefit from the Project/Event?	200
% of project/event participants that reside in the City of Salisbury	100 %
If it is an Event, is it open to the public?	Yes
How will the Project/Event be promoted?	Messenger, Banners, letterdrops & Salisbury Christmas Parade.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Grant Money Requested	
Amount Requested	\$ 1,926
Itemised Breakdown of Costs: <i>An itemised breakdown of costs must be provided. Please attach a separate sheet if there is insufficient space.</i>	
20 x24 packets of Sausages	\$ 160
Drinks	\$ 231
Advertising Banner	\$ 240
Animal farm & donkey hire	\$ 1,100
Icecreams	\$ 184
onions	\$ 11
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
TOTAL (including GST):	\$ 1,926
Quote Attached: <i>A detailed, current quote <u>must</u> be provided with the application.</i>	<input checked="checked" type="checkbox"/> Yes <input type="checkbox"/> No <i>(please refer to the City of Salisbury Guide to completing the Community Grants Program Application Form)</i>

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Project or Event Scope

Provide a description of the proposed project or event:

This event will be held a week prior to Christmas. It will be held on the front lawns of our church. We will begin at 7pm with activities for children: face painting, photo booths with dress-up costumes depicting the nativity, donkey rides and an Animal farm for the children to enjoy.

A BBQ of sausages, onions, drinks & ice-creams will be available free to the local community. We have invited our multicultural churches to this event and have invited the Burmese congregation to sing a song.

At 8pm we will begin a relaxed time of carol singing & tell the Christmas story aimed at families.

Attachments

- ☐ There are no attachments relating to the Project or Event Scope.
- ☒ The following documents are attached relating to the Project or Event Scope:
1. *quotes for the event*
 - 2.
 - 3.

Benefits and Outcomes of the Project or Event

Provide a description of the benefits and outcomes of the proposed project or event to the residents of the City of Salisbury and/or the wider community:

For families on low income this event will be provided free of charge, an opportunity to enjoy a family fun activity in a safe and welcoming community. It will also benefit our multicultural churches as they participate in this event. We are positioned well on Park terrace clearly visible to the local community and hope that they will take this opportunity to enjoy a time of Christmas celebration suitable for all ages.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Support for the Project or Event

Demonstrate how the proposed project or event is supported by residents of the City of Salisbury and/or the wider community:

(include a list of key partners and/or stakeholders, community members and organisations that have been consulted, how and why they support the project or event and any other information that demonstrates support.

We have contacted our multicultural churches to join with us in this event. We have young families within our membership that will benefit from a family based activity. We have the Salisbury Primary School across the road who also would benefit from this event.

Attachments

☒ There are no attachments relating to Support for the Project or Event.

☐ The following documents are attached relating to Support for the Project or Event:

- 1.
- 2.
- 3.

Project or Event Management

Ongoing Projects or Events

Describe how the proposed project or event will be managed into the future:

(outline how you will ensure sustainability and achieve outcomes for the project or activity)

One-off Projects or Events

Describe how the proposed project or event will be managed:


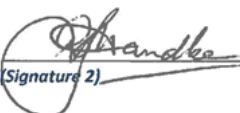
(outline how you will achieve outcomes for the project or activity)

We have a new and vibrant ministry team and recently employed a family Pastor to support intergenerational programs within our church and the wider community. We are a church with a vision of being a welcoming church with 'open doors' and look forward to future events that are beneficial to the local community.

We have a dedicated team to manage the event. We will assign volunteers to help with the BBQ, drinks, ice-creams, children's activities, carols & welcoming.

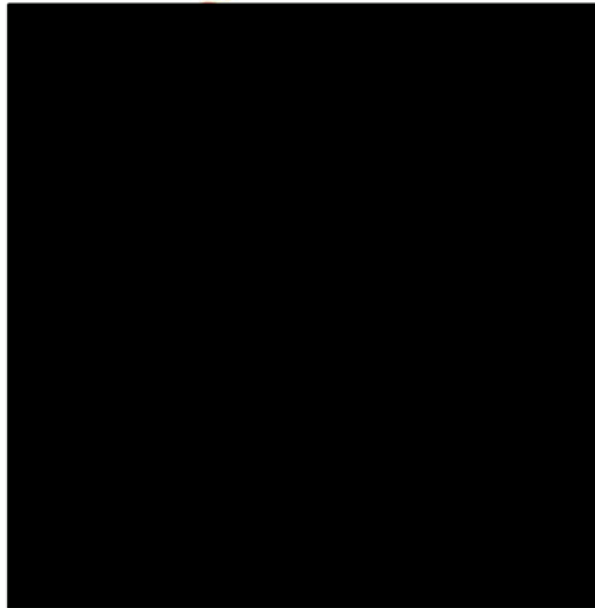
We will hold special meetings to make sure of a successful outcome.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Application Declaration	
<p>Please note that this declaration must be signed by two current senior office holders of the group/organisation (ie President, Secretary, Treasurer)</p>	
<p>Please read, tick the S1 and S2 boxes and sign:</p>	
S1	S2
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> I acknowledge that I am authorised to make this application on behalf of the Organisation.
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> I acknowledge that the information provided in this application is true and correct.
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> I acknowledge that our Organisation may be required to supply further information prior to consideration of this application by the City of Salisbury Community Grants Program.
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> I acknowledge that, should this Application be successful in obtaining Community Grant funding, our Organisation must complete the acquittal and reporting requirements as set out in the Acceptance of Community Grant – Form 1 and City of Salisbury Community Grants Program Guidelines and Eligibility Criteria.
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> I acknowledge that any changes in circumstances with regard to this Application must be notified in writing and the City of Salisbury Community Grants Program may request further information.
<p>On behalf of <u>Salisbury Uniting Church</u> (Group/Organisation)</p>	
<p>Cheryl Sachse / Treasurer (Name/Position)</p>	<p>Robert Handke / Chair Congregation (Name/Position)</p>
 (Signature 1)	 (Signature 2)
<p>13 October 2016 (Date)</p>	<p>13 October 2016 (Date)</p>
<p>Contact (phone number): [REDACTED]</p>	<p>Contact (phone number): [REDACTED]</p>

Both signatories will be contacted to verify the application - a contact phone number must be provided for each.
Your Application will **not** be submitted until contact and verification has occurred, **no exception**.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered



Dated 11/10/16

Date of function ~ December 18th 2016 ~ 630-830
Name of Business ~ **Salisbury Uniting Church**
59-61 Park Terrace, Salisbury SA

Fees and Conditions for Rainbow Animal Farm ~ Rainbow Pony Parties
Animal farm/2 hours = \$450
Pony and Donkey/2 hours = \$650
Total = \$1,100

We are not registered for GST.
Payment details ...



Signed ~ 

We hope you enjoyed your function and wish you all the best for the future

Woolworths Mawson Lakes

corner University Pde & Main Street,
Mawson Lakes South Australia 5095

ABN: 88 000 014 675

Coca-cola Lift Lemon Cans
24x375ml pack

DRINKS



3x \$19.00 = \$57.00



Schweppes Lemonade Can
24x375ml pack \$22.10
3x\$22.10= \$66.30



Kirks Lemonade Sugar Free Cans
10x375ml pack
3 x \$6.50 = \$19.50



Schweppes Pepsi Max Cans
24x375ml

4 x \$22.10 = \$88.40

Total drinks:\$231.20



Woolworths Mawson Lakes

corner University Pde & Main Street,
Mawson Lakes South Australia 5095

ABN: 88 000 014 675

BBQ

Homebrand Mixed Thin Sausages
1.8kg

~~\$8.00~~ \$4.44 / 1KG

20 x \$8.00 = \$160.00



Woolworths Select Onions Sliced
500g

TOTAL: 5 x \$2.10 = \$10.50



Bulla Ice Cream Bars Choc Malt Choc Mint Vanilla
10pk 768ml

30 x \$6.15 = \$184.50



We print to 500gsm Canvas Weave Vinyl.
Promo Banners are suitable for short to medium term use, they feature a lower resolution print with welded edges and eyelets.
Premium Banners offer our highest quality material and print, finished with sewn edges and eyelets (as pictured).

	PROMO	PREMIUM
	Lower Resolution	Hi Res Hi Grade Vinyl
1m x 1m	\$79 + GST	\$99 + GST
2m x 1m	\$109 + GST	\$139 + GST
3m x 1m	\$149 + GST	\$179 + GST
4m x 1m	\$189 + GST	\$219 + GST

Lead times:

Promo 10 - 14 days

Premium 5 - 7 days

Fast Track 3 - 5 days (additional costs will be incurred)



ITEM	7.2.8
	SPORT, RECREATION AND GRANTS COMMITTEE
DATE	14 November 2016
HEADING	36/2016: The Burton Community Centre Inc. - Community Grants Program Application
AUTHOR	Bronwyn Hatswell, PA to General Manager, Community Development
CITY PLAN LINKS	3.4 Be a proud, accessible and welcoming community.
SUMMARY	The Burton Community Centre Inc. Application is submitted to the Sport, Recreation and Grants Committee for consideration.

RECOMMENDATION

1. It be noted that, in accordance with delegated powers set out in the endorsed Terms of Reference, the Sport, Recreation and Grants Committee assessed and allocated funding for the November 2016 round of Community Grants as follows:
 - a. Grant No. 36/2016: The Burton Community Centre Inc. be awarded the amount of **\$2,500.00** to assist with the purchase of visitor chairs, trestle tables and chair trolley as outlined in the Community Grant Application.

ATTACHMENTS

This document should be read in conjunction with the following attachments:

1. 36/2016: The Burton Community Centre Inc. - Application

1. BACKGROUND

- 1.1 The Burton Community Centre Inc. received \$1,947 Community Grants Program funding in November 2015 to assist with the purchase of computers, computer desks and software for the Building Digital Literacy project.

2. CONSULTATION / COMMUNICATION

- 2.1 Internal
 - 2.1.1 GMCD

3. REPORT

- 3.1 The Burton Community Centre Inc. Application meets the eligibility criteria for the upper limit Community Grants Program funding.

4. CONCLUSION / PROPOSAL

- 4.1 The Burton Community Centre Inc. Application is submitted for consideration by the Sport, Recreation and Grants Committee.

CO-ORDINATION

Officer: EXECUTIVE GROUP
Date: 08/11/2016



Community Grants Program Application Form

Applications for Community Grants must be received by the 15th of each month to be assessed by the Sport, Recreation and Grants Committee the following month (i.e. an application received by the 15th of February will be assessed at the March Meeting).

Please ensure you have read and understood the City of Salisbury Community Grants Program Guidelines and Eligibility Criteria document prior to completing an Application.



City of Salisbury
The Living City

live it up

Application Eligibility Checklist		
Is the Funding For:	Yes	No
• Money already spent?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Salaries (initial or ongoing)? <i>Payment of facilitator or contractor engaged specifically to deliver program / activity under the grant may be considered</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Recurrent administration costs?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Capital development (e.g. renovations or building changes that will be permanently part of the structure)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Upgrading facilities which belong to Local, State or Commonwealth Governments?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Application from Public / Private Schools?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• An organisation trading as a sole trader/individual?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• A group that is a non-incorporated body and does not have a parent incorporated body or is not endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not-for-profits Commission?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have previously received funding and NOT fulfilled reporting obligations, including provision of post event evaluation/report and financial acquittal?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have received Community Grants Program funding from the City of Salisbury within the past twelve (12) months.	<input checked="" type="checkbox"/>	<input type="checkbox"/>

*If you have answered **YES** to any of these questions,
this application is **NOT** eligible for grant funding.*

*to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered***

Applicant Organisation Information	
1. GROUP / ORGANISATION DETAILS	
Name:	Burton Community Centre
Address:	386 Waterloo Corner Road
Suburb:	Burton Postcode: 5110
2. CONTACT PERSON DETAILS (this is the address that all correspondence will be sent)	
Name:	Mrs Christine Macfarlan
Title (your role with the group/organisation):	Community Development Coordinator
Address:	386 Waterloo Corner Road, Burton SA 5110
Phone:	Landline: XXXXXXXXXX Mobile: XXXXXXXXXX
Email:	XXXXXXXXXX@XXXXXX.XX
3. COMMUNITY GRANT RESPONSIBILITY	
Name of Person Responsible for the Grant:	Mr Chad Buchanan
Title (role with the group/organisation):	Chair - Management Committee
4. GROUP / ORGANISATION MANAGEMENT DETAILS	
How is your group/organisation managed:	Management Committee
Is your organisation:	
a) Incorporated:	<div style="display: flex; justify-content: space-around;"> <div style="text-align: center;"> Yes <input checked="" type="checkbox"/> (go to question c) </div> <div style="text-align: center;"> No <input type="checkbox"/> (go to question b) </div> </div>
ASIC Registration Number:	
b) Operated under a Parent Organisation: (please state which parent organisation you operate under below AND attach a supporting letter from the organisation)	<div style="display: flex; justify-content: space-around;"> <div style="text-align: center;"> Yes <input type="checkbox"/> (go to question c) </div> <div style="text-align: center;"> No <input checked="" type="checkbox"/> (go to question c) </div> </div>
Parent Organisation	
Name:	
ASIC Registration Number:	

to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered**

Organisation Information (continued)		
c) Community/Non-Profit:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is your organisation endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not-for-profits Commission?	Yes <input checked="" type="checkbox"/> <i>(evidence must be attached to this application)</i>	No <input type="checkbox"/>
d) Government Funded: <i>(If Yes, please list funding source/s and purpose in part e & f)</i>	Yes <input checked="" type="checkbox"/> <i>(go to question e & f)</i>	No <input type="checkbox"/>
e) Funding source/s:	<i>Proportion DCSI Funding</i>	
f) Purpose:	<i>Salary and wages and small proportion of operational funds</i>	
g) Other (please specify):	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
5. BANKING INFORMATION		
<i>Your organisation must have its own Bank/Credit Union Account or similar</i>		
Full Account Name: <i>Burton Park Community House</i> <i>*do not provide account or BSB numbers*</i>	Financial Institution Name: [REDACTED] Branch Location: [REDACTED]	
6. REFEREE INFORMATION		
<i>Please provide the name and contact details of a referee – preferably someone who can verify the bona fide status of your group/organisation (NOT Members of the Committee)</i>		
Referee's Name:	<i>Jan Barletta</i>	
Referee's Contact Information:	[REDACTED]	

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

GST Declaration		
I agree upon signing of this document that I will provide Council with the following information in regards to my Australian Business Number and Goods and Services Tax registration status.		
Does your group/organisation have an ABN <i>(If Yes - Please Quote ABN:)</i> <u>1 9 3 6 0 6 3 1 4 2 6</u> <i>(If No, the ABN Declaration Form attached must be signed)</i>	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is your group/organisation registered for GST	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
NB: GST Registration <i>If your group IS registered for GST you are required to provide a Tax Invoice to Council before an approved grant amount can be provided to your organisation. The invoice must clearly state the words TAX INVOICE, Business Name, ABN and the approved grant amount including GST.</i>		

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 5 of 13

Project/Event Budget Information		
Will the project or event generate income (e.g. ticket sales, entry fee etc.)?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/> (enter '0' dollar amounts below)
If Yes, provide details:		
INCOME	\$ AMOUNT	
Project or event generated income:	\$ 2,500	
Organisation's contribution:	\$ 1,480	
Income received from other Grants: (list organisation(s) providing Grant funding and their contribution)		
Income received from sponsors: (list sponsor(s) and their contribution)		
Donations: (please specify the source, product or service and estimated amount of funding requested)		
Have you sought any other funding for the project: (please specify the source and amount of funding requested)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>From the Management Committee - Centre savings</i>	
TOTAL (including GST):	\$ 3,980	
What resources will you and your group contribute to the project e.g. in-kind donations, labour, time etc.?		
EXPENSES (specify the proposed expense budget by item:)	\$ AMOUNT	
<i>Chairs x black matrix sled 20</i>	\$ 1,620	
<i>Tables x timber metal frame 1800x750</i>	\$ 1,917	
<i>Trolley for chairs x 1</i>	\$ 81	
<i>GST</i>	\$ 362	
TOTAL (including GST):	\$ 3,980	

to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered**

Summary of Project/Event Information	
Is the funding for: <i>(please tick which is applicable)</i>	<input type="checkbox"/> Event <input type="checkbox"/> Project <input checked="" type="checkbox"/> Ongoing <input type="checkbox"/> New Group
Name of Project/Event Requiring Funding	<i>Centre upgrade of tables and chairs</i>
Date(s) of Project/Event <i>(if ongoing please state "ongoing")</i>	<i>ongoing</i>
Total cost of Project/Event	<i>\$ 3,980</i>
Amount of Community Grant Funding Requested	<i>\$ 2,500</i>
Is there any other information that you may feel is relevant to your application?	<p><i>The centre has not upgraded its tables and chairs since its inception 26 years ago. Tables are very heavy for participants to manage setting up and are difficult to open. There have been a couple of incidences of participants dropping tables on toes and their age is causing WH&S concerns. Alternate arrangements for set up for some groups has been instigated but this does not negate the age and condition of the tables is now very average. With increased bookings to the centre it is deemed necessary to upgrade for the future growth of the centre.</i></p> <p><input type="checkbox"/> There are no relevant attachments.</p> <p><input checked="" type="checkbox"/> There are relevant attachments and the following documents are attached:</p> <ol style="list-style-type: none"> <i>1. Letter of support from two of our regular hirers</i> <i>2.</i>
Which category best describes your project/event? <i>(please check all that apply)</i>	
Health	<input type="checkbox"/>
Establishment of a new group	<input type="checkbox"/>
Education and Training	<input checked="" type="checkbox"/>
Culture / Arts	<input type="checkbox"/>
Sport / Recreation	<input checked="" type="checkbox"/>
Environment	<input type="checkbox"/>
Disability	<input type="checkbox"/>
Youth	<input type="checkbox"/>
Crime Prevention	<input type="checkbox"/>
Aged	<input checked="" type="checkbox"/>

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Project/Event Details	
Previous Community Grants Program Funding	
Has your Organisation previously received a Community Grant? (If Yes – when, amount granted and what the grant was for:)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (go to Group/Organisation Information)
When was the Grant funding received (month & year):	November 2015
What amount of Grant funding was provided:	\$ 1,770
When was the previous Grant acquitted (month & year):	May 2016
Group/Organisation Information	
Group/Organisation Name	Burton Community Centre
Group/Organisation Description	Not for profit community service organisation
Group/Organisation Registered Address	Number/Street: 386 Waterloo Corner Road Suburb: Burton Postcode: 5110
Is the Club Incorporated?	yes
Number of Members	6 management/committee members and 8 volunteers
% of Membership that reside in the City of Salisbury	60 %
Project/Event Details	
Project/Event Name	Upgrade of tables and chairs
Project/Event Summary	UPgrade of resources for hiring of facilities
Date(s) of Project/Event	ongoing
Location of Project/Event:	Number/Street: 386 Waterloo Corner Road Suburb: Burton Postcode: 5110
How will the Project/Event benefit the residents of the City of Salisbury?	All participants of the centre will have safe tables and chairs to utilise
How many individuals will benefit from the Project/Event?	100 100% users
% of project/event participants that reside in the City of Salisbury	70 %
If it is an Event, is it open to the public?	No All participant hirers will receive the benefit of new resources
How will the Project/Event be promoted?	through our newsletter and daily participant hiring

to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered**

Grant Money Requested	
Amount Requested	\$ 2,500
Itemised Breakdown of Costs:	
<i>An itemised breakdown of costs must be provided. Please attach a separate sheet if there is insufficient space.</i>	
Chairs	\$ 1,620
Tables	\$ 1,917
Trolley for chairs	\$ 81
GST	\$ 361
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
TOTAL (including GST):	\$ 3,979
Quote Attached: <i>A detailed, current quote <u>must</u> be provided with the application.</i>	<input checked="checked" type="checkbox"/> Yes <input type="checkbox"/> No <i>(please refer to the City of Salisbury Guide to completing the Community Grants Program Application Form)</i>

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Project or Event Scope

Provide a description of the proposed project or event:

The Burton Community Centre has not replaced the tables and chairs at the centre in 26 years of its opening. The current tables and chairs are very old and worn and some tables are now being taken out of use for safety reasons. Chairs are uncomfortable for the age of a good majority of our participants and hirers and for the benefit of promoting and securing more bookings into the future it would be beneficial to upgrade these resources. As it is we are beginning to have to decrease the numbers into our hall for weekend hirers as we dont have enough tables for the size of the room. Therefore participants/hirers are currently disadvantaged.

Attachments

- ☒ There are no attachments relating to the Project or Event Scope.
- ☐ The following documents are attached relating to the Project or Event Scope:
- 1.
 - 2.
 - 3.

Benefits and Outcomes of the Project or Event

Provide a description of the benefits and outcomes of the proposed project or event to the residents of the City of Salisbury and/or the wider community:

The centre hirers and participants would benefit from new tables and chairs that are modern and new enabling easier set up of their events and activities. ALL participants of the centre will have access to the new tables and chairs and this will promote increased comfort and ease of use of tables. Being new this enhances on the buildings condition and uptodate facilities which promotes and assists in future growth of the centre.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Support for the Project or Event

Demonstrate how the proposed project or event is supported by residents of the City of Salisbury and/or the wider community:

(include a list of key partners and/or stakeholders, community members and organisations that have been consulted, how and why they support the project or event and any other information that demonstrates support.

The Scrapbooking and Child Protection Services hirers have signed a letter of support indicating the centres focus to make our hirers and participants comfortable and able to utilise safe and easy to use resources for the benefit of their activities and services.

Other stakeholders/participants who have an increased need for upgrade of such resources is our elderly Quilting Group which maximum age attendance of 83 years. This group has been attending the centre for some 20 years and the centre values the contribution they bring to not only the centre but the community for inclusiveness, socialisation and friendship through their group. They bring cushions and pillows currently to sit on, while using our chairs and have had a couple of accidents attempting to unfold our old and worn tables.

Attachments

- ☒ There are no attachments relating to Support for the Project or Event.
- ☐ The following documents are attached relating to Support for the Project or Event:
- 1.
 - 2.
 - 3.

Project or Event Management

Ongoing Projects or Events

Describe how the proposed project or event will be managed into the future:
(outline how you will ensure sustainability and achieve outcomes for the project or activity)

One-off Projects or Events

Describe how the proposed project or event will be managed:
(outline how you will achieve outcomes for the project or activity)

The new tables and chairs would be placed in immediate use for all participants and hall hirers to benefit from. Our weekly participants being the more elderly will be the first to benefit from the new equipment and weekend party hirers who dont seem to have difficulty unfolding tables can continue to utilise the older tables.

The older chairs are still in working order, just old and will continue to be utilised by our weekend party hirers.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Application Declaration

Please note that this declaration must be signed by two current senior office holders of the group/organisation (ie President, Secretary, Treasurer)

Please read, tick the S1 and S2 boxes and sign:

S1 S2

- ☒ ☒ I acknowledge that I am authorised to make this application on behalf of the Organisation.
- ☒ ☒ I acknowledge that the information provided in this application is true and correct.
- ☒ ☒ I acknowledge that our Organisation may be required to supply further information prior to consideration of this application by the City of Salisbury Community Grants Program.
- ☒ ☒ I acknowledge that, should this Application be successful in obtaining Community Grant funding, our Organisation must complete the acquittal and reporting requirements as set out in the Acceptance of Community Grant – Form 1 and City of Salisbury Community Grants Program Guidelines and Eligibility Criteria.
- ☒ ☒ I acknowledge that any changes in circumstances with regard to this Application must be notified in writing and the City of Salisbury Community Grants Program may request further information.

On behalf of Burton Community Centre (Group/Organisation)

Chris Macfarlan, / Coordinator
(Name/Position)

and

Kelly Werful / Treasurer
(Name/Position)


(Signature 1)


(Signature 2)

12 October 2016
(Date)

12 October 2016
(Date)

Contact (phone number): [REDACTED]

Contact (phone number): [REDACTED]

Both signatories will be contacted to verify the application – a contact phone number must be provided for each.
Your Application will **not** be submitted until contact and verification has occurred, **no exception**.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered



Declaration Where No Australian Business Number is Required

I hereby certify that I am not required under the New Taxation System to hold an Australian Business Number (ABN), as I am not carrying out an enterprise under the New Tax System definition.

I am providing my services as:

	Yes	No
A private recreational pursuit or hobby	<input type="checkbox"/>	<input checked="" type="checkbox"/>
As an individual without a reasonable expectation of profit or gain	<input type="checkbox"/>	<input checked="" type="checkbox"/>

As such the Council is not obliged to withhold 48.5% from payments made to me.


I confirm that the above declaration is valid for all payments made by Council to our organisation. Should the situation change and I am required to hold an Australian Business Number, I will notify Council immediately.

Burton Community Centre

(Group/Organisation)

Chris Macfarlan, Coordinator

(Name/Position)



(Signature)

12 October 2016

(Date)

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 13 of 13

City of Salisbury
Community Grant Funding
12 James Street
Salisbury SA 5108

To Whom It May Concern

As a group of stakeholders who all participate in hiring facilities at the Burton Community Centre we would like to support the centre as they apply for funding for upgrade of tables and chairs.

Scrapbooking and Quilting Programs need quality, strong, tables to utilise during our hire as we have heavy equipment being used on them as well as lots of movement on the table as we sew and clip material to tables and pin and cut out patterns and manoeuvre materials to suit our needs at the time.

The tables at Burton Community Centre were once great tables that were strong and sturdy and supported our needs as community groups. We would set the room up as we require with tables and chairs and start our day. However over time these tables have now become difficult to open and at times hurt our fingers as we try to open them, they are tight and locked with wear and more elderly participants hurt and tear their hands as they force open the locking mechanisms. This is now a Work place Health and Safety issue.

The Centre has decommissioned approximately 4 tables recently due to the risks of their continued use. Which now leaves our groups short for the amount of tables we need to comfortably set up for our programs.

We the undersigned support the application for community grant to assist the Management Committee to fund the purchase of new tables and chairs, and the Coordinator has advised us that the Management Committee are also contributing an amount to the purchase, so as we have the tables we need to continue with the numbers in our groups as well are in secure in the knowledge that the tables are sturdy and strong and suitable for our needs.

The Centre has been trying hard to meet our needs as best they can with the limited resources they have had and we notice the improvements they are trying to make in and around the centre for the growth and development they are aiming for, which will only benefit future business into the centre.

Yours Sincerely



Scrapbooking Group

Child Protection Services

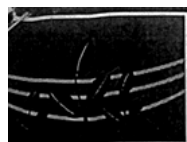
29th September 2016

QUOTE

Burton Community Centre

Date
18 Aug 2016Quote Number
QU-0001

Description	Quantity	Unit Price	Discount	GST	Amount AUD
Deliver to					
386 Waterloo Corner Road Burton SA 5110					
Matrix Sled Base Visitor Chair Colour: Black	20.00	90.00	10.00%	10%	1,620.00
Eclipse Trestle Table. Timber Top-Metal Frame Size: 1800x750 Colour: TBA	12.00	168.18	5.00%	10%	1,917.27
Adam, Focus Chair Trolley	1.00	80.91		10%	80.91
Subtotal (includes a discount of 280.91)					3,618.18
TOTAL GST 10%					361.82
TOTAL AUD					3,980.00



Burton Community Centre

386 Waterloo Corner Road, Burton | T: 8280 8843

The Burton Community Centre Inc. Management Committee

Minutes

Wednesday 7th September 2016

6.30 pm

Burton Community Centre, 386 Waterloo Corner Road, Burton

1. Welcome

Chairperson Chad Buchanan welcomed all members and opened the meeting at 6:30pm.

2. Present/Apologies

Present: Chad Buchanan (Chairperson), Alex Coates (Secretary), Christine MacFarlan (Neighbourhood Development Co-ordinator, Donna Proleta, Kelly Werfel (Treasurer),

Apologies: Melissa Gray (Centre Support Officer), Julie Woodman, Maninderbir Singh

Absent: Nil

Guests:

3. Review Previous Minutes:

Minutes unavailable

4. Business Arising

Nil.

5. Introduction of Guests



A Community Growing Together



Burton Community Centre

386 Waterloo Corner Road, Burton | T: 8280 8843

Moved: Kelly Werfel

Seconded: Donna Proleta

Carried

0.4 Holden Jobs Fair

0.5 Staff Hall Hire

Motion:

- 1.
- 2.
- 3.

Moved: Chad Buchanan

Seconded: Donna Proleta

Carried

10.6 New Main Hall Tables

Chris advised that a quote \$3,980 had been received to supply 24 chairs, 12 tables and 1 chair stack.

The committee discussed options for funding the new tables and chairs. It was decided that staff would look at the possibility of an application to the City of Salisbury's Sport and Recreation grants program for a Community Grant of \$2,500. This would leave the centre paying the remaining \$1,470.

Motion:

1. The Management Committee request staff to draft an application to the City of Salisbury grant program for \$2,500 for new tables and chairs.

Moved: Chad Buchanan

Seconded: Donna Proleta

Carried Unanimously



A Community Growing Together



Australian
Charities and
Not-for-profits
Commission

ACNC Charity Register Summary

Burton Community Centre Incorporated

Charity Details	
Name	Burton Community Centre Incorporated
Other Name	
Charity ABN	<u>19360631426</u>
Charity Address for Service	burtoncomcentre@gmail.com
Charity Street Address	Burton Community Centre 386 Waterloo Corner Rd Burton SA 5110 AUSTRALIA
Website	
E-Mail	burtoncomcentre@gmail.com
Phone	

Using the information on the Register

Information on this Register has been provided to the ACNC by the charity or transferred from the Australian Taxation Office (ATO) and the Australian Business Register (ABR). If information is not shown, this may be because the charity has not yet provided the information or because the ACNC is progressively confirming and uploading information received. The ACNC may also approve information be withheld from the Register in certain circumstances. The Register will be updated over time as we work through the information received and any applications for information to be withheld. Read more about [information on the Register](#).

acnc.gov.au

7/21/2015 1:29:47 PM

ITEM	7.2.9
	SPORT, RECREATION AND GRANTS COMMITTEE
DATE	14 November 2016
HEADING	37/2016: Mawson Lakes Photography Club Inc. - Community Grants Program Application
AUTHOR	Bronwyn Hatswell, PA to General Manager, Community Development
CITY PLAN LINKS	3.4 Be a proud, accessible and welcoming community.
SUMMARY	The Mawson Lakes Photography Club Inc. Application is submitted to the Sport, Recreation and Grants Committee for consideration.

RECOMMENDATION

1. It be noted that, in accordance with delegated powers set out in the endorsed Terms of Reference, the Sport, Recreation and Grants Committee assessed and allocated funding for the November 2016 round of Community Grants as follows:
 - a. Grant No. 37/2016: Mawson Lakes Photography Club Inc. be awarded the amount of **\$2,500.00** to assist with the purchase of a projector, projection screen, anti-theft projector mount and wireless LAN adaptor for ongoing use as outlined in the Community Grant Application.

ATTACHMENTS

This document should be read in conjunction with the following attachments:

1. 37/2016: Mawson Lakes Photography Club Inc. - Application
2. 37/2016: Mawson Lakes Photography Club Inc. - Additional Information

1. BACKGROUND

- 1.1 The Mawson Lakes Photography Club Inc. has not received prior Community Grants Program funding.

2. CONSULTATION / COMMUNICATION

- 2.1 Internal
 - 2.1.1 GMCD

3. REPORT

- 3.1 The Mawson Lakes Photography Club Inc. Application meets the eligibility criteria for the upper limit Community Grants Program funding.

4. CONCLUSION / PROPOSAL

- 4.1 The Mawson Lakes Photography Club Inc. Application is submitted for consideration by the Sport, Recreation and Grants Committee.

CO-ORDINATION

Officer: EXECUTIVE GROUP
Date: 08/11/2016

Community Grants Program Application Form

Applications for Community Grants must be received by the 15th of each month to be assessed by the Sport, Recreation and Grants Committee the following month (i.e. an application received by the 15th of February will be assessed at the March Meeting).

Please ensure you have read and understood the City of Salisbury Community Grants Program Guidelines and Eligibility Criteria document prior to completing an Application.

Application Eligibility Checklist		
Is the Funding For:	Yes	No
• Money already spent?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Salaries (initial or ongoing)? <i>Payment of facilitator or contractor engaged specifically to deliver program / activity under the grant may be considered</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Recurrent administration costs?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Capital development (e.g. renovations or building changes that will be permanently part of the structure)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Upgrading facilities which belong to Local, State or Commonwealth Governments?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Application from Public / Private Schools?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• An organisation trading as a sole trader/individual?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• A group that is a non-incorporated body and does not have a parent incorporated body or is not endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not- for- profits Commission?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have previously received funding and NOT fulfilled reporting obligations, including provision of post event evaluation/report and financial acquittal?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have received Community Grants Program funding from the City of Salisbury within the past twelve (12) months.	<input type="checkbox"/>	<input checked="" type="checkbox"/>

*If you have answered **YES** to any of these questions,
this application is **NOT** eligible for grant funding.*

*to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered***

Community Grant Application - Page 2 of 13

Applicant Organisation Information		
1. GROUP / ORGANISATION DETAILS		
Name:	Mawson Lakes Photography Club	
Address:	Mawson Centre	
Suburb:	Mawson Lakes	Postcode:
2. CONTACT PERSON DETAILS (this is the address that all correspondence will be sent)		
Name:	Ms Alison Attwood	
Title (your role with the group/organisation):	Club President	
Address:	[REDACTED]	
Phone:	Landline: Mobile: [REDACTED]	
Email:	mlpcpresident@gmail.com	
3. COMMUNITY GRANT RESPONSIBILITY		
Name of Person Responsible for the Grant:	Mrs Jackie Allender	
Title (role with the group/organisation):	Club Secretary	
4. GROUP / ORGANISATION MANAGEMENT DETAILS		
How is your group/organisation managed:	Government by a Constitution	
Is your organisation:		
a) Incorporated:	Yes <input checked="" type="checkbox"/> (go to question c)	No <input type="checkbox"/> (go to question b)
ASIC Registration Number:		
b) Operated under a Parent Organisation: <i>(please state which parent organisation you operate under below AND attach a supporting letter from the organisation)</i>	Yes <input type="checkbox"/> (go to question c)	No <input checked="" type="checkbox"/> (go to question c)
Parent Organisation		
Name:		
ASIC Registration Number:		

to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered**

Organisation Information (continued)		
c) Community/Non-Profit:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is your organisation endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not-for-profits Commission?	Yes <input type="checkbox"/> <i>(evidence must be attached to this application)</i>	No <input checked="" type="checkbox"/>
d) Government Funded: <i>(If Yes, please list funding source/s and purpose in part e & f)</i>	Yes <input type="checkbox"/> (go to question e & f)	No <input checked="" type="checkbox"/>
e) Funding source/s:	<i>Membership Fee Based/Fundraising</i>	
f) Purpose:	<i>Teaching, social, for anyone interested in photography, supports all levels</i>	
g) Other (please specify):	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
5. BANKING INFORMATION		
<i>Your organisation must have its own Bank/Credit Union Account or similar</i>		
Full Account Name: <i>Mawson Lakes Photography Club Inc</i> <i>*do not provide account or BSB numbers*</i>	Financial Institution Name: [REDACTED] Branch Location: [REDACTED]	
6. REFEREE INFORMATION		
<i>Please provide the name and contact details of a referee – preferably someone who can verify the bona fide status of your group/organisation (NOT Members of the Committee)</i>		
Referee's Name:	<i>Helen Whitfield - SAPF Secretary</i>	
Referee's Contact Information:	<i>secretary@sapf.org.au</i> [REDACTED]	

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

GST Declaration		
I agree upon signing of this document that I will provide Council with the following information in regards to my Australian Business Number and Goods and Services Tax registration status.		
Does your group/organisation have an ABN <i>(If Yes - Please Quote ABN:)</i> ----- <i>(If No, the ABN Declaration Form attached must be signed)</i>	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Is your group/organisation registered for GST	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
NB: GST Registration <i>If your group IS registered for GST you are required to provide a Tax Invoice to Council before an approved grant amount can be provided to your organisation. The invoice must clearly state the words TAX INVOICE, Business Name, ABN and the approved grant amount including GST.</i>		

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 5 of 13

Project/Event Budget Information	
Will the project or event generate income (e.g. ticket sales, entry fee etc.)?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (enter '0' dollar amounts below)
If Yes, provide details:	
INCOME	\$ AMOUNT
Project or event generated income:	
Organisation's contribution:	
Income received from other Grants: (list organisation(s) providing Grant funding and their contribution)	0.00
Income received from sponsors: (list sponsor(s) and their contribution)	0.00
Donations: (please specify the source, product or service and estimated amount of funding requested)	0.00
Have you sought any other funding for the project: (please specify the source and amount of funding requested)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
TOTAL (including GST):	0
What resources will you and your group contribute to the project e.g. in-kind donations, labour, time etc.?	<i>Volunteers on the Committee, dedicated individuals of surrounding Clubs, will be donating their time to provide education, training and Social experience to members and the wider community.</i>
EXPENSES (specify the proposed expense budget by item:)	\$ AMOUNT
<i>LG MiniBeam Full HD LED 3D Ready Projector</i>	1999
<i>Nobo 2000x1513mm Tripod Projection Screen</i>	320
<i>Espon Wireless LAN Adaptor</i>	140
<i>Brateck PRB11 Anti Theft Bracket</i>	49
<i>Total</i>	2508
TOTAL (including GST):	0

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Summary of Project/Event Information	
Is the funding for: <i>(please tick which is applicable)</i>	<input type="checkbox"/> Event <input type="checkbox"/> Project <input checked="" type="checkbox"/> Ongoing <input type="checkbox"/> New Group
Name of Project/Event Requiring Funding	<i>Mawson Lakes Photography Club Ongoing Concern</i>
Date(s) of Project/Event <i>(if ongoing please state "ongoing")</i>	<i>Ongoing Concern</i>
Total cost of Project/Event	<i>0</i>
Amount of Community Grant Funding Requested	<i>2508</i>
Is there any other information that you may feel is relevant to your application?	<i>Mawson Lakes Photography Club strives to improve the skills of interested persons in Photography, provide a safe and exciting program for Community Members, our Members have since inception participated free of charge to Salisbury Council run events and Mawson Lakes Community Events and provided images free of charge.</i>
<input checked="" type="checkbox"/> There are no relevant attachments.	<input type="checkbox"/> There are relevant attachments and the following documents are attached: 1. 2.
Which category best describes your project/event? <i>(please check all that apply)</i>	
Health	<input type="checkbox"/>
Establishment of a new group	<input type="checkbox"/>
Education and Training	<input checked="" type="checkbox"/>
Culture / Arts	<input checked="" type="checkbox"/>
Sport / Recreation	<input checked="" type="checkbox"/>
Environment	<input checked="" type="checkbox"/>
Disability	<input type="checkbox"/>
Youth	<input type="checkbox"/>
Crime Prevention	<input type="checkbox"/>
Aged	<input type="checkbox"/>

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Project/Event Details	
Previous Community Grants Program Funding	
Has your Organisation previously received a Community Grant? <i>(If Yes – when, amount granted and what the grant was for:)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(go to Group/Organisation Information)</i>
When was the Grant funding received (month & year):	
What amount of Grant funding was provided:	
When was the previous Grant acquitted (month & year):	
Group/Organisation Information	
Group/Organisation Name	<i>Mawson Lakes Photography Club</i>
Group/Organisation Description	<i>Providing Education/Training/Social Activities to Members</i>
Group/Organisation Registered Address	Number/Street: <i>2-8 Main Street</i> Suburb: <i>Mawson Lakes</i> Postcode:
Is the Club Incorporated?	<i>yes</i>
Number of Members	<i>36</i>
% of Membership that reside in the City of Salisbury	<i>90 %</i>
Project/Event Details	
Project/Event Name	<i>Mawson Lakes Photography Club Ongoing Concern</i>
Project/Event Summary	<i>Ongoing Concern</i>
Date(s) of Project/Event	<i>Ongoing</i>
Location of Project/Event:	Number/Street: <i>2-8 Main Street</i> Suburb: <i>Mawson Lakes</i> Postcode:
How will the Project/Event benefit the residents of the City of Salisbury?	<i>Our Members actively participate in City of Salisbury Run Community Events, providing free of charge photographers and images</i>
How many individuals will benefit from the Project/Event?	<i>100+</i>
% of project/event participants that reside in the City of Salisbury	<i>90 %</i>
If it is an Event, is it open to the public?	<i>No yes when Community Based Events</i>
How will the Project/Event be promoted?	<i>Community Event presence, advertising in Mawson Lakes Centre</i>

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Grant Money Requested	
Amount Requested	\$ 0
Itemised Breakdown of Costs: <i>An itemised breakdown of costs must be provided. Please attach a separate sheet if there is insufficient space.</i>	
LG MiniBeam Full HD LED 3D Ready Projector	\$ 1999
Nobo 2000x1513mm Tripod Projection Screen	\$ 320
Espon Wireless LAN Adaptor	\$ 140
Brateck PRB11 Anti Theft Bracket	\$ 50
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
TOTAL	\$ 2508
TOTAL (including GST):	\$ 0
Quote Attached: <i>A detailed, current quote <u>must</u> be provided with the application.</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(please refer to the City of Salisbury Guide to completing the Community Grants Program Application Form)</i>

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Project or Event Scope

Provide a description of the proposed project or event:

Mawson Lakes Photography Club, provides meetings twice a month to members with an open invitation to people wanting to join a Photography Club, we provide educational and training sessions ranging from basic to advance techniques, we provide knowledgeable and experienced guest speakers.

The Club has been established for approximately 4 years, and prides its on its Community involvement actively promoting Community Events run by the Salisbury Council, and Mawson Lakes Centre. Our Members participate in these events, providing their services free of charge, which includes, their time, equipment, skills and images.

These items will enable the club to promote itself and its members, at Community Events, and therefore Promote the Events indirectly. Members will benefit greatly by the Club being able to use this equipment in the monthly educational meetings, currently we are relying on Members equipment which is not ideal.

Attachments

- ☒ There are no attachments relating to the Project or Event Scope.
- ☐ The following documents are attached relating to the Project or Event Scope:
- 1.
 - 2.
 - 3.

Benefits and Outcomes of the Project or Event

Provide a description of the benefits and outcomes of the proposed project or event to the residents of the City of Salisbury and/or the wider community:

Benefits to the residents of the City of Salisbury and the wider community is as follows;

- 1. Membership base is predominately City of Salisbury Residents and more specific Mawson Lakes vicinity.*
- 2. Our aim is to provide a safe and friendly environment for interested person's of all levels of photography to meet twice a month at the Mawson Lakes Centre for social and educational purposes.*
- 3. The Club is affiliated with the South Australian Photographers Federation (SAPF), who provides guidance and expertise in running all Camera Clubs Professionally, they provide details of experienced and well knowledge individuals who we are able to guide our Membership base by providing guest speakers in particular fields. The Club undertakes field trips, education nights, we encourage our Members to provide their photography skills, free of charge to the City of Salisbury Council run Events, and any adhoc events that the Council request of us.*

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Support for the Project or Event

Demonstrate how the proposed project or event is supported by residents of the City of Salisbury and/or the wider community:

(include a list of key partners and/or stakeholders, community members and organisations that have been consulted, how and why they support the project or event and any other information that demonstrates support.

Mawson Lakes Photography Club encourage Members to participate in all Community run events, ask that they use their photography skills, free of charge to the City of Salisbury Council, and any wider Community requests including the Mawson Lakes Centre.

The Club provides continual training and education to all members, Members demonstrate their skills at Community Events, Exhibit their work.

The residents of the City of Salisbury and the wider Community are exposed to the skills of our Members, are invited to Join and participate, are made aware of Community Events by our Members Images, the Club is open to all interested parties and with any level of skills.

Attachments

☒ There are no attachments relating to Support for the Project or Event.

☐ The following documents are attached relating to Support for the Project or Event:

- 1.
- 2.
- 3.

Project or Event Management

Ongoing Projects or Events

Describe how the proposed project or event will be managed into the future:

(outline how you will ensure sustainability and achieve outcomes for the project or activity)

One-off Projects or Events

Describe how the proposed project or event will be managed:

(outline how you will achieve outcomes for the project or activity)

The Club Committee is dedicated to providing a diverse program for all participants, learning new skills, helping others, exposure to community events and guest speakers, The requested items will enable the Club to deliver the services to its members and wider Community.

The Club is under a Constitution and is also affiliated with the South Australian Photography Federation, we have an Elected Committee, run Committee Meetings with appropriate records, the items would become Mawson Lakes Photography Club property, listed as assets and recorded correctly.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Application Declaration

Please note that this declaration must be signed by two current senior office holders of the group/organisation (ie President, Secretary, Treasurer)

Please read, tick the **S1** and **S2** boxes and sign:

S1 **S2**

- ☐ ☒ I acknowledge that I am authorised to make this application on behalf of the Organisation.
- ☐ ☒ I acknowledge that the information provided in this application is true and correct.
- ☐ ☒ I acknowledge that our Organisation may be required to supply further information prior to consideration of this application by the City of Salisbury Community Grants Program.
- ☐ ☒ I acknowledge that, should this Application be successful in obtaining Community Grant funding, our Organisation must complete the acquittal and reporting requirements as set out in the Acceptance of Community Grant – Form 1 and City of Salisbury Community Grants Program Guidelines and Eligibility Criteria.
- ☐ ☒ I acknowledge that any changes in circumstances with regard to this Application must be notified in writing and the City of Salisbury Community Grants Program may request further information.

On behalf of _____ (Group/Organisation)

(Name/Position)

/

and

(Name/Position)

/

(Signature 1)

(Signature 2)

(Date)

(Date)

Contact (phone number):

Contact (phone number):

**Both signatories will be contacted to verify the application - a contact phone number must be provided for each.
Your Application will **not** be submitted until contact and verification has occurred, **no exception**.**

*to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered***



Declaration Where No Australian Business Number is Required

I hereby certify that I am not required under the New Taxation System to hold an Australian Business Number (ABN), as I am not carrying out an enterprise under the New Tax System definition.

I am providing my services as:

	Yes	No
A private recreational pursuit or hobby	<input checked="" type="checkbox"/>	<input type="checkbox"/>
As an individual without a reasonable expectation of profit or gain	<input type="checkbox"/>	<input type="checkbox"/>

As such the Council is not obliged to withhold 48.5% from payments made to me.

I confirm that the above declaration is valid for all payments made by Council to our organisation. Should the situation change and I am required to hold an Australian Business Number, I will notify Council immediately.

(Group/Organisation)

(Name/Position)

(Signature)

(Date)

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 13 of 13

From: Mawson Lakes [mlpcsecretary@gmail.com]
Sent: Wednesday, 26 October 2016 2:49:07 PM
To: City of Salisbury; Mawson lakes
Subject: Fwd: COMMUNITY GRANT APPLICATION

Hello,

As per your letter requesting further information by today, please find attached the original email and attachments, with attached Committee meeting minutes and also signed page 12.

Any further information required please contact me on [REDACTED].

thanks

Jackie Allender
Secretary
Mawson Lakes Photography Club

----- Forwarded message -----
From: **Mawson Lakes** <mlpcsecretary@gmail.com>
Date: Fri, Oct 14, 2016 at 3:35 PM
Subject: COMMUNITY GRANT APPLICATION
To: city@salisbury.sa.gov.au

Hello,

Please find attached the application for the Community Grant, can you please confirm receipt by return email.

Also attached are the products supporting the application.

If any further information is required, please contact me on [REDACTED]

Jackie Allender
Secretary
Mawson Lakes Photography Club

Mawson Lakes Photography Club

Meeting Minutes
13th October 2016

Opening

The Committee meeting of the Mawson Lakes Photography Club was opened at 7.30pm on 13th October 2016 in Mawson Lakes Centre by Alison Attwood.

Present

Alison, Jackie, Rhonda, Chris, Yvonne, Peter, Vaughan, Alex

Apologies

Laura, Lesley

Approval of Agenda

The agenda was unanimously approved as distributed.

Approval of Minutes

Minutes of August committee Meeting approved by Peter/Chris

Open Issues

1. Grant update

- Projector/Screen/Adaptor/Anti-theft lock

Action: Jackie to submit Grant to Council

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Pages 2-4 have been redacted by CoS staff as information not relevant to this application

Mawson Lakes Photography Club

Meeting Minutes

11th August 2016

Opening

The Committee meeting of the Mawson Lakes Photography Club was opened at 7.30pm on 11th August 2016 in Mawson Lakes Centre by Alison Attwood.

Present

Alison, Jackie, Rhonda, Lesley, Chris, Yvonne, Peter, Vaughan, Alex

Apologies

Laura

Approval of Agenda

The agenda was unanimously approved as distributed.

Approval of Minutes

Minutes of July committee Meeting approved by Peter/Chris

Open Issues

1. Grant update

a) Review items on grant, review paperwork, – committee vote

- Max amount of grant \$2000
- Projector Epson, HP Laptop, Spider Calibration software, Windows Microsoft Office program, Banners x2, Photo-comp Software or possibility Lightroom/Creative Cloud

Action: Alison to email grant information and product details to committee, by Friday 26th August- response required by **All** 31st August

b) (vote passed) make any corrections -Sign Grant

Committee to respond to email from Alison by the 31st August

Action: All to respond to email

c) Grant to be submitted

- 2 Members to Sign Grant Application

Action: Vaughan, Alison, or Jackie to sign

[REDACTED]

[REDACTED]

[REDACTED]

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

[REDACTED]

[REDACTED]

- [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

- [REDACTED]
- [REDACTED]

Pages 3-5 have been redacted by CoS staff as information not relevant to this application

Application Declaration	
<p><i>Please note that this declaration must be signed by two current senior office holders of the group/organisation (ie President, Secretary, Treasurer)</i></p>	
<p>Please read, tick the S1 and S2 boxes and sign:</p>	
<p>S1 S2</p>	<p><input checked="" type="checkbox"/> <input checked="" type="checkbox"/> I acknowledge that I am authorised to make this application on behalf of the Organisation.</p> <p><input checked="" type="checkbox"/> <input checked="" type="checkbox"/> I acknowledge that the information provided in this application is true and correct.</p> <p><input checked="" type="checkbox"/> <input checked="" type="checkbox"/> I acknowledge that our Organisation may be required to supply further information prior to consideration of this application by the City of Salisbury Community Grants Program.</p> <p><input checked="" type="checkbox"/> <input checked="" type="checkbox"/> I acknowledge that, should this Application be successful in obtaining Community Grant funding, our Organisation must complete the acquittal and reporting requirements as set out in the Acceptance of Community Grant – Form 1 and City of Salisbury Community Grants Program Guidelines and Eligibility Criteria.</p> <p><input checked="" type="checkbox"/> <input checked="" type="checkbox"/> I acknowledge that any changes in circumstances with regard to this Application must be notified in writing and the City of Salisbury Community Grants Program may request further information.</p>
<p>On behalf of <u>Mawson Lakes Photography Club</u> (Group/Organisation)</p>	
<p><u>Aislinn Attwood, president</u> and</p> <p>(Name/Position)</p> <p><u>[Signature]</u></p> <p>(Signature 1)</p>	<p><u>Jackie Hildreth, Secretary</u></p> <p>(Name/Position)</p> <p><u>[Signature]</u></p> <p>(Signature 2)</p>
<p><u>24/10/16</u></p> <p>(Date)</p>	<p><u>24/10/16</u></p> <p>(Date)</p>
<p>Contact (phone number): [REDACTED]</p>	<p>Contact (phone number): [REDACTED]</p>

Both signatories will be contacted to verify the application - a contact phone number must be provided for each. Your Application will **not** be submitted until contact and verification has occurred, **no exception**.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grants Program

Application Form

Applications for Community Grants must be received by the 15th of each month to be assessed by the Sport, Recreation and Grants Committee the following month (i.e. an application received by the 15th of February will be assessed at the March Meeting).

Please ensure you have read and understood the City of Salisbury Community Grants Program Guidelines and Eligibility Criteria document prior to completing an Application.

Application Eligibility Checklist		
Is the Funding For:	Yes	No
• Money already spent?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Salaries (initial or ongoing)? <i>Payment of facilitator or contractor engaged specifically to deliver program / activity under the grant may be considered</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Recurrent administration costs?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Capital development (e.g. renovations or building changes that will be permanently part of the structure)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Upgrading facilities which belong to Local, State or Commonwealth Governments?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Application from Public / Private Schools?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• An organisation trading as a sole trader/individual?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• A group that is a non-incorporated body and does not have a parent incorporated body or is not endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not- for- profits Commission?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have previously received funding and NOT fulfilled reporting obligations, including provision of post event evaluation/report and financial acquittal?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have received Community Grants Program funding from the City of Salisbury within the past twelve (12) months.	<input type="checkbox"/>	<input checked="" type="checkbox"/>

*If you have answered **YES** to any of these questions,
this application is **NOT** eligible for grant funding.*

*to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered***

Community Grant Application - Page 2 of 13

Applicant Organisation Information		
1. GROUP / ORGANISATION DETAILS		
Name:	Mawson Lakes Photography Club	
Address:	Mawson Centre	
Suburb:	Mawson Lakes	Postcode:
2. CONTACT PERSON DETAILS (this is the address that all correspondence will be sent)		
Name:	Ms Alison Attwood	
Title (your role with the group/organisation):	Club President	
Address:	[REDACTED]	
Phone:	Landline: Mobile: [REDACTED]	
Email:	mlpcpresident@gmail.com	
3. COMMUNITY GRANT RESPONSIBILITY		
Name of Person Responsible for the Grant:	Mrs Jackie Allender	
Title (role with the group/organisation):	Club Secretary	
4. GROUP / ORGANISATION MANAGEMENT DETAILS		
How is your group/organisation managed:	Government by a Constitution	
Is your organisation:		
a) Incorporated:	Yes <input checked="" type="checkbox"/> (go to question c)	No <input type="checkbox"/> (go to question b)
ASIC Registration Number:		
b) Operated under a Parent Organisation: <i>(please state which parent organisation you operate under below AND attach a supporting letter from the organisation)</i>	Yes <input type="checkbox"/> (go to question c)	No <input checked="" type="checkbox"/> (go to question c)
Parent Organisation		
Name:		
ASIC Registration Number:		

to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered**

Organisation Information (continued)		
c) Community/Non-Profit:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is your organisation endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not- for-profits Commission?	Yes <input type="checkbox"/> <i>(evidence must be attached to this application)</i>	No <input checked="" type="checkbox"/>
d) Government Funded: <i>(If Yes, please list funding source/s and purpose in part e & f)</i>	Yes <input type="checkbox"/> (go to question e & f)	No <input checked="" type="checkbox"/>
e) Funding source/s:	<i>Membership Fee Based/Fundraising</i>	
f) Purpose:	<i>Teaching, social, for anyone interested in photography, supports all levels</i>	
g) Other (please specify):	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
5. BANKING INFORMATION		
<i>Your organisation must have its own Bank/Credit Union Account or similar</i>		
Full Account Name: <i>Mawson Lakes Photography Club Inc</i> <i>*do not provide account or BSB numbers*</i>	Financial Institution Name: [REDACTED] Branch Location: [REDACTED]	
6. REFEREE INFORMATION		
<i>Please provide the name and contact details of a referee – preferably someone who can verify the bona fide status of your group/organisation (NOT Members of the Committee)</i>		
Referee's Name:	<i>Helen Whitfield - SAPF Secretary</i>	
Referee's Contact Information:	<i>secretary@sapf.org.au</i> [REDACTED]	

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

GST Declaration		
I agree upon signing of this document that I will provide Council with the following information in regards to my Australian Business Number and Goods and Services Tax registration status.		
Does your group/organisation have an ABN <i>(If Yes - Please Quote ABN:)</i> ----- <i>(If No, the ABN Declaration Form attached must be signed)</i>	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Is your group/organisation registered for GST	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<p>NB: GST Registration</p> <p><i>If your group IS registered for GST you are required to provide a Tax Invoice to Council before an approved grant amount can be provided to your organisation. The invoice must clearly state the words TAX INVOICE, Business Name, ABN and the approved grant amount including GST.</i></p>		

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 5 of 13

Project/Event Budget Information	
Will the project or event generate income (e.g. ticket sales, entry fee etc.)?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (enter '0' dollar amounts below)
If Yes, provide details:	
INCOME	\$ AMOUNT
Project or event generated income:	
Organisation's contribution:	
Income received from other Grants: (list organisation(s) providing Grant funding and their contribution)	0.00
Income received from sponsors: (list sponsor(s) and their contribution)	0.00
Donations: (please specify the source, product or service and estimated amount of funding requested)	0.00
Have you sought any other funding for the project: (please specify the source and amount of funding requested)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
TOTAL (including GST):	0
What resources will you and your group contribute to the project e.g. in-kind donations, labour, time etc.?	<i>Volunteers on the Committee, dedicated individuals of surrounding Clubs, will be donating their time to provide education, training and Social experience to members and the wider community.</i>
EXPENSES (specify the proposed expense budget by item:)	\$ AMOUNT
<i>LG MiniBeam Full HD LED 3D Ready Projector</i>	1999
<i>Nobo 2000x1513mm Tripod Projection Screen</i>	320
<i>Espon Wireless LAN Adaptor</i>	140
<i>Brateck PRB11 Anti Theft Bracket</i>	49
<i>Total</i>	2508
TOTAL (including GST):	0

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Summary of Project/Event Information	
Is the funding for: <i>(please tick which is applicable)</i>	<input type="checkbox"/> Event <input type="checkbox"/> Project <input checked="" type="checkbox"/> Ongoing <input type="checkbox"/> New Group
Name of Project/Event Requiring Funding	<i>Mawson Lakes Photography Club Ongoing Concern</i>
Date(s) of Project/Event <i>(if ongoing please state "ongoing")</i>	<i>Ongoing Concern</i>
Total cost of Project/Event	<i>0</i>
Amount of Community Grant Funding Requested	<i>2508</i>
Is there any other information that you may feel is relevant to your application?	<i>Mawson Lakes Photography Club strives to improve the skills of interested persons in Photography, provide a safe and exciting program for Community Members, our Members have since inception participated free of charge to Salisbury Council run events and Mawson Lakes Community Events and provided images free of charge.</i>
<input checked="" type="checkbox"/> There are no relevant attachments.	<input type="checkbox"/> There are relevant attachments and the following documents are attached: 1. 2.
Which category best describes your project/event? <i>(please check all that apply)</i>	
Health	<input type="checkbox"/>
Establishment of a new group	<input type="checkbox"/>
Education and Training	<input checked="" type="checkbox"/>
Culture / Arts	<input checked="" type="checkbox"/>
Sport / Recreation	<input checked="" type="checkbox"/>
Environment	<input checked="" type="checkbox"/>
Disability	<input type="checkbox"/>
Youth	<input type="checkbox"/>
Crime Prevention	<input type="checkbox"/>
Aged	<input type="checkbox"/>

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Project/Event Details	
Previous Community Grants Program Funding	
Has your Organisation previously received a Community Grant? <i>(If Yes – when, amount granted and what the grant was for:)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(go to Group/Organisation Information)</i>
When was the Grant funding received (month & year):	
What amount of Grant funding was provided:	
When was the previous Grant acquitted (month & year):	
Group/Organisation Information	
Group/Organisation Name	<i>Mawson Lakes Photography Club</i>
Group/Organisation Description	<i>Providing Education/Training/Social Activities to Members</i>
Group/Organisation Registered Address	Number/Street: <i>2-8 Main Street</i> Suburb: <i>Mawson Lakes</i> Postcode:
Is the Club Incorporated?	<i>yes</i>
Number of Members	<i>36</i>
% of Membership that reside in the City of Salisbury	<i>90 %</i>
Project/Event Details	
Project/Event Name	<i>Mawson Lakes Photography Club Ongoing Concern</i>
Project/Event Summary	<i>Ongoing Concern</i>
Date(s) of Project/Event	<i>Ongoing</i>
Location of Project/Event:	Number/Street: <i>2-8 Main Street</i> Suburb: <i>Mawson Lakes</i> Postcode:
How will the Project/Event benefit the residents of the City of Salisbury?	<i>Our Members actively participate in City of Salisbury Run Community Events, providing free of charge photographers and images</i>
How many individuals will benefit from the Project/Event?	<i>100+</i>
% of project/event participants that reside in the City of Salisbury	<i>90 %</i>
If it is an Event, is it open to the public?	<i>No yes when Community Based Events</i>
How will the Project/Event be promoted?	<i>Community Event presence, advertising in Mawson Lakes Centre</i>

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Grant Money Requested	
Amount Requested	\$ 0
Itemised Breakdown of Costs: <i>An itemised breakdown of costs must be provided. Please attach a separate sheet if there is insufficient space.</i>	
LG MiniBeam Full HD LED 3D Ready Projector	\$ 1999
Nobo 2000x1513mm Tripod Projection Screen	\$ 320
Espon Wireless LAN Adaptor	\$ 140
Brateck PRB11 Anti Theft Bracket	\$ 50
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
TOTAL	\$ 2508
TOTAL (including GST):	\$ 0
Quote Attached: <i>A detailed, current quote <u>must</u> be provided with the application.</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(please refer to the City of Salisbury Guide to completing the Community Grants Program Application Form)</i>

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Project or Event Scope

Provide a description of the proposed project or event:

Mawson Lakes Photography Club, provides meetings twice a month to members with an open invitation to people wanting to join a Photography Club, we provide educational and training sessions ranging from basic to advance techniques, we provide knowledgeable and experienced guest speakers.

The Club has been established for approximately 4 years, and prides its on its Community involvement actively promoting Community Events run by the Salisbury Council, and Mawson Lakes Centre. Our Members participate in these events, providing their services free of charge, which includes, their time, equipment, skills and images.

These items will enable the club to promote itself and its members, at Community Events, and therefore Promote the Events indirectly. Members will benefit greatly by the Club being able to use this equipment in the monthly educational meetings, currently we are relying on Members equipment which is not ideal.

Attachments

- ☒ There are no attachments relating to the Project or Event Scope.
- ☐ The following documents are attached relating to the Project or Event Scope:
- 1.
 - 2.
 - 3.

Benefits and Outcomes of the Project or Event

Provide a description of the benefits and outcomes of the proposed project or event to the residents of the City of Salisbury and/or the wider community:

Benefits to the residents of the City of Salisbury and the wider community is as follows;

- 1. Membership base is predominately City of Salisbury Residents and more specific Mawson Lakes vicinity.*
- 2. Our aim is to provide a safe and friendly environment for interested person's of all levels of photography to meet twice a month at the Mawson Lakes Centre for social and educational purposes.*
- 3. The Club is affiliated with the South Australian Photographers Federation (SAPF), who provides guidance and expertise in running all Camera Clubs Professionally, they provide details of experienced and well knowledge individuals who we are able to guide our Membership base by providing guest speakers in particular fields. The Club undertakes field trips, education nights, we encourage our Members to provide their photography skills, free of charge to the City of Salisbury Council run Events, and any adhoc events that the Council request of us.*

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 10 of 13

Support for the Project or Event

Demonstrate how the proposed project or event is supported by residents of the City of Salisbury and/or the wider community:

(include a list of key partners and/or stakeholders, community members and organisations that have been consulted, how and why they support the project or event and any other information that demonstrates support.

Mawson Lakes Photography Club encourage Members to participate in all Community run events, ask that they use their photography skills, free of charge to the City of Salisbury Council, and any wider Community requests including the Mawson Lakes Centre.

The Club provides continual training and education to all members, Members demonstrate their skills at Community Events, Exhibit their work.

The residents of the City of Salisbury and the wider Community are exposed to the skills of our Members, are invited to Join and participate, are made aware of Community Events by our Members Images, the Club is open to all interested parties and with any level of skills.

Attachments

- ☒ There are no attachments relating to Support for the Project or Event.
- ☐ The following documents are attached relating to Support for the Project or Event:
- 1.
 - 2.
 - 3.

Project or Event Management

Ongoing Projects or Events

Describe how the proposed project or event will be managed into the future:
(outline how you will ensure sustainability and achieve outcomes for the project or activity)

One-off Projects or Events

Describe how the proposed project or event will be managed:
(outline how you will achieve outcomes for the project or activity)

The Club Committee is dedicated to providing a diverse program for all participants, learning new skills, helping others, exposure to community events and guest speakers, The requested items will enable the Club to deliver the services to its members and wider Community.

The Club is under a Constitution and is also affiliated with the South Australian Photography Federation, we have an Elected Committee, run Committee Meetings with appropriate records, the items would become Mawson Lakes Photography Club property, listed as assets and recorded correctly.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Application Declaration	
<p><i>Please note that this declaration must be signed by two current senior office holders of the group/organisation (ie President, Secretary, Treasurer)</i></p>	
<p>Please read, tick the S1 and S2 boxes and sign:</p>	
<p>S1</p>	<p>S2</p>
<p><input type="checkbox"/> I acknowledge that I am authorised to make this application on behalf of the Organisation.</p> <p><input type="checkbox"/> I acknowledge that the information provided in this application is true and correct.</p> <p><input type="checkbox"/> I acknowledge that our Organisation may be required to supply further information prior to consideration of this application by the City of Salisbury Community Grants Program.</p> <p><input type="checkbox"/> I acknowledge that, should this Application be successful in obtaining Community Grant funding, our Organisation must complete the acquittal and reporting requirements as set out in the Acceptance of Community Grant – Form 1 and City of Salisbury Community Grants Program Guidelines and Eligibility Criteria.</p> <p><input type="checkbox"/> I acknowledge that any changes in circumstances with regard to this Application must be notified in writing and the City of Salisbury Community Grants Program may request further information.</p>	<p><input checked="" type="checkbox"/> I acknowledge that I am authorised to make this application on behalf of the Organisation.</p> <p><input checked="" type="checkbox"/> I acknowledge that the information provided in this application is true and correct.</p> <p><input checked="" type="checkbox"/> I acknowledge that our Organisation may be required to supply further information prior to consideration of this application by the City of Salisbury Community Grants Program.</p> <p><input checked="" type="checkbox"/> I acknowledge that, should this Application be successful in obtaining Community Grant funding, our Organisation must complete the acquittal and reporting requirements as set out in the Acceptance of Community Grant – Form 1 and City of Salisbury Community Grants Program Guidelines and Eligibility Criteria.</p> <p><input checked="" type="checkbox"/> I acknowledge that any changes in circumstances with regard to this Application must be notified in writing and the City of Salisbury Community Grants Program may request further information.</p>
<p>On behalf of _____ <i>(Group/Organisation)</i></p>	
<p>_____ <i>(Name/Position)</i></p>	<p>/ and /</p>
<p>_____ <i>(Signature 1)</i></p>	<p>_____ <i>(Signature 2)</i></p>
<p>_____ <i>(Date)</i></p>	<p>_____ <i>(Date)</i></p>
<p>_____ <i>Contact (phone number):</i></p>	<p>_____ <i>Contact (phone number):</i></p>

Both signatories will be contacted to verify the application - a contact phone number must be provided for each.
Your Application will **not** be submitted until contact and verification has occurred, **no exception**.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered



Declaration Where No Australian Business Number is Required

I hereby certify that I am not required under the New Taxation System to hold an Australian Business Number (ABN), as I am not carrying out an enterprise under the New Tax System definition.

I am providing my services as:

	Yes	No
A private recreational pursuit or hobby	<input checked="" type="checkbox"/>	<input type="checkbox"/>
As an individual without a reasonable expectation of profit or gain	<input type="checkbox"/>	<input type="checkbox"/>

As such the Council is not obliged to withhold 48.5% from payments made to me.

I confirm that the above declaration is valid for all payments made by Council to our organisation. Should the situation change and I am required to hold an Australian Business Number, I will notify Council immediately.

(Group/Organisation)

(Name/Position)

(Signature)

(Date)

*to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered***

Community Grant Application - Page 13 of 13

Philips LED 50 Ready Projector

500G 8806087271867



\$1999



Want Product Care®? [Learn more](#)

No thanks

ADD TO CART

✓ Easy returns

✓ Free store pick up

✓ Over 170 stores

☐ Compare

☐ Wishlist

Available on 50 Interest Free payments of:

Product Code: AC1902397

Category Links: [Portable Screens](#)




\$314.00

Ratings: ★ ★ ★ ★ ★

Customer reviews (0) [Be the first to write a review](#)

Questions (0) Answers (0) [Ask a question](#)

Quantity - 1 +


 **Add to Cart**

 **Add to My List**

 **Deliver to Door**
Dispatched **NEXT** business day

Your store is set to:
[Keswick](#)

 **Click & Collect**
Collect in 2 business days

 **Shop in store**
Only Available Online
[Check stock in other stores](#)

Features

Specifications

Customer reviews

Q & As

Delivery

Nobo Tripod Projection Screen is ideal for use at home, in the workplace or at school. It is freestanding and comes with a tripod so there's no need for installation and it's portable so you can move it with ease.

This screen is perfect for use for movies, presentations, images and more.

It measures 2000 x 1513 mm.

The tripod is included making the screen freestanding so there's no need for installation.

It has a wide format 4:3 ratio suitable for use with LCD and overhead projectors.

The screen retracts into casing for easy storage and portability.

It has a stylish black border for a professional finish.

Mount



Brateck PRB-11 Anti-theft Aluminium Flat Projector Mount

Rating: ★ ★ ★ ★ ★ (0 Customer Reviews)

✓ **Deliver to Door**

Dispatched **NEXT** business day

Your store is set to: [Keswick](#)



Click & Collect

Collect in 1-2 business days



Shop in store

Call to confirm

[Check stock in other stores](#)

Bulk Buy Price

3+ **\$37.00**

Quantity



1



Add to Cart



Add to My List



Epson Wireless LAN Adapter

Rating: ★ ★ ★ ★ ★ (0 Customer Reviews)

Product Code: EPELPAP07



Deliver to Door

Dispatched **NEXT** business day

Your store is set to: [Keswick](#)



Click & Collect

Collect in 2 business days



Shop in store

Only Available Online

[Check stock in other stores](#)

\$ 139.00

Quantity



1



Add to Cart



Add to My List

ription

ifications


erns

ews

uct Care®

A Question

Description

Product tour 

With Full HD (1920x1080) resolution capabilities and a load of features, the LG MiniBeam Full HD LED 3D Ready Projector is a great upgrade to your home theatre set up.

Key Features

- With HDMI input and a full HD resolution, the LG MiniBeam Full HD LED Projector is perfect for Blu-ray movies, current-gen console gaming and multimedia presentations.
- Capable of projecting an image up to 120" screen size (measured diagonally).
- Automatic keystone corrects distorted images caused by projection angle.
- Four Corner Keystone correction when used with a screen for ease of installation.
- With USB input, you can projector media or presentations directly from a USB stick. Formats supported include DivX HD and MP3 as well as Photo and Microsoft Office documents and more.
- Offers a wide range of audio options with in-built stereo speakers, Bluetooth® Wireless Audio Output, digital optical audio output and an analogue 3.5mm headphone output port.
- DLP Link Compatible 3D support with 2D to 3D conversion for compatible sources (3D Glasses not included).
- A range of video input options including wired digital and analogue connections as well as Intel WiDi for wireless connections from compatible devices.

What's In The Box?

- Remote Control x 1
- Power Supply Adaptor (100V - 240V) x 1
- AV Composite Video/Audio Adaptor x1
- Instruction Manual
- Component Video Adaptor x 1
- Battery (AAA) x 2