

Organization Information

Name of Organization:	Team Bhullar Foundation	
Mailing Address:	6660 Sideway Road, Richmond, BC, V6W 1H1	
Telephone (office):	[REDACTED]	email: [REDACTED]
Purpose of Organization:	Promote Sport (Wrestling Day) among youth in the Community	
What community does your organization serve?	British Columbia	
BC Society Registration Number (if applicable):	S0077522	
Federal Charitable Registration Number (if applicable):	N/A	
Chairperson's name:	ARTAN BHULLAR	
Telephone:	[REDACTED]	email: [REDACTED]
Treasurer or Financial Officer's name:	Neenu Bhullar	
Telephone:	[REDACTED]	email: [REDACTED]

Grant Request \$ 1000.00

Proposed Use of Grant:

Seed funding for Wrestling Day initiative

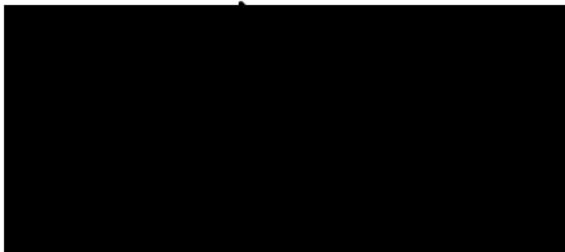
Previous Grant (if applicable):

Year: _____ \$ _____

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

Marketing Material

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



July 17, 2014
Date