20.23. Helping Families in Need Society

A. GETTING STARTED		
1. Are you?	New Applicant	Returning Applicant
2. Select the kind of Community Grant you are applying for:	General Grant (Operating)	General Grant (Programming)
	Recreational Sport Grant	Fee Waiver
3. Amount you are requesting: 4 10,000	In-Kind (check if applicable)	
4. Total cost of the project/event/program etc.:	DO MONTHLY	FIXED EXPENSE
5. If you are a returning applicant and are requesting an increase a rational for the increase.	ase over your last year grar	nt amount awarded, please provide
N/A		
6. If you are applying for a General Operating Grant, please doperate the organization.	lescribe how this grant will b	ne used to offset costs incurred to
HELP US PAY OUR MONTHLY EX	PENBES DUE	TO COUID 19
SHUTDOWN		
B. GETTING TO KNOW YOU		
1. Applicant Type:		
Local Registered Non-Profit Society		
Society No: 50045603	3	
Date of Incorporation:		
Registered Charity Charitable No: 8635	0 5457 R	R 0001
National/International Non-profit operating locally		
Society No:		
Date of Incorporation:		
Sport or Recreation Organization		
_		
Other Specify:		(1)
2. Organization Name: HELPING FAM	ILLIES IN N	EED SOCIETY
3. Organization Street Address: 4095	ST AVE BY	34 V5C 3W5
4. Website (if applicable): HELDING FAMIL	LIES IN NEE	D.ORG
5. Grant Application Main Contact Person:		,
Name: ROXY ABERNETHY		
Phone:		
Email:		
6. Alternative Contact person:		
Name: WENDI BORDELAY		
Phone:		
Email:		

Applicant for General Operating Grants are not required to complete sections C, D, and E (marked with an asterisk *)
C. THE PROJECT/EVENT/PROGRAM*
1. Name of the Project/Event/Program: HEURING FAMILIES FURNISH THEIR HOP
2. Project/Event/Program Location (physical street address or event location):
4095 IST AVE BURNABY
3. Project/Event/Program Start Date:
4. Project/Event/Program End Date: DEC 31 2020
D. PURPOSE OR BENEFIT*
Describe the purpose or goal of the project/event/program.
TO BEABLE TO CONTINUE HELPING FAMILIES
2. Describe the project/event/program, and the activities.
FAMILIES COME & CHOOSE FURNITURE FOR THEIR HOME
3. Describe how this project/event/program will benefit residents of Burnaby (who will benefit). How many Burnaby residents will be involved with or benefit from the project?
60+ HELPING THEM BUILD A SAFE & CAMPORTABLE HOM
4. Describe how the project/event/program aligns with one or more of the following (Official Community Plan, Social Sustainability Strategy, Economic Development Strategy, Environmental Sustainability Strategy,):
PROVIDE A VALVABLE RESOURCE FOR LOW INCOME FAMILIES
5. Identify your community partners or stakeholders – you may also include letters of support for your project/event/

program from these groups as part of the application. OCAL SCHOOLS, SOCIAL SERVICE AGENCIES & CHURCHES

6. If the amount requested from the City of Burnaby is not fully granted, what would you do to make up the difference and/ or how would you proceed differently?

LOOKING INTO VIRTUAL FUNDRAISING

E. EVENT OUTCOMES*

1. How will you know if your project/event/program reached its goals? (for example, a goal of engaging youth in environmental activities might include reaching a set target of youth participants)

KEEPING OUR DOORS OPEN TO NEEDY FAMILIES

2. What data and feedback do you collect from your audience/participants? How do you evaluate your programs and services?

FAMILIES REGISTER WITH US & LET US KNOW HOW WE CAN HELP

Applicants for Recreational Sport Grants are not required to complete sections F, and H (marked by two asterisks **).

F. LONG TERM VIABILITY** CLOSED FROM MID MARCH REOPENING JULY 1, 2020

ATTENTION: The grant program is intended to support new organizations and encourage organizational self-sufficiency, while creating a framework of financial sustainability rather than using City resources as an indefinite funding source. It is requested that your organization develop a diverse funding income base and seek alternative methods for self-sufficiency to ensure your organization's long-term operational sustainability.

1. What are your sources of revenue? What percentage of total revenue do they each represent?

Source of Revenue	% of Total Revenue Previous Year	% of Total Revenue Current Year
Earned Revenue (All ticket sales, registration fees, memberships, etc)	34%	らっていらし
Grants (All federal, provincial, municipal, foundation and gaming grants)	18%	らなれるらむ
Donations and Sponsorships (Cash)	48%	こでようならん
Donations and Sponsorships (In-kind)	N/A	NA
All donations (cash/in-kind) provided by the City of Burnaby	N/A	5%

2. What other sources of funding are you currently pursuing? Does the organization have a plan for diversification and increase of revenue over the longer term? If yes, please provide a copy of the plan or describe the primary objectives and strategies.

APPLYING FOR FUNDING 1	FROM UF	FUCCUVER	FOUNDATION	4 THE
FEDERAL GOVERNMENT	ECSF	GRANT		

3. Please identify the cash value (\$) of all City of Burnaby contributions your organization/program/event has received from the City of Burnaby over the past three (3) years. Additionally, please indicate any other City of Burnaby grant opportunities you will be pursuing in the current year. Failure to identify City of Burnaby contributions may affect your eligibility for grants in the present year and in the future.

	3 years ago	2 years ago	1 year ago	Current Year	
				Awarded	Requested
Grant - Cash	Q	0	O		10,000
Grant - In-kind	0	0	O		D
Permissive Tax Exemption	0	0	0		0
Lease Grant	0	0	0		Ø
Other	0	0	0		0

Goal 1:			
PROJUDE A SAFE ENVIRONN	NENT FOR FA	MILIES IN DE	EED TO GET
Description:			HELP
OUR WAREHOUSE IS FULL OF	GENTLY USE	D FURNITUR	
Goal 2:			
HELPING NEEDY FAMILIE	ES WITH FR	RE FURNIT	URE
Description:			
THEY CHOOSE FROM OUR U	VAREHOUSE C	OF FURNITUR	2E
Goal 3:			
SUCCESSIVLY DEAL WITH	COUID 19 PR	0T0C015 + 15	55065
Description:			
PROVIDE NECESSARY ITEMS	EX-SANITI	ZER, MASKS,	PLEXIGUASS
5. Please complete the following:			BARRIERS
5. Flease complete the following.	Previous Year	Current Year	7
Number of volunteers (including Board)	Previous real	48	_
Volunteer hours per year	26 651	6389	CLOSEDSINCE MAR RE COOLD !
Number of voting members	25,554 62	62	MAR RE COUID
6. How does your organization work to ensure that program has an interest regardless of age, ability, orientation, ethnic examples and success stories of inclusivity and diversity will Max)	c/cultural background, soci ithin your organization an	cio-economic status? Pl id programming. (750 C	ease share
G. INSURANCE AND ACKNOWLEDGEMENT 1. Does your organization have general liability insurance? 2. If yes, what coverage?	Yes	No	
1 MILLION			
3. If awarded a grant, how will your organization acknowled (maximum 500 characters) ON OUR WEBSITE & IN OUR NO			

4. Describe the top 3 goals for the organization in the current year.

H. OPERATING BUDGET FOR ORGANIZATION or PROJECT/EVENT/PROGRAM**

Please identify if you are providing information for	
the entire organization or a specific project/event/program	Project/Event/Program
For the Fiscal Year:	2019
Month Fiscal Year Begins:	JANUARY

REVENUES	Prior Year Actual	Current Year Budget	Current Year Confirmed? Y/N	Brief Descriptions/ Comments (type of grant and funding period)
Federal Government (Specify)				
1.	0			
2.	0			
3.	O			
Provincial Government (Specify)				
1. GAMING GRAN	T 42,000	50,000	4	
2.	-		•	
3				
Local Government (Specify)				
1.	0			
2.	0			
3.	0			
Sponsorships (Specify)				
1.	0			
2.	0			
3.	0			
Earned Revenue				
1.				
2.				
3.				
Fundraising (Net Revenue)	76,000	90,000		
Individual Donations	145.000	125,000		
In Kind Sources	0	0		
Investment Income	0	0		
Other Sources (Specify)				
1. VAN FOUNDATION	62,000	62,000		
2. GRAUT				
3.				
Total Revenue	335,000	327,000		

Expenditures	Prior Year Actual	Current Year Budget	Brief Descriptions/ Comments (type of grant and funding period)
Total Compensation Expense		0	100% VOLUNTEER
Office Supplies & Expenses	13,400	12,000	
Program & Event Supplies	8,204	10,000	
Advertising & Promotion	0	0	
Travel & Vehicles Expenses	52,000	60,000	GAS, ICEC, MAINTENENCE FOR
Interest and Bank Charges	0	0	OUR 3 TRUCKS
Licences, Memberships, & Dues	0	O	
Occupancy Costs	113,000	112,000	RENT, HYDRO, ELECTRICAL
Professional & Consulting Fees	0	0	
Capital Purchases & Improvements	0	0	
Amortization of Capitalized Assets	0	0	
Donation, Grants, & Scholarship Expense as part of Charitable Activities	0	O	
Education and Training for Staff & Volunteers	0	D	
City Services Expenses (Specify)	0	0	
1.			
2.	1	/	
& DELIVERY TO FAMILIES	80,000	78,000	
Other Expenses (Specify)			
1. FUNDRAISING	8,200	10,000	DINNER AT GOLF COORSE + SUPPLIES
2. GIFT TO FAMILIES	33,600	20,000	GROCERY GIFT CARDS, CLOTHING
3. TEL/CELL	4,600	5,000	
4. VOLUNTEERS	14,000	15,000	PROUDE A WACH PROGRAM
5. BOOKKEEPING	3,000	3000	
Total Expenditures	329,004	335,000	
CURRENT SURPLUS (DEFICIT)	(4,004)		