GRANTS FOR ASSISTANCE APPLICATION
Year Round Intake for Grants Under $1,000

Organization Information Sheet

Name of Organization: Cariboo Calico Quiilters	
Mailing Address: PO Box 1983, 100 Mile House, BC V0K 2E0	
Telephone (office): c/o 250-791-5256	email:
Purpose of Organization: quilting for joy and distribution to community needs such natural disasters, house fires and ambulance quilts	
What Community does your organization serve? 100 Mile House area but we also distribute our quilts provincially and interprovincially	
BC Society Registration Number: none	
Federal Charitable Registration Number: (if applicable) none	
Chairperson's name: Tracy McMurren	
Telephone: [redacted]	email: [redacted]
Treasurer or Financial Officer's name: Laurel Murray	
Telephone: [redacted]	email: [redacted]

Previous Grant from CRD:
If applicable, please indicate the year, grant amount, and project.

Year: _____ $ _____

Project: We provide ongoing community support in terms of donating quilts as needed such as house fires, ambulance quilts, disaster (forest fires, floods, Red Cross locall and interprovincially)

Current Grant Requested from CRD $ 1,000.00

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Please answer the following questions, using additional paper if necessary.

1. Brief Description of Proposed Use of Grant:

   _we must replenish our quilting items such as fabric, batting and thread on an ongoing basis for donation of quilts within our community

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2. Start date of the project: 9/1/23 End date for the project: 9/1/24

3. How will you indicate that the CRD is contributing to your organization?

   _recognization of CRD contribution via local news and radio
   _word of mouth
   _written thank-you

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THE INFORMATION INCLUDED IN THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

[redacted] 4/18/20

President/Chairperson Date