

Policy Number:	Donation Request & Contribution Policy Amendment 01/02 – 2005-02
Coverage:	Village of Belledune
Council Approval:	<u>13/ 02/ 18</u> Y M D
Effective Date:	<u>13 / 02/ 18</u> Y M D

**DONATION REQUEST & CONTRIBUTION POLICY
AMENDMENT
01/02 – 2013-2**

The Donation Request & Contribution Policy 01/02 is hereby amended adding section 4.0 – Undue Hardship Clause.

4.0 Undue Hardship Clause

4.1 Purpose:

For Belledune citizens who, through no fault of their own, are experiencing a hardship. The purpose is to provide assistance and to support community interest for such citizens.

4.2 Objective:

To assist Belledune citizens who may be facing a difficult time.

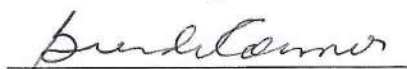
4.3 Process:

Donations by Belledune will not be cash contribution, but will be in the form of an in-kind offering. Belledune will supply the Belledune Recreation & Cultural Centre or another municipal owned facility, free of charge, to any individual, group or organization who wishes to do a fundraising function on behalf of a Belledune citizen who is experiencing undue hardship. The Village of Belledune will also mail a flyer within Belledune boundaries to advertise the details of the fundraising event.

4.4 Specifics:

- i. All requests will be on a first come first serve basis.
- ii. All donations requests from an individual, group or organization on behalf of a person deemed to need assistance must be submitted in writing on the Belledune Undue Hardship Application Form. Request from minors needs to be submitted by an adult guardian.
- iii. Within a reasonable time, the applicant will submit a report of the amount of money (proceeds) realized by the fundraiser to the municipal CAO.
- iv. All requests for donations in this category will be approved by the CAO, pending all conditions have been met by applicant.
- v. The CAO will report to Council at the Regular Meeting the list of requests that have been approved for Undue Hardship.

Amendment adopted this 18th day of February, 2013.


Clerk/Treasurer


Mayor

Village of Belledune
DONATION REQUEST FORM
Undue Hardship Application

Individual, Group or Organization or Team Name _____

Mailing Address: _____
Including Postal Code _____

Telephone #: _____

Fax #: _____ E-Mail Address: _____

Contact Name: _____ Signature _____

Telephone #: _____ Cell #: _____ Fax #: _____

E-Mail Address: _____

***Name of Individual the Fundraiser is for:** _____

Type of Hardship – Please check one (1) box:

Medical _____

Property _____

Other (with Explanation) _____

Type of Fundraising Event: _____

(If the event is to include alcohol, all NB Liquor licensing laws will need to be followed and copy of license submitted to the municipal office prior to the event)

Liquor _____ No Liquor _____

Proposed Date and Time of Event _____

(Subject to Availability of Facility)

Event Information to be put on Flyer:

(It is the responsibility of the Applicant to provide the information in a timely manner for preparation and mailing)

(If possible please e-mail this information to municipal office at bell002@nb.aibn.com)

