



**ROYAL CANADIAN LEGION
ONTARIO COMMAND**

Application for Special Use of Poppy Funds per Sections 1105 –1114

PART A *(please type or print)*

Branch Name: _____ Branch No: _____ Date: _____

Complete Address of Branch: _____

Branch Telephone No. _____ Branch Fax No: _____

Contact Name: _____ Contact Home Phone: _____

PART B

Application for use of funds under the following: **(Check (✓) only one of the following (*) sections)**

* **1105** Housing Accommodation or Care Facilities *(Choose all which apply)*

- | | | | |
|-----------------------------------|---------------------------------------|---|---------------------------------------|
| <input type="checkbox"/> Purchase | <input type="checkbox"/> Construction | <input type="checkbox"/> Reconstruction | <input type="checkbox"/> Maintenance |
| <input type="checkbox"/> Renewal | <input type="checkbox"/> Repair | <input type="checkbox"/> Furnishing | <input type="checkbox"/> Refurnishing |

* **1106(a)** *(Choose one of the following)*

- | | | |
|--|---|---|
| <input type="checkbox"/> Community Medical Appliance | <input type="checkbox"/> Medical Training | <input type="checkbox"/> Medical Research |
|--|---|---|

* **1106(b)** *(Choose one of the following)*

- | | |
|--|--|
| <input type="checkbox"/> Drop in Centres for the Elderly | <input type="checkbox"/> Meals on Wheels |
|--|--|

* **1106(c)** Relief of Disasters declared by the Federal or Provincial Government

* **1106(d)** Transportation/Related Services

* **1106(e)** Installation/Maintenance/Repair of Personal Lifting Devices at the branch **(attach invoice)**

* **1107** Ex-service Personnel of Commonwealth or Allied Countries and their Dependants (Out of Country)

* **1108** Restoration/Repair of Monuments and Cenotaph

* **1109** Support of Cadet Units *(if branch sponsors more than one unit, the total 20% would be divided)*

* **1110** Annual Veterans Dinner *(please include the number of veterans only who are attending and date of dinner. Cost should be the lesser of the actual cost of the dinner or maximum of \$18.00 per plate)*

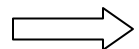
* **1112** The purchase of a coin sorting/counting/wrapping machine – 10% of cost **(attach invoice)**

* **1113** The installation of an access ramp to the branch entrance and by installing or retrofitting the branch's main entrance with a handicap door operator

* **1114** Support of Canadian Military Family Resource Centres (MFRC's)

* **Storage Costs** *(please include the square footage of storage area)*

Please complete other side



Name(s) of Intended Recipient(s): _____

Description of how funds will be used or item being donated: _____

PART C - To speed the process of Command approval, please supply the following information:

Poppy Account Balance as of September 30, last \$ _____ .00

Current Poppy Account Balance: \$ _____ .00

Amount Requested: \$ _____ .00 Projected Cost \$ _____ .00

Date of General Meeting at which this expenditure has been approved: _____

Motion Moved by: _____ Seconded by: _____

Signed _____ Signed: _____
Poppy Chairman /Joint Fund Treasurer Branch President /Joint Fund Administrator

COMMAND APPROVAL GIVEN: Yes By: _____ Date: _____

No More information is required, please complete highlighted areas and return to Command.

Other reasons for non-approval of this request:

If you have questions or comments, please call Ontario Command at 905-841-7999.