

7. Previous Donations

Has your organization received donation from the Town of Claresholm in the past? If so, please explain the amount and use of these donations.

Date	Amount	Use of Funds

8. Organizational Information

What services or activities does your organization provide to the Town of Claresholm residents? (Please attach a list of membership/executive)

Describe in broad terms the principal objective of your organization or initiative:

How will your organization acknowledge the Town's donation?

10. Please provide a detailed list of all sources of funding for the organization.

Funding Source	Amount	Recommended Use of Funds