



Community Grants to Non-Profit Organizations
Accountability Form- Schedule "B"
 POLICY #15-3

ORGANIZATION INFORMATION

Date: _____

Organization Legal Name: _____

Contact Person: _____

Mailing Address: _____

City: _____ Province: Alberta Postal Code: _____

Telephone: _____ Email: _____

ACCOUNTABILITY OF FUNDS

Please complete and attach all copies of receipts for all project expenses and proof for budgeted in-kind contributions and volunteer labour. *

	Total Amount
Kneehill County Contribution- Kneehill County's contribution share must be a minimum 50 per cent of the total project cost.	\$
Total of Project Cost	\$

* Rates are: \$10/hr for unskilled labour, \$25/hr for skilled labour and \$50/hr for equipment including operator

APPLICANT AGREEMENT

I DECLARE THAT: (application must be signed by two members of the Society's Executive Committee.)

- I am a duly authorized representative having legal and/or financial signing authority for the above organization.
- The information contained in this application and supporting documents is true and accurate and endorsed by the above organization.

Signature: _____
 Name Printed: _____
 Date: _____

Signature: _____
 Name Printed: _____
 Date: _____

The personal information on this form is being collected for the purpose of determining eligibility of an applicant to receive a grant. This information is collected under the authority of Section 33 (c) of the Freedom of Information and Protection of Privacy Act and may become public information once it is submitted to Council during a Council meeting. Questions regarding the collection of this information can be directed to the FOIP Coordinator at 403-443-5541.