

EAST AYRSHIRE COUNCIL

MISS ANNIE SMITH MAIR BEQUEST (SCO21095)

Application for Financial Assistance (Groups/Clubs)

The purpose of the Miss Annie Smith Mair Bequest is “to assist persons of good character, natives of or residents in Newmilns and Greenholm who, through age, bereavement, ill-health or similar misfortune are in need of financial assistance”

Please complete all sections and return to the Administration Manager, East Ayrshire Council Headquarters, London Road, Kilmarnock KA3 7BU

1. Name of Group/Club

Address

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Postcode Tel No.....

2. Club Secretary/Main Contact Person:

Name

Address

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Postcode Tel No

Email

3. Please describe how your Group/Club supports individuals who were born in or currently live in Newmilns or Greenholm who are in need of financial assistance.

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4. Please complete (i) to (iii) below, as relevant to your Group/Club, explaining how the degree of need within your Group/Club can be measured:

(i) The percentage of overall membership of your Group/Club in financial need, eg families in receipt of DWP benefits

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(ii) Activities undertaken by your Group/Club which provide assistance to individuals that the Trust might normally consider supporting (ie persons of good character who are natives or residents of the former Burgh of Newmilns and Greenholm who are in financial need

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(iii) Details of any particular circumstances in which your Group/Club, as one that might not normally qualify, finds itself in need of financial assistance eg following a break-in, flood or other such emergency

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5. Total number of individuals who would benefit from the project

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6. Total number of individuals who were born in or currently live in Newmilns and Greenholm who would benefit from the project

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Please note that in order to assist the Trust in reaching a decision on the application, appropriate Council Services will be contacted to provide relevant background information on the operation of your Group/Club

7. Donation required

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8. Proposed use of donation

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9. Total cost of project

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10. If the total cost of the project is greater than the donation requested, how will the balance of cost be raised?

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11. Additional sources of funding available to the Group/Club

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12. Has the Group/Club received assistance from the Trust before? **YES/NO**

If the answer is **YES**, please provide details

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13. Please tell us what advice you have taken, or plan to take, in the development or implementation of this project

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14. Please give details of your Organisation's main bank account

Name of Bank

Address

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Title of Bank Account

Account No Sort Code

15. Enclosures Checklist

Please submit with your completed application form:-

Last audited financial statement (income and expenditure for a period of one year signed and certified by independent third party. New Groups/Clubs should provide an estimate of first year's income and expenditure.	
Interim financial statement up to time of application, if other than end of financial year	
A copy of the Group/Club's constitution	
A copy of your recent bank statement/book	

I hereby declare that the information provided by me in this application is accurate. I understand that should the Trust rely on information provided by me that subsequently proves to be untrue, that any award made may be revoked, and repayment demanded.

Signature..... Date

ALL FINANCIAL DETAILS PROVIDED WILL BE TREATED IN THE STRICTEST CONFIDENCE AND WILL ONLY BE USED FOR THE PURPOSE OF ASSESSING THIS APPLICATION