

**TONYREFAIL & DISTRICT COMMUNITY COUNCIL**  
*S137 OF THE LOCAL GOVERNMENT ACT 1972*

**Application Form for Voluntary Organisations for Financial Assistance 2013/14**

**Name of Organisation:** \_\_\_\_\_

**Total Number of Members:**  **No. of Members Residing in Tonyrefail Community Council Area:**

**Does your organisation receive a subsidy/grant from elsewhere? YES/NO** If yes how much was awarded:

**TOTAL INCOME:** £  **EXPENDITURE DURING YEAR:** £  **BALANCE:** £   
(inc. Balance B/Fwd)

**Responsible Officer:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Post Code:** \_\_\_\_\_

**Daytime Telephone No:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**PURPOSE FOR WHICH GRANT IS REQUIRED:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**A certified current Balance Sheet for the last completed financial year must be forwarded with this application and forwarded to:**

*Mrs. Pauline Williams – Clerk  
Tonyrefail & District Community Council,  
Trane Cemetery, Gilfach Road, Tonyrefail  
Porth, CF39 8HL  
Tel: (01443) 673991*

**NOT LATER THAN: FRIDAY 30<sup>TH</sup> AUGUST 2013**

***N.B. Should an organisation knowingly submit false information when making an application for a grant then the Community Council may withhold payment of a grant to that organisation.***

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In the event of an organisation ceasing to function within 12 months of receiving a grant from the Community Council, the Community Council reserves the right to request the repayment of part, or the entire grant.