

Community Grants 2022

Application Form

Your Organisation Organisation Name				
Mapua and Districts Community Assocaition(MDCA)				
Your Project Describe your proje	ect in detail.			
AED repair and rep	placement			
	unity AED's in Mapua / Ruby ing campaing ran by the MDC s			
The MDCA has a "pot" of money that is uses to pay for new parts after an AED is used or at the end of their useful life (5 years). The fund has been depleted by replacing parts in 3 units at the end of their life, after a successful use at Easter weekend and in a vandalised unit.				
The cost to repair the vandalised unit was \$331.95 which the business owner helped with 50% of costs. Repacement pads and batteries cost \$219.82 and \$99 repsectively.				
The MDCA hopes to arrange training for AED use at a cost of \$285				
How will it benefit	the community?			
Responders reach	D's mean that they can be us Mapua / Ruby Bay. Having a AED at the Mapua Community	an AED meant that a perso	on was helped on Easter	
Project Start Date:	now	Project End Date:	ongoing	
Project Location:	Mapua / Ruby Bay	Expected number of part		

Your Project Budget

Project Income: Please list all income for the project, including grants you have received or applied for; cash; and in-kind or volunteer time contributions.

Income item		Amount		
Grants applied for (outcome unknown)		0.00		
Grants applied for (successful outcome)		0.00		
Dollar value of volunteer labour		300.00		
Dollar value of in-kind contributions				
Cash		58.74		
Other (please describe)				
TOTAL		358.74		

Project Expenses: Please list all expenses for the project, briefly describing what the expense is.

Expense item	Value		
Dollar cost of volunteer labour hours (copied from income above)		300.00	
AED use training		285.00	
Replacement batters x 2		198.00	
Replacement pads x 2		439.64	
TOTAL		1,222.64	

Project Shortfall: This calculated value should match the Requested Amount on your online application.

Project Shortfall	Value
Amount requested (expenses minus income)	863.90

Declarations

We declare that the information supplied here on our behalf is correct. If the application is successful, we agree to:

- 1. Return the Project Report Form (Accountability Form) by the end of June 2023. We understand that failure to do so will result in ineligibility for the next year's funding scheme.
- 2. Participate in any funding audit of our organisation or project conducted by or on behalf of Tasman District Council.

Declared by (name)	Aileen Connell	on (date)	5/6/22
And (name)		on (date)	