

# Wood Buffalo Safe/Healthy Community Association

2018 Operating Grant Analysis

## CIP Grant Summary:

2015	2016	2017	2018 Request	2018 Recommended by CIP	Difference of Recommended vs. Requested
150,000	175,000	166,000	149,000	149,000	-

### Program Reporting Required:

Six Month & Annual Reports

### Financial Reporting Required:

Review Engagement Financial Statements

### Notes:

Wood Buffalo Safe/Healthy Community Association has reduced its grant request in 2018 by approximately 10%. Administration will continue to work with this organization to seek out alternative funding sources in the future.

Budget Line Description	2018 Budget Request	2018 Recommended
<b>Revenues</b>		
RMWB 2018	149,000	149,000
Suncor	17,500	-
Syncrude	20,000	-
Casino (Q4)	42,000	-
Coalition Safer 63/881	10,000	-
<b>Total Revenues</b>	<b>238,500</b>	<b>149,000</b>
<b>Expenses</b>		
Salaries, EI, CPP, WCB	172,000	100,000
Insurance	2,056	2,056
Office Rental	10,838	10,838
Storage Rental	1,632	-
Office Supplies/Phone	2,677	1,177
Accounting	5,775	4,929
Professional Development	1,000	-
Rural Programming	26,700	10,000
Impact Youth Programming	45,535	10,000
CHIP Programming	47,635	10,000
<b>Total Expenses</b>	<b>315,848</b>	<b>149,000</b>
<b>Total Surplus (Deficit)</b>	<b>\$ (77,348)</b>	<b>\$ -</b>





### Community Operating Grant Part A - Organization Summary

<b>Organization Name:</b>	WOOD BUFFALO SAFE/HEALTHY COMMUNITY NETWORK
<b>Street Address:</b>	THE REDPOLL CENTRE AT SHELL PLACE, 1 C.A. KNIGHT WAY
<b>City/Hamlet:</b>	FORT MCMURRAY
<b>Province:</b>	AB
<b>Postal Code:</b>	T9H5C5
<b>Phone Number:</b>	780-743-0006
<b>Website:</b>	WWW.SAFECOMMUNITYWB.CA
<b>Fiscal Year End:</b>	DECEMBER 31
<b>Act Registered Under:</b>	Societies Act (Alberta)
<b>Registration Number:</b>	507463339

*Note: Organization must be in good standing to receive funding.*

Main Contact	
<b>Title:</b>	EXECUTIVE DIRECTOR
<b>Name:</b>	GAYLE ST.DENIS
<b>Daytime Phone:</b>	780-743-0006
<b>Email Address:</b>	ED@SCWB.CA
Executive Director	
<b>Name:</b>	GAYLE ST.DENIS
<b>Daytime Phone:</b>	780-743-0006
<b>Email Address:</b>	ED@SCWB.CA
Board Chair / President	
<b>Name:</b>	DEANNA MOSENG
<b>Daytime Phone:</b>	
<b>Email Address:</b>	INFO@SCWB.CA

**Declaration of Board Members** - In making this application, we, the undersigned, confirm that we are authorized by the applicant organization to complete the application and hereby represent to the Regional Municipality of Wood Buffalo's Community Investment Program and declare that to the best of our knowledge and belief, the information provided is truthful and accurate, and the application is made on behalf of the above-named organization and with the Board of Directors' full knowledge and consent.

	
Signature of Board Member (must have signing authority)	Signature of Board Member or Executive Director (must have signing authority)
DAVID MARTIN	GAYLE ST DENIS
Print Name	Print Name
2017-06-12	2017-06-12
Date: (Year-Month-Day)	Date: (Year-Month-Day)

































