

Wojtyla

Ward Community Fund Proposal Form

Please read the Guide to the Ward Community Fund before you fill in this form

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Then complete Section 1: Budget Proposal.

If you are proposing to deliver the project yourself, please complete Section 2: Delivery agency as well. We can help you with this or do it for you – see who to contact in the Guide to the Ward Community Fund.

Continue or separate sheets if you need to, or expand the boxes if you are filling in the form electronically.

LEICESTER CITY COUNCIL

Section 1: Budget Proposal

28 JAN 2010

RECEIVED
MEMBERS' SUPPORT

1. Name of Ward

ABBNEY

2. Title of proposal

EASTER EVENT 2010

3. Name of group or person making the proposal

JACQUELINE MARRIOTT / FRIENDS OF MOWMACRE / H.L.C.

4. Short description of proposal. Please include information on how the money will be spent, who will benefit, when they will benefit, and how we will know when the proposal has been successful.

It is important that your answer to this question is clear, because we will only pay the costs when we can see evidence that the outcomes you describe here have been achieved. You can provide further details in your supporting information if you want to.

EASTER ACTIVITIES FOR ADULTS & CHILDREN

- ① EASTER BUNNY HUNT TO BE HELD AT TUDOR CENTRE
- ② EASTER BONNET COMP.
- ③ DECORATE AN EASTER EGG
- ④ INK & PAPER 4A. PROMOTING THE ACTIVITY
4B. FOR USAGE AT EVENT.
- ⑤ BADGE MAKER

HOLDING THIS EVENT WILL GET CHILDREN OF ALL AGES ALONG WITH PARENTS/GUARDIANS INTERACTING TOGETHER.

EVENT TO TAKE PLACE ON APRIL 8TH 2010

5. Have you provided supporting information?

Tick if yes

6. What is the total cost to the Community Meeting?

£ 400.00

7. How have you estimated or calculated the cost? Please show each item of expenditure and say whether it is an estimate or an actual cost.

Item	Cost £	Estimate or actual cost?
ROOM HIRE		£15.00 (E)
ACTIVITY EQUIPMENT PAPER, INK, PENS, ECT.		£80.00 E
FRUIT, EGGS, JUICE		£120.00 E
PRIZES		£90+ E
Total		

8. Have you tried to get funding for this project from anywhere else, either in the Council or from another organisation? If so, please give details

~~No~~ No

9. Who proposed the project? Please provide contact details.

Name of contact person	JACQUELINE MARRIOTT
Your position in organisation or group	TREASURER
Name of organisation or group	F.O.M/T/A.
Address	
Phone number	
Email	

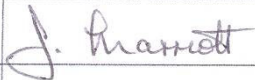
Section 2: Delivery agency (this could be a single person, group of people or a group or organisation)

10. Who will deliver the project? Please provide contact details.

Name of contact person	JACQUELINE MARRIOTT
Your position in organisation or group	TREASURER
Name of organisation or group	F.O.M / T/A
Address	<div style="border: 1px solid black; width: 250px; height: 70px; margin: 5px 0;"></div>
Phone number	<div style="border: 1px solid black; width: 150px; height: 20px; margin: 5px 0;"></div>
Email	<div style="border: 1px solid black; width: 300px; height: 20px; margin: 5px 0;"></div>

11. Declaration

I have read the *Guide to the Ward Community Fund* and I accept the arrangements described in that guide. I confirm that the information I have given on this form is true. I will inform the council immediately if any of the information I have given on the form changes.

Name	JACQUELINE MARRIOTT
Signature	
Date	27-1-2010

Please send this completed form back to:

Karen Shelton, Member Support Team, 2nd Floor, Town Hall, Leicester City Council, LEICESTER, LE1 9BG.

Fax No: 0116 229 8827