



**ROYAL CANADIAN LEGION
ONTARIO COMMAND**

Application for Special Use of Poppy Funds per Sections 403 ii of the Poppy Manual 2018

PART A *(please type or print)*

Branch Name: _____ Branch No: _____ Date: _____

Complete Address of Branch: _____

Branch Telephone No. _____ Branch Fax / Email: _____

Contact Name: _____ Contact Home Phone: _____

PART B **VALID FOR ONE (1) YEAR FROM DATE OF APPROVAL**

Application for use of funds under the following: **(Check (✓) only one of the following sections per Special Use form) Attach any quotes or invoices required.**

S320 Storage Costs (3 months allowed at \$7.00 per sq. foot) (up to \$350 per year max.)

(Please include the square footage of storage area)

S403 ii.

a. Housing Accommodation or Care Facilities *(Choose one of the following up to 50% max.)*

Purchase Construction Repair Furnish

b. Medical Training and Medical Research *(Choose one of the following up to 50% max.)*

Medical Training Medical Research

c. Medical Appliance

d. Senior Services *(Choose one of the following up to 50% max.)*

Drop in Centres Meals on Wheels

e. Relief of Disasters declared by the Federal or Provincial Government *(up to 50% max.)*

f. Constructing, Maintaining or preserving of local Monuments and Cenotaph *(up to 25% max.)*

g. Support of Cadet Units *(if branch sponsors more than one unit, the total 20% would be divided)*

h. "Annual" Veterans Visit *(include the name/number of veterans, their spouse/caregiver accompanying the Veteran or Veteran's widows/widowers accompanied by a caregiver. Include the date and cost of dinner only. (Up to \$25.00 per plate max.) Excluding any alcoholic beverages or Services e.g. entertainment - see Subsection 403.ii.i. **RECEIPTS MUST BE SUBMITTED***

i. Transportation/Related Services - occasional day trips *(up to 50% max.) See Subsection 403.ii.h.*

j. The installation of an access ramp to the branch entrance and by installing or retrofitting the branch's main entrance with a handicap door operator **OR** the installation, maintenance and repair to the personal lifting devices **OR** the installation of washroom door, toilet, and sink for handicap accessibility *(up to 50% max.)*

- k. The purchase of a coin sorting/counting/wrapping machine (*10% max. of Cost*)
- l. Support of the Veterans Transition Programs (*up to 25% max.*)
- m. Support the costs associated with Service Dogs (PTSD) (*up to 25% max.*)
- n. Support to Resource Centres (*up to 25% max.*)
 - MFRC
 - Other – Supporting Veterans

PART C - To speed the process of Command approval, please supply the following information:

Name(s) of Intended Recipient(s): _____

Description of how funds will be used or item being donated: _____

Current Poppy Account Balance as of the date of the **General Meeting** approved at: \$ _____

Amount Requested: \$ _____ Projected Cost \$ _____

Date of **General Meeting** at which this expenditure has been approved: _____

Motion Moved by: _____ Seconded by: _____

Signed _____ Signed: _____
 Poppy Chairman /Joint Fund Treasurer Branch President /Joint Fund Administrator

COMMAND APPROVAL GIVEN: Yes By: _____ Date: _____

No (More information is required, please complete highlighted areas and return to Command).

Other reasons for non-approval of this request:

If you have questions or comments, please call Ontario Command at 905-841-7999 or fax 905-841-9992.

EMAIL: poppyspecialuse@on.legion.ca