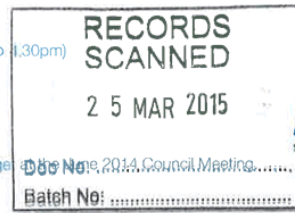


10.4 **Community Donations.DOC**

2015/2016 Community Donations Application

Lodge Applications at Ballina Shire Council - 40 Cherry Street - Ballina (Mon -Fri 8,15am to 4,30pm)
mail PO Box 450 Ballina 2478 - **dx** 27789 - **f** 02 6681 1375 • **e** council@ballina.nsw.gov.au
t 02 6686 4444 • **w** www.ballina.nsw.gov.au • **abn** 53 929 887 389

All applications received will be acknowledged in writing by Council.
 A committee of Council will consider all requests following the adoption of the 2014/15 budget.
 Applicants will be notified once a decision is made in late July/August.



Applications Close: TBA

Guidelines for Approval of Council Donations

Council donations generally do not apply to individuals however in certain circumstances donations may be provided. Refer to Council's website for the following donation related policies:

- * Donations - Financial Assistance Policy
- * Donations - Community Halls Capital Works Assistance Policy
- * Donations - Rates and Charges Policy
- * Donations - Assistance with Council Fees for Community Groups Policy
- * Donations - Financial Assistance
- * Donations - Australian Representation Policy
- * Donations - In-Kind Assistance for Sporting and Cultural Events and Community Works on Public Land Policy
- * Donations - Insurance for Environmental Volunteer Groups Policy
- * Donations - Waste Disposal Fees for Not-for-Profit Groups Policy

In allocating funds Council will give consideration to the nature of the works, the proposed beneficiaries, recent donations to each applicant, alternative funding sources and equity of support across the local government area.

Organisation / Contact Details

Name of Organisation
 GRANT SMITH.

Postal Address
 10 FENWICK DRIVE EAST BALLINA.

Primary Purpose and Activities of Organisation
 AUSTRALIAN MASTERS HOCKEY.

President _____ Treasurer _____ Secretary _____

Contact Person for Application GRANT Phone 66864279 Mobile Phone 0439 771 442

Email gsmith@hybridm.com.au No. Members _____

Is the Group / Organisation GST Registered? Yes No Exempt If yes provide ABN Number _____

Is the Group / Organisation Not-for-Profit? Yes No

Is the Group / Organisation Incorporated? Yes No

Privacy Protection Notice

The completed Community Donations application contains personal information which is being collected for the purpose of processing the application. Provision of the information is voluntary, however, if insufficient information is provided, Council will be unable to process the application. The information will be processed by the General Manager's Group and may be made available to public enquiries under the Government Information (Public Access) Act 2009. The information will be stored in Council's electronic document management system.

10.4 Community Donations.DOC

Summary of Application

Description of Project or Activity (how the donation would be spent, if provided, eg new roof, building a fence, paying for insurance etc)

AIRFARES / ACCOMMODATION AT
TRANS TASMAN TOURNAMENT IN
MELBOURNE FOR MASTERS HOCKEY.
AUSTRALIA.

Please provide details of how you arrived at the estimated total cost of works. Requests for amounts over \$1,000 require at least two written quotes to be provided as part of this application.

Quotation 1	AUSTRALIAN MASTERS HOCKEY COMMITTEE	\$ 2558
Quotation 2		\$
Quotation 3		\$
Comment		

Estimated total cost of project \$ 2558 Amount sought from Council \$ 1000

Copies of quotes must be attached to application

Benefits of the Project to the Community

Please describe why you believe community funds should be applied to your project. Information should include the people/sections of the community that will benefit from the project or activity.

Finances

Briefly describe why you need financial assistance from Council ie. what financial resources are available to you and why are they not sufficient to pay for this project.

10.4 Community Donations.DOC

Financial Information - Community Donation Assessment

This information is being collected to enable Council to assess the financial circumstances of the applicant. The information will only be used for the purposes of this assessment. The form is split into two sections.

Section 1 asks for information in respect to the finances for organisations.

Section 2 seeks information in respect to a particular project or event and is required to be completed by both organisations and individuals.

Section 1 Financial Information (Organisations)

What funds do you have in the bank/invested?
(funds invested include money at call in the bank, on a term deposit or any other style of investment) \$

Details of any property owned either in whole or part

Details of any other assets owned with an estimated value over \$2,000 (eg motor vehicle)

Income received last financial year \$ Expenses incurred last financial year \$

Estimated income this financial year \$ Estimated expenses this financial year \$

Comment

Section 2 Project Finances (Organisations & Individuals)

What is the estimated cost to run the event or complete the project? \$ 2558

Details of Proposed Funding Sources

Council Donation \$ 1000

Own Funds \$ 1558

Other \$

Total \$ 2558

Briefly describe the expenses you expect to incur

From ACCOMMODATION / TRAVEL / UNIFORMS \$

From \$

From \$

If income exceeds expense what will happen to the excess funds?

THESE ARE FIXED COSTS.

Applicant's Signatures

Name (print)
GRANT SMITH.

Position

Signature
Date 10.3.15.

Name (print)

Position

Signature
Date

10.4 **Community Donations.DOC**

Australian Masters Hockey Committee
 Level 5
 409 St Kilda Road
 Melbourne VIC
 ABN 43 522 193 842

COPY.

Invoice To
PO Box 24 Ballina NSW 2478

Invoice

Date	Invoice #
1/02/2015	20777

Terms	Due Date
7 Days	8/02/2015

Item	Description	Amount
Player Contrib TT 2015	This is the 2nd invoice for TT in Melbourne for Grant Smith . For detailed costing please contact your manager. There will be a further adjustment when all invoices are finalised. Please pay as soon as possible. This invoice covers accomodation, uniforms , medical etc. You are staying at the Larwill Studio Motel 2nd to 10th May.(Grant you are all in one room)	2,558.00

PAYMENT OPTION 1 (Preferred)
 BY EFT TO AMHC
 BSB 032569
 ACCOUNT 217550

REFERENCE **Smith 15 TTC 40s**

PAYMENT OPTION 3
 BPAY

BILLER CODE 228833
 REF **101673**

PAYMENT OPTION 2
 BY CHEQUE PAYABLE TO:
 AUSTRALIAN MASTERS HOCKEY
 COMMITTEE

MAIL TO
 G SMITH
 PO BOX 5865
 WEST END QLD 4101

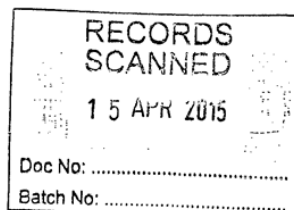
Payments/Credits	\$0.00
Balance Due	\$2,558.00

Tax	\$232.55
------------	----------

10/4/2015.

87 Chickiba Drive
East Ballina NSW 2478

The General Manager
Ballina Shire Council
Po Box 450
Ballina NSW 2478



Dear Paul,

Re: Donation – Australian Representation

I recently attended the Australian Masters Tournament in Darwin for state representation. From this tournament I was lucky enough to be selected for the Australian Masters Team to attend a Trans Tasman Challenge Series in Melbourne ,in May 2015.

The tournament is held over 10 days at Melbourne State Hockey Centre and hosts teams from New Zealand over these days, also there will be many other teams attending and playing in this Series .

As a player, we are responsible for payment of flights, accommodation, coaching/physio staff, nutrition, turf fees and our uniforms, the estimated cost of my trip is \$2,220.

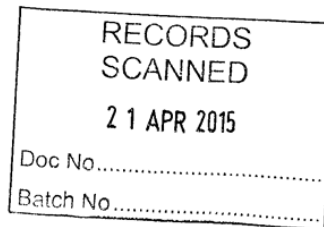
I understand Ballina Shire Council has a gracious policy which may give assistance to shire residents who represent Australia. I would be extremely grateful if I could be considered for some financial assistance. Thankyou for your time and if there is any more information required please let me know.

Yours Sincerely

Michelle Anderson
Mob: 0419024314
Email:hotandos@hotmail.com

17/04/15

Jay Ellis
Ballina Shire Council
Po Box 450
Ballina NSW



Hi Jay,

RE- Invoices for Australian Team

I have attached a few of the invoice that Hockey Australia have sent me so far , Im sorry I couldn't get my flights in a document to print but in total to get to and from Melbourne is \$320 , also I have attended two training sessions in Sydney flight cost are \$396 .Also the letter from Ballina Hockey Club

I hope this is sufficient so far .

Thankyou so much for your reply and I look forward to hearing from you after the May meeting .

Kind Regards

Michelle Anderson
0419024314



17th April,

To Whom It May Concern,

This letter is to confirm that Michelle Anderson is a member of the Ballina Hockey Club, Far North Coast Association and Hockey NSW.

In 2014, Michelle travelled to Darwin to play for the women's NSW O45's Masters team at the National Championships, and was selected to represent Australia at the upcoming Trans-Tasman tournament against New Zealand to be held in Melbourne in May.

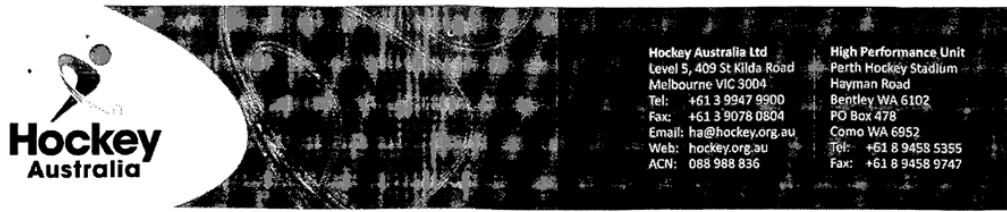
Such a selection is an honour, not only personally to Michelle, but to our club and association. We wish her well in the tournament.

Regards,

Alison Porter

President

Ballina Hockey Club



TAX INVOICE

Invoice To:

Michelle Anderson

A.B.N.: 26 546 955 455

Invoice #: 00143887

Date: 12/03/2015

Due Date: 30/03/2015

Description	Amount	Tax
Uniform (Goodgear; Kukri; Just Hockey)	\$360.00	N-R
Balance of Accommodation	\$360.00	N-R
Team Transport	\$135.00	N-R
Functions	\$135.00	N-R
Training & Match Fees	\$40.00	N-R
Massage/ First Aid Levy	\$25.00	N-R
Other	\$38.00	N-R
GST Included on Sale: \$0.00		

Direct Deposit to Hockey Australia:
 BSB - 083-166
 Account - 50-690-3098
 National Australia Bank
 990 Toorak Road, Camberwell
 Victoria 3124 AUSTRALIA
 SWIFT - NATAAU3303M

Plus Delivery:	\$0.00	GST
Total Incl. GST:	\$1,093.00	
Paid-to-Date:	\$0.00	
Balance Due:	\$1,093.00	

How to Pay:

Powered by **MYOB**



by credit card



To pay via MasterCard or VISA.

by INTERNET: myob.com.au/ezybillpay

by PHONE: 1300 855 558

Minimum payment \$10. Maximum payment \$10,000.

Quote 2000 1806 1438 878



Billor code: 716597

Ref: 2000 1806 1438 878

Minimum payment \$10.

Contact your financial institution to make payment from your bank account (excluding credit cards).

The following biller name will appear on your bank statement - MYOB Pay Services



in person

Present this invoice at any Post Office to make a payment

via cash or EFTPOS. Cheque payments not accepted.

Minimum payment \$10. Maximum payment \$10,000.



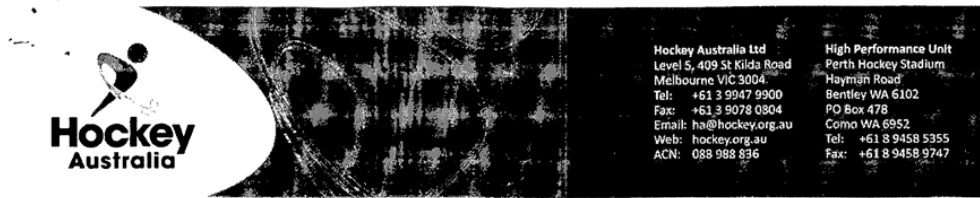
by mail

Detach this section and mail your cheque to Hockey Australia.



*749 200018061438878

Invoice #: 00143887



Michelle Anderson

STATEMENT

DATE: 2/04/2015

DATE	INVOICE NO.	DESCRIPTION	CHARGES	PAYMENTS	BALANCE
29/10/2014	00143329	Sale: Anderson, Michelle	\$220.00		\$220.00

Current(Not Overdue)	30 Days Overdue	60 Days Overdue	60+ Days Overdue	Total Amount Due
\$0.00	\$0.00	\$0.00	\$220.00	\$220.00

How to Pay

Powered by **MYOB**



by credit card

To pay via MasterCard or VISA
 by INTERNET: myob.com.au/ezybillpay
 by PHONE: 1300 855 558
 Minimum payment \$10.00. Maximum payment \$10,000.
 Quote Ref: 2000 1806 1433 298



Billers 716597
 Ref: 2000 1806 1433 298

Contact your financial institution to make this payment from your bank account (excluding credit cards).
 Minimum payment \$10.00.
 The following biller name will appear on your bank statement - **Hockey Australia**



by mail

Detach this section and mail your cheque to...
Hockey Australia Limited
 Level 5, 409 St Kilda Road, Melbourne VIC 3004



in person

Present this invoice at any Post Office to make a payment via cash or EFTPOS. Cheque payments not accepted.
 Minimum payment \$10.00. Maximum payment \$10,000.



Statement 00143329 Amount \$220.00

10.4 Community Donations.DOC

From: Ina LeBas <macbas@iprimus.com.au>
Sent: Wednesday, 22 April 2015 1:19 PM
Subject: Leisure Centre Alstonville

As president of the 150th Celebration Committee for Alstonville's Sesqui Centenary I am writing to ask Council to waive the fee for using the Leisure and Entertainment Centre in Alstonville for the special dinner on the 5 September 2015.

The Manager of the Centre supports me in this regard and Cr. David Wright, at a C Ward Council Meeting, alerted me to write to ask for this fee to be waived in these special circumstances.

Warm regards

Ina le Bas



YOGAWISE



R.O.L.E.
Rivers, Oceans, Lands, Ecology
FOUNDATION

Charity Yoga Event

Create A Better Future Through YogaWISE 2015

Be part of this global event with Yoga studios across the world to make a difference! Through YogaWISE we partner with BaliWISE to change the lives of vulnerable young women in Bali – helping them to escape poverty and build a brighter and economically sustainable future for themselves and their families through education.

One hour Akhanda (holistic) Yoga Class
on top of Lennox Head Point (up the stairs)

Saturday 2 May
7.30am to 8.30am

BYO Water Bottle, Yoga Mat or Towel

Collaborative class by

Jessica Cohen (Ujali Yoga Lennox Head)
Vicki Veitch (Seven Mile Yoga Lennox Head)



इदम एव लोके पुण्ड्रं



Class by donation on the day or at
www.rolefoundation.org/donate/

For more details go to
www.ujaliyoga.com

Stay updated by liking our Facebook page: Ujali Yoga
Phone: 0468 348 015
ujaliyoga@gmail.com

Through Yoga and YogaWISE we can create a better world - one life at a time, Namaste!

10.4 Community Donations.DOC

Ballina Shire Council
 Community Facilities
 1 Mackney Lane
 Lennox Head, Australia, NSW 2478
 Phone: 02 6687 6291
 Fax: 02 6687 6253



Bill To
 JESS COHEN
 2/12 WILLIAMS ST
 LENNOX HEAD, NSW 2478
 UJALI YOGA

Invoice Number 202235
 Invoice Date 04/05/2015
 Payments Due 1x by 04/05/2015
 Created By Peta Townsend

Invoice

Billed Items					
	Unit Price	Quantity	Discount	Revenue	Total
Date:	04/05/2015	Client: JESS COHEN	Title:	LHCCC - Room Hire	
Description:	LHCCC: Auditorium: Community: Hour				
Extra Info:	Auditorium / Sports Hall Sat 02/05/2015 7:30 AM-8:30 AM				
	\$40.00	1	\$0.00	\$40.00	\$40.00
Totals:	\$40.00	1	\$0.00	\$40.00	\$40.00

Payment Schedule and History							
Date	Receipt #	Due	Paid	DueToDate	PaidToDate	BalanceTo Date	Payment Method
04/05/2015		\$40.00	\$0.00	\$40.00	\$0.00	\$40.00	

TAX INVOICE

All Prices are Inclusive of GST

Ballina Shire Council

ABN 53 929 887 369

PAYMENT OPTIONS

Our telephone and internet payment service for credit card payments is provided by the Commonwealth Bank of Australia - BPOINT ®

We accept Visa or MasterCard credit cards.

A surcharge of **0.5%** will be applied to all **credit card payment** transactions.

10.4 Community Donations.DOC

IN PERSON

Pay by **EFTPOS**, **credit card** (Visa or MasterCard only), or **cheque/ money order** (please make payable to **Ballina Shire Council**) by visiting us at;

Lennox Head Cultural & Community Centre
Cnr Park Lane & Mackney Lane
Lennox Head NSW 2478
8:30am - 4:30pm Monday - Friday

TELEPHONE

Call **1300 BPOINT (1300 276 468)** to pay using your credit card (Visa or MasterCard only).

You will be required to enter our **Bill Code of 171717** and your **(6) digit invoice number**, which is printed in the top right hand corner on the front page of this document.

INTERNET - (Credit Cards Only)

Visit the **payments page** of our website at www.ballina.nsw.gov.au or visit www.bpoint.com.au to pay using your VISA or MasterCard **credit card** via BPOINT®.

Our **Bill Code is 171717** - Enter your (6) digit **invoice number**, which is printed in the top right hand corner on the front page of this document. You will also be required to enter your "**Customer Name**".

BANK DEPOSIT (Electronic Funds Transfer - EFT)

Deposit your payment into our **bank account** via EFT.

Commonwealth Bank **BSB: 062-502**
Ballina Shire Council - Community Facilities **Account Number: 10444189**

Please enter the **invoice number** you are paying and your abbreviated **name** in the **reference field**.

MAIL

Please make your cheque or money order payable to **Ballina Shire Council** and mail to:

Ballina Shire Council
C/- Lennox Head Cultural & Community Centre

10.4 Community Donations.DOC

**1 Mackney Lane
LENNOX HEAD NSW 2478**

BPOINT® Registered to Commonwealth Bank of Australia ABN 48 123 123 124