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| Charity Name: | |
|---|---------------------------------|
| Address: | |
| Income and Expense statement: from | to |
| Income: | |
| Fundraising (non lottery sources) | |
| Bingo (net, include Nevada, Superstar & Super Jackpot | shares) |
| Nevada (other than Bingo share) | |
| Grants (fed, prov, municipal) | |
| User fees (registration fees, membership dues, etc.) | |
| Other (interest, bequests, etc.) | |
| Total In | come: |
| Expenses: | |
| Office (phone, hydro, rent, insurance) | |
| Office (equipment, supplies, etc.) | |
| Wages (include employers share) | |
| Consultants (auditors, speakers, etc.) | |
| Fund-raising costs (advertising, fliers, etc.) | |
| Donations (note 1) | |
| Direct expenses (note 2) | |
| Total Exp | oenses: |
| Signature:, Treasurer p | ohone: |
| Note 1) donations to other charities, ie. United Way to member ag | encies, Kings Sports to others, |

Rotary Club to others, etc.

Note 2) direct expenses for which your charity raises funds, ie. Minor Hockey for ice-time and equipment, General Hospital for Medical equipment, Library for books, etc.

Charities that received more than \$50,000 in the previous year must attach the latest audited statement to application, unless one has been filed in the past six months. If you wish to make any explanations please do so on the rear of this statement.

Note: two statements are required, one for the past fiscal year and another for the proposed budget for the next year. Incomplete applications will be returned.