

SHOTTON TOWN COUNCIL
CYNGOR DREF



APPLICATION FOR FINANCIAL ASSISTANCE 2024/2025

All organisations must hold a bank account in the name of the organisation.

NB. Financial assistance may not be provided without this.

PLEASE COMPLETE THIS FORM FULLY IN BLOCK CAPITALS.

Closing Date for all applications: 18 October 2024

NAME OF ORGANISATION (If successful, this should be the same name as the cheque Payee)	
NAME AND FULL ADDRESS (INC POSTCODE) OF OFFICERS AT THE ORGANISATION CHAIR SECRETARY TREASURER (Please advise who the community council should respond/write to?)	
PLEASE TELL US THE AIMS OF THE ORGANISATION? WHAT ACTIVITIES DO YOU UNDERTAKE?	
IS THE ORGANISATION OPEN TO ALL SHOTTON RESIDENTS? (If No, please explain why?) WHAT AGE RANGE IS CATERED FOR?	

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<p>HOW MANY PEOPLE IN TOTAL USED THE SERVICE DESCRIBED IN 2023/2024?</p> <p>HOW MANY OF THOSE WERE RESIDENTS OF SHOTTON?</p>	
<p>TOTAL INCOME 2023/2024</p> <p>TOTAL EXPENDITURE 2023/2024</p> <p>Any comments to explain the figures?</p> <p>How much financial assistance is the organisation requesting?</p>	
<p>PLEASE TELL US HOW YOUR WORK BENEFITS THE RESIDENTS OF SHOTTON?</p> <p>WHAT WOULD FINANCIAL ASSISTANCE FROM SHOTTON TOWN COUNCIL ENABLE YOU TO DO?</p>	
<p style="text-align: center;">PLEASE SIGN AND DATE</p> <p>CHAIRMAN</p> <p>TREASURER</p>	<p>Signature.....date.....</p> <p>Signature.....date.....</p>
<p>If necessary, an A4 sheet with further information can submitted with this form.</p>	

Please send the completed form to:

Mrs C Lowry – Clerk and Responsible Financial Officer,
Shotton Town Council
Town Council Offices,
Alexandra Street,
Shotton,
Flintshire,
CH5 1DL
townclerk@shotton-tc.co.uk