

Township of Cramahe
Community Grant Application

RECEIVED
OCT 21 2025



Organization: <u>Shiloh Cemetery</u>	
Amount Requested <u>\$702.00</u>	
Contact: <u>Diane Meekes</u>	
Position: <u>Treasurer</u>	
Telephone: (Office)	Telephone: (Other <u>[REDACTED]</u>)
Email: <u>[REDACTED]</u>	
Address: <u>[REDACTED]</u>	
City: <u>[REDACTED]</u>	
Province: <u>[REDACTED]</u>	Postal Code: <u>[REDACTED]</u>
Contact Address: (If different than above)	
Have you received a grant from this program in the past? _____	<input checked="" type="radio"/> YES <input type="radio"/> NO
If YES, when: <u>2024</u>	
Are you incorporated? _____ <u>No</u>	<input type="radio"/> YES <input checked="" type="radio"/> NO
If YES, Registration#::	
Are you a registered charity? _____	<input checked="" type="radio"/> YES <input type="radio"/> NO
If YES, Registration#:: <u>893181560 RR0001</u>	

Project Outline:

Please provide an overview of the proposed project.

The municipal funds will be utilized to cover the cost of annual General Liability Ins. for the 3 board members. Previous years, the cost was \$540.⁰⁰ but there has been an increase. We called other insurance companies in our local area, but they all use the same company, Hamilton Township Mutual

Objectives:

Please provide a brief description of the projects' objectives to be achieved and how this project meets the objectives outlined in this policy.

As board members we maintain our active cemetery by organizing the upkeep of the grounds + monuments, managing finances and records and overseeing burials and by-laws. We host Decoration Day annually to raise funds to cover our expenses.

Economic Benefits:

Describe the benefits of the project to the local economy.

We, as Board members maintain a beautiful final resting place for members of our community and their families and loved ones.

What is the projected number of Cramahe residents that this funding would benefit?

Anyone who has a relative, friend or loved one buried there or may need a plot in the future.

<p><u>Partnerships:</u> Is the project being done in conjunction with other group(s)?</p> <hr/> <p>If YES, please list the other groups.</p>	<p>YES</p>	<p>NO</p>
<p>Outline the number of volunteers involved with the event / project:</p> <p><i>Shikh Cemetery has 3 board members</i> <i>Chairman</i> <i>Secretary</i> <i>Treasurer</i></p>		
<p><u>Alternate Funding:</u> Is the project being funded from another source?</p> <hr/> <p>If YES, please indicate the group and amount.</p>	<p>YES</p>	<p>NO</p>
<p>What will be the outcomes / results of this funding?</p> <p><i>Our Board members will have security while being a volunteer for the Shikh Cemetery</i></p>		

The following documentation **MUST** be attached to this application:

- ❖ Most Recent Financial Statements

Applicant Signature: *T. Meehan*

Completed Applications are to be submitted by October 31st 2025

to:

**Finance Department
Township of Cramahe
C/O Tanya Ogden**

P.O. Box 357 1 Toronto St. Colborne, ON K0K 1S0

