Community Incentive Grant Program (C.I.G.P.)

Application Form

Winnipeg

Please use the C.I.G.P. Application Guide to complete this form.

Part A: This application will be scanned/ copied. Please print in ink or type.

1. a) Legal name of organization. Use name that appears on your Articles of Incorporation.
THE ST. VITAL HISTORICAL SOCIETY, INC.

b) Year organization was formed 1995

2. Permanent mailing address of organization
Address: 600 ST. MARY'S RD.
City/Town: WINNIPEG
Postal Code: R2M 3L5
Organization Email: svhs@svhs.ca
Phone: 204-255-2864
Fax: —

3. Organization's representatives overseeing the project
Primary Contact: JEFF WHYTE
Title: TREASURER
Daytime Phone: ~~204~~-255-2864
Residence Phone/Cell: 204-899-0258
Email: jeff.whyte@svhs.ca
Secondary Contact: BOB HOLLIDAY
Title: PRESIDENT
Daytime Phone: ~~204~~-255-2864
Residence Phone/Cell: 204 781-8045
Email: svhsholliday@icloud.com

4. Project name Assign your project an accurate, descriptive name to be used in all correspondence
ST. VITAL MUSEUM DISPLAY EXPANSION AND ARTIFACT RESTORATION + ARCHIVAL PROJECT

5. a) Project site address
600 ST. MARY'S ROAD

b) Property owned by
CITY OF WINNIPEG

6. a) Project description
Complete Part B of application – next pages

b) Start date Sept. 13, 2017 **c) End date** Sept 13, 2019

7. Has this project received prior funding through the Community Incentive Grant Program? ☒ Yes ☐ No

8. Total project cost - Project costs should be supported by at least two contractor quotes or estimates. Enter the amount provided by the preferred contractor. $ 16,400.00

9. List other sources of project funding (i.e. excluding C.I.G.P.) including other grants, funds on hand, and proposed fundraising.

Indicate whether or not each source of funding is confirmed.

	Source	Amount	Confirmed
1.	DONATIONS	$ 3,200	☐ Yes ☒ No
2.	FUNDRAISING	$ 4,000	☐ Yes ☒ No
3.	FUNDS ON HAND	$ 1,000	☒ Yes ☐ No
4.		$	☐ Yes ☐ No
5.		$	☐ Yes ☐ No
	Total Other Funding Sources	$ 8,200	

10. Amount requesting from C.I.G.P. *
Note: To meet eligibility criteria, the total City of Winnipeg funding contribution (including C.I.G.P.) must be 50% or less than the total project cost. $* 8,200

11. Total of all funding sources including C.I.G.P. (total #9 + #10)
Note: This must match project costs identified in #8 above. $ 16,400

APPLICANT SIGNATURES: I/ We hereby certify that I/we am/are the **authorized signing officer(s)** of the applying organization and that this application is accurate to the best of my/our knowledge.

Signature of authorized signing officer: [signature] Title/ Position: TREASURER Date: APR 02/18

Signature of authorized signing officer: [signature] Title/ Position: PRESIDENT Date: APR 02/18

Please complete Part B of this application