



For Office Use Only

Date:

Year:

Posted:

Application for Special Use of Poppy Funds per Section 403 ii of the Poppy Manual 2023
EMAIL APPLICATION TO poppyspecialuse@on.legion.ca

PART A – Branch Information:

Branch Name: _____ Branch No.: _____ District: _____ Date: _____

Complete Branch Address: _____

Branch Phone No.: _____ Branch Email Address: _____

Alternate Emails: _____

Contact Name: _____ Contact Home Phone No.: _____

PART B – Application for use of funds:

Valid for one (1) year from the date of Ontario Command Approval.

Check (✓) only one of the following sections per Special Use form.

Attach any quotes or invoices required.

S.320 Storage Costs (3 months allowed up to a Maximum of \$350 per year)

- Interior Storage Space (\$7.00/sq. ft./year) Square Footage: _____
 Exterior Warehouse Space (\$3.50/sq. ft./year) Square Footage: _____

S. 403 ii.

a. Housing Accommodation, Care Facility or Hospice (up to 50% max. of current balance)

- Purchase Repair Furnish

b. Medical Training and Medical Research (up to 50% max. of current balance)

- Medical Training Medical Research

c. Medical Appliance (up to 50% max. of current balance)

- Medical Appliance

d. Veteran Services (up to 50% max. of current balance)

- Legion / Branch Drop In
 Other (specific Details Required) _____

e. Relief of Disasters (up to 50% max. of current balance)

- Relief of Disaster declared by the Federal or Provincial Government

f. Monuments – Constructing, Maintaining or Preserving of Monuments

Quote / Receipt must be submitted.

- Local Owned – (25% of current balance is not to exceed one-half (50%) of the total funds required to complete the project)
- Legion Owned – (up to 50% max. of current balance)

g. Support of Cadet Units (up to 20% max. of current balance)

(If branches sponsor more than one unit, the 20% would be divided among the units.)

- Air Cadets
- Army Cadets
- Navy League Cadets
- Sea Cadets
- Junior Canadian Rangers

h. Bi-annual Veterans Visit (up to \$35.00 max. per plate) Receipts must be submitted.

(include all details. i.e. Number of Veterans / Spouse / Caregiver accompanying the Veteran or Veteran's Widow / Widower, date and cost of dinner. This excludes alcoholic beverages or Services e.g. entertainment. See Subsection 403.ii.h.

- Dinner 1

Requirements:

- Dinner 2

- List of Attendees
- Dinner Invoice / Receipt
- Date of Dinner _____
- Cost per Plate _____

i. Transportation (up to 50% max. of current balance)

(for occasional day trips for Veterans)

- Transportation / Related Services

j. Accessibility Modifications (up to 50% max. of current balance)

- Personal Lifting Devices – installation, maintenance, and repair
- Handicap Entrance – installation or retrofitting handicap ramp and door opener (one per branch)
- Washroom Retrofit – installation of washroom door, toilet and sink

k. Coin Sorting Machine (up to 10% of the cost or maintenance) Receipt must be submitted

Group funds or larger Branches may make application under Section 403.ii.k for a greater percentage.

- Coin Sorting / Counting / Wrapping Machine

l. Transition Programs for Veterans (up to 25% max. of current balance)

- Veteran Transition Programs

i. BSO-OSI Veteran's Initiative Programs at Branch Level

- Buddy Coffee Check
 - Specify OSI Branch Host Name _____
 - Specify OSI Branch Host Contact Number _____
- VetBuild
 - Specify OSI Branch Host Name _____
 - Specify OSI Branch Host Contact Number _____

- Other

ii. BSO-OSI Veteran's Initiative Programs at Command Level (for the research, development and evolution of programs and projects.)

- Veteran's Initiative Programs at Command Level

m. Operational Stress Injury Service Dogs (up to 25% max. of current balance)

- Operation Service Dogs

n. Support to Resource Centres (up to 25% max. of current balance)

- MFRC Specify Location: _____
- Other – Supporting Veterans

o. Support to a Visiting Hospice Program (up to 25% max of current balance)

- Visiting Hospice Program – as outlined in Subsection 402.iii.c and 501.iv.f

p. Custom-Made Adaptable Sports Equipment & Recreational Gear

(up to 25% max. of current balance)

- Adaptable Sports Equipment & Recreational Gear

Part C – Application Information

To speed the process of approval at Command, please complete the following section.

Cheque Payable To: _____

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

Current Poppy Account Balance

as of the date of the **Executive or General** Meeting the request was approved at: _____

Amount Requested: \$ _____ Projected Cost: \$ _____

Date of the **Executive or General Meeting** the request was approved at: _____

Motion Moved by: _____ Seconded by: _____

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

Command Approval Given:

Approved - By: _____ Date: _____

Inadmissible - By: _____ Date: _____

Reasons for non-approval of this request: _____

If you have questions or comments, please contact Ontario Command by phone 905-841-7999, fax 905-841-9992 or email poppyspecialuse@on.legion.ca