MUNICIPALITY OF BARRINGTON GRANTS TO ORGANIZATIONS

RECEIVED
JUL 2 6 2021

APPLICATION FORM

| NAME OF APPLICANT ORGANIZATION: Good Will Club |
|--|
| CONTACT PERSON: Shirley Ross |
| ADDRESS: _ 2283 Highway 3, Barrington NS. |
| TELEPHONE: 902-575-2043 EMAIL: jorgensen@lastlint |
| NS REGISTRY OF JOINT STOCKS NUMBER: 1267104 |
| FEDERAL CHARITABLE STATUS NUMBER: 800404246 CRA# 1267104 |
| If you do not have either of the above numbers, provide the name and contact information of the organization that you are affiliated with: |
| 1. PLEASE INDICATE THE GRANT AMOUNT FOR WHICH YOU ARE APPLYING: |
| \$ 500.00 |

2. IF YOU ARE APPLYING FOR FUNDING FOR A CAPITAL PROJECT/PROGRAM/ SERVICE, PLEASE LIST ALL SUPPORT THAT HAS BEEN APPLIED FOR (monetary and in-kind):

| FUNDING BODY | REQUESTED | CONFIRMED |
|-----------------------|-----------|-----------|
| FEDERAL GOVERNMENT | \$ | \$ |
| (List Dept/Agency) | \$ | \$ |
| | \$ 1.1 | \$ |
| | \$ | \$ |
| PROVINCIAL GOVERNMENT | \$ | \$ |
| (List Dept/Agency) | \$ | \$ |
| | \$ 1 | \$ |
| | \$ | \$ |
| MUNICIPAL GOVERNMENT | \$ | \$ |
| | \$ | \$ |
| | \$ ~ '/ | \$ |
| | \$ //// | \$ |
| OTHER FUNDERS | \$ | \$ |
| | \$ | \$ |
| | \$ n/ | \$ |
| | \$ | \$ |

Since Renewal for Joint Stocks was blecktly mailed a copy was sent with this pp.

3. PLEASE IDENTIFY THE COMMUNITY, AREA AND/OR GROUP(S) YOUR ORGANIZATION SERVES:

The Good Viel Club, Barrington M.S. 15the sation who raise funds through quelting sole. Our primary arrange of sation for sole of sole of seated in Barrington to assist with their yearly upheep. The cleb sole regularly supreouts Yamouth Regional Hespital, Western Shelbarne County Health Care, and other needy careeses.

4. PLEASE DESCRIBE YOUR ORGANIZATION'S SPECIFIC PROJECT/PROGRAM/ SERVICE (if additional space is required, please attach a separate sheet):

The purpose of the slub is to maintain our historical bailding (1800's) so that somior Lader can hand quiet and have fund through orles. We are seeking a grant of 500.00 to help for the installmation of a writer, pump. There were ago we had a direct water live access but this was tornumted. This carried much converse took we had a direct water having no numbers regarding bethrown and kitchen facilities have having no rempeter labeling to their will be tween the two buildings. Having no, pump the lub has had to purchase and install a pump of our own to cornect to be well attached find build from Wyatt's Plumbing had of 524.40 and a relion's Bill of 498.21 and South West Electric of 122.05

5. PLEASE DESCRIBE THE BENEFITS YOUR PROJECT/PROGRAM/SERVICE WILL PROVIDE TO THE COMMUNITY AND/OR MUNICIPALITY:

| The leanabet of our project is a head | a benefit |
|--|-----------|
| The hendred of our project in a heade to the Ladies who use the building on | a regular |
| sweeksy basis | <u> </u> |
| The alube met only raises money for or | in charty |
| endenours but also serves do a mees | hing ! |
| place for senior Ladies to gather, wo | |
| Totalize on a sweeply Pravis. | |
| | |

6. PLEASE ATTACH A COPY OF THE FINANCIAL STATEMENT FOR YOUR ORGANIZATION.

7. PLEASE LIST YOUR BOARD OF DIRECTORS OR ORGANIZING COMMITTEE **MEMBERS:**

| NAME | POSITION | ADDRESS | TELEPHONE |
|--------------------|----------------|------------------|------------|
| Phyllis Cunnindoan | President | Contreville, CSI | 635-1255 |
| Elizabeth Scott | Vice-President | Barrington | 637-2707 |
| Carole Wilson | Member | Barrington | 637-3847 |
| Mary Townsend | menber | Barrington | 637-2531 |
| Rachel Nickerson | secretary | Barrington | 637 - 3227 |

8. PLEASE ENSURE YOUR SUBMISSION INCLUDES THE FOLLOWING:

☑ COMPLETED APPLICATION FORM

PROOF OF CURRENT REGISTRATION AS A NON-PROFIT OR CHARITABLE **ORGANIZATION**

MOST RECENT FINANCIAL STATEMENT

YOUR ORGANIZATION'S BUDGET FOR THE UPCOMING YEAR OR PROJECT

| • | AT | THIT | AD | TO | A PRITE | TEA |
|---|----|-------|--------|----|---------|-----|
| u | Δ | 1 I H | 4 1114 | | A II II | ON. |

Application prepared By:

(Contact Person)

Board/Committee:

(Signing Officer)

Print

10. SUBMISSION:

MAIL: MUNICIPALITY OF THE DISTRICT OF BARRINGTON

GRANTS PROGRAM

P.O. BOX 100

BARRINGTON, NS

BOW 1EO

EMAIL: info@barringtonmunicipality.com

DROP OFF: 2447, Highway #3, Barrington, NS ONLINE: www.barringtonmunicipality.com

GOOD WILL CLUB OF BARRINGTON

FINANCIAL REPORT 1 APRIL 2021-30 JUNE 2021

CLOSING BALANCE 31 MARCH 2021

\$5256.88

INCOME 1 APRIL - JUNE 30 2021

DUES & COLLECTIONS. 57.75

QUILT (M. NEWELL) 200.00 (J. HARRIS) 180.00

FANCY WORK 15.00

TOTAL 452.75

EXPENSES 1 APRIL - JUNE 30 2021

MAINTENANCE:

J. KENNY (OIL) 414.39

WILSONS HOME HARDWARE

(PUMP) 498.21

WYATT'S PLUMBING 524.40 SOU'WEST ELECTRICAL 122.05

PROPERTY TAXES 52.50

N.S. POWER 39.28

QUILT BINDING 30.00

MISC GROCERY (T. PAPER) 5.75

TOTAL 1686.58

BALANCE 30 JUNE 2021 \$ 4023.58

Balance as of June 30, 2021

Expenses from June 30 - Dec. 31, 2021

| July 2021 Reg. of Joint Stocks | \$ 31.35 |
|--------------------------------|----------------|
| June-Dec. 31,2021 N.S. Power | 200.00 |
| Municipal Sewage Fee | 85.00 |
| Building Insurance | 585.00 |
| Donation to Riverdale Cemetery | <u>1000.00</u> |
| Tatal Communication | 04004.05 |

Total Expenses \$1901.35 \$3355.58

\$5256.88

Income Projections for June 30 - Dec. 31, 2021

 Quilting
 \$ 800.00

 Collection
 300.00

 Total Income
 \$1100.00

Total Income \$1100.00 \$1100.00

Projected Balance for December 31, 2021 \$4455.58

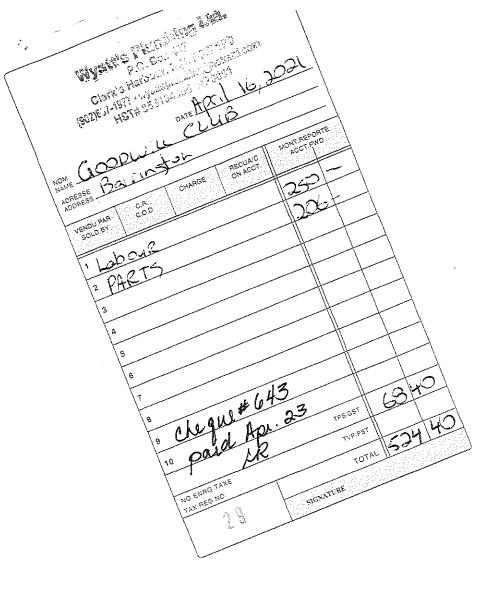
GOODWILL CLUB - ANNUAL REPORT 2020

Expenses

| Quilting supplies Registry of Joint Stocks Maintenance | | | \$125.00 31.15 |
|--|-----------------|----------------|---|
| N.S.Power | 325.15 | | |
| Ocean Computer Civic No Causeway Interiors - Paint | 28.75 147.18 | | |
| Tim's Touch Up Renos - Painting | - | | |
| Fire & Sewer Tax | 140.72 | | |
| Insurance | 528.00 | | |
| moditation | 1561.13 | • | 1561.13 |
| 4. Donations | .007,70 | | 1001.10 |
| Western Shelb. Co. Health Soc. | 200.00 | | |
| Yarmouth Hospital Foundation | 200.00 | | |
| Legion Wreath Nov.11 | 50.00 | | |
| • | 450.00 | | 450.00 |
| Misc. Sobey's / No Frills | | | <u> 28.91</u> |
| | | Total Expenses | \$2196.19 |
| | | | |
| Revenues | | | |
| Collection & Dues Quilting & Craft Sales Donations Mun. of Barrington Grant | | | 175.35 849.00 200.00 <u>500.00</u> |
| | | Total Revenue | \$1724.35 |

<u>Summary</u>

| Balance Forward January 1, 2020 | \$5287.46 |
|---------------------------------|----------------|
| Revenue 2020 | <u>1724.35</u> |
| | 7011.81 |
| Expenses | 2196.19 |
| Balance December 31, 2020 | \$4815.62 |





GOODWILL CLUB % SHIRLEY ROSS 2283 HWY 3 BARRINGTON NS BOW 1EO SHIP

135543-00 BC5438-00

PH.

WILSON'S SHOPPING CENTRE LTD. P.O. BOX 70 **BARRINGTON PASSAGE** NOVA SCOTIA BOW 1G0 PHONE (902) 637-2300 FAX (902) 637-2517

| Date | Loc | Invoice No. | |
|----------|------|--------------|----|
| 04/23/21 | 01 | AZ2126 | |
| Time | hete | mer PO Soles | ,, |

12:42 LRA

Loaded by: Checked by: Delivered by

575-2043

| Stockkeeping Journal Shipped UM RECEIVED ON ACCOUNT New Account Balance CK 498.21 Sub Total GST/HST PST OO TOTAL 498.21 | | | | | PH. *** PAYMENT *** | 575-1 | 2043 | Loaded by: | Checke | d by: | Delivere | d by: |
|--|------------|---------|-----|-------------|--|------------|---------------------------------------|------------|--------|-------|----------|-------|
| New Account Balance OR A98.21 CK 498.21 Sub Total GST/HST PST OO OO 498.21 | | | | Item Number | An early and a good first field report till and an analysis of the property of | | | | | | | TL |
| New Account Balance OR A98.21 CK 498.21 Sub Total GST/HST PST OO OO 498.21 | Ordered | Shipped | U/M | | Indian di Antika karat da kampatan karangan da karangan di Antika da Karangan di Antika karangan di Karangan d | Quantities | | Price | U/M | 11.00 | nount | a o |
| Sub Total 498.21 Sub Total GST/HST PST00 | | | | Dal FWG ROA | RECEIVED ON ACCOUNT | | | | | 4. | 98.21 | |
| Sub Total GST/HST PST 498.21 GST/HST PST .00 | | | | | New Account Balance | | | .00 | | | | |
| Sub Total GST/HST PST 498.21 GST/HST PST .00 | | | | | 642 | O.F. | | 400.01 | | | | |
| Sub Total GST/HST PST 498.21 GST/HST PST .00 | | | | | 042 | , CK | | 498.21 | - | | | |
| Sub Total GST/HST PST 498.21 GST/HST PST .00 | | | | | , | 12 | | | ! | · | | |
| Sub Total GST/HST PST 498.21 GST/HST PST .00 | | | | |) يو ا | 14 | | | | | | |
| Sub Total GST/HST PST 498.21 GST/HST PST .00 | | | | | | | | | į | | | |
| Sub Total GST/HST PST 498.21 GST/HST PST .00 | | | | | | | | | | | | |
| Sub Total GST/HST PST 498.21 GST/HST PST .00 | | | | | Cw V | | | | | | | |
| Sub Total GST/HST PST 498.21 GST/HST PST .00 | | | | | | | | | | | | |
| GST/HST PST | | | | | | | | | | | | |
| GST/HST PST | Septiment, | | | | | | | | İ | | | |
| GST/HST PST | | | | | | | | | | | | |
| GST/HST PST | | | | | | | | | | | | ! |
| GST/HST PST | | | | | | | | | | | | |
| GST/HST PST | | | | | | | | | : | | | |
| GST/HST PST | | | | | | | , | | | | | |
| GST/HST PST | | | | | | | | | 1 | | | |
| GST/HST PST | | | | | | | | | ; | | | |
| GST/HST PST | | | | | | | | | | | | |
| GST/HST PST | | | | | | | | | | | | ; |
| GST/HST PST | | | | | | | | | | | | |
| GST/HST PST | | | | | | | | | İ | | | |
| GST/HST PST | | | | | | | | | | | | |
| GST/HST PST | | | | | | | | | | | | |
| GST/HST PST | | | | | | | i i i i i i i i i i i i i i i i i i i | | | | | |
| GST/HST PST | | | | | | | | Cul T : | | ДС | 8 21 | |
| PST | | | | | | | | | | 2) | | |
| 498.21 | | | | | | | | | } - | | .00 | |
| | | | | | | | | TOTAL | - | 49 | 8.21 | ! |

NCE CHARGE will be added to your count if it is not received and paid in full by

e last day of the month following, ne FINANCE CHARGE is computed by plying a periodic rate of 2% per month. NNUAL PERCENTAGE RATE 26.82%

Check your load - no adjustments made if not called to our attention at time of delivery

All returns must be accompanied by your sales invoice,

10% re-stocking charge on return of special orders.

MERCHANDISE RECEIVED COMPLETE AND IN GOOD CONDITION.

Thank You CUS OMER

H.S.T. REGISTRATION NO. R 105703011

Sou'West Electrical Limited

RESIDENTIAL • COMMERCIAL INDUSTRIAL • MARINE WIRING

Invoice 693

Date:

04/26/2021

P.O. number:

H.S.T.

130366495

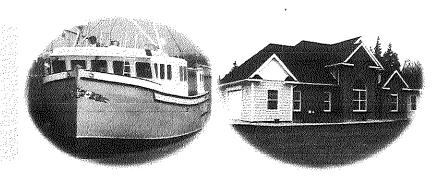
P.O. Box 80 Barrington, Shelburne Co., Nova Scotia, B0W 1E0 (902) 637-3788

Sold to:

BETTY OR TRUDY SCOTT GOOD WILL CLUB BOX 291, 2362, HWY 3 BARRINGTON NOVA SCOTIA Canada BOW 1E0

Reference: IN

INSTALLED PLUG FOR PUMP



| Description | Quantity | Unit Price | Total Price | |
|--|-----------------------|--------------|-------------|--|
| General/Automation | | | | |
| 14/2 NMD LOOMEX | 30 U | \$0.70 | \$21.00 | |
| 1104L WALL BOX | 1 U | \$5.71 | \$5.71 | |
| 5 A DUPLEX RECEP 2 POLE TAMPER (WHITE) | 1 U | \$2.79 | \$2.79 | |
| UPLEX PLUG COVER (WHITE) | 1 U | \$0.54 | \$0.54 | |
| –∠0-20 CONN SNAP-IN rat | 1 U 🖖 🤭 | \$0.53 | \$0.53 | |
| SQ. "D" 15 AMP SP BREAKER | 1 U | \$15.56 | \$15.56 | |
| | Sub-total for section | n Material : | \$46.13 | |
| abor | | | <u> </u> | |

| Labor | | | | | | <u> </u> |
|-------------|------------|-----------------|---------------------|--|-------------|----------|
| Description | | | Quantity | Unit Price | Total Price | |
| ROB | | | 1.00 h | \$60.00 | \$60.00 | |
| | | | Sub-total for secti | ion Labor : | \$60.00 | |
| | , 21 , W | | | Sub-total | \$106.13 | |
| a. A. | 1 to a fin | | | H.S.T. | \$15.92 | |
| Pain | | i Ge Spin | | and the second s | | |
| | | | | Total | \$122.05 | |

THANK YOU FOR YOUR BUSINESS

PAYMENT IS DUE UPON RECEIPT OF THIS INVOICE A MONTHLY SERVICE CHARGE IS PAYABLE ON OVERDUE ACCOUNTS AT A RATE OF 2% PER MONTH (24% PER ANNUM NOMINAL) COMPOUNDED MONTHLY.



Renewal Notice

Societies Act

Registry ID: 1267104

MARY E TOWNSEND GOOD WILL CLUB 80 FACTORY HILL ROAD BARRINGTON NOVA SCOTIA BOW 1E0

Amount due:

Due date:

\$31.15

31 July 2021

You can complete your renewal online at:

rjsc.novascotia.ca

Create a free account to quickly update your business information and renew your registration. Get started at rjsc.novascotia.ca

Step 1: Sign in or create an account

Step 2: Search for your Society by name or RJSC number under

"Renew or update my business or non-profit"

Step 3: Click "Renew Registration"

Annual Filing Requirements

- Annual Statement
- Annual Registration Fee
- · Financial Statements

The Annual Statement and Annual Registration Fee must be filed together. Financial Statements must be filed 14 days after the Society's Annual General Meeting. Financial Statements must be signed by the society's auditor, or if there is no auditor, by two directors. If all annual filings are not received by your due date your registration will be revoked.



| Email Address: Jorgens en @ east | [will not be viewable by the public] I related communication by email. | | |
|--|--|--|--|
| Other options to renew: | | | |
| Complete the Annual Statement form and mail to Registry of Joint Stock Companies, PO Box 1529, Halifax, NS B3J 2Y4 or deliver in person to any Access Nova Scotia location. | | | |
| Payments made by cheque must be in Canadian funds, payable to: Registry of Joint Stock Companies. Cheques cannot be post-dated. The information included in this page will not be made available to the public. | | | |
| Cheque Money order Visa MasterCard American Express | | | |
| Credit card account number | Phone | | |
| | | | |
| Card holder's name (PLEASE PRINT) | Expiry month Expiry year | | |
| | | | |
| Signature | | | |



Annual Statement

Societies Act

Registry ID: 1267104

Name

GOOD WILL CLUB

You can complete your renewal online at:

rjsc.novascotia.ca

If you prefer to send your renewal by mail, review the information below and mail it back to the Registry of Joint Stock Companies.

Entity Type Society

Use this form to change the following:

- 1. Registered Office Address
- 2. The Recognized Agent
- 3. Names of Officers and Directors
- 4. Change of addresses

Do not use this form to change the name of a Society or the Recognized Agent. Visit rjsc.ca for additional information and the form required to make these changes.

Information on record as of: 15 June 2021

| | No changes required - all information in this annual statement is still correct. | |
|---|--|--|
| V | Changes required - please make the following changes as indicated. | |

REGISTERED OFFICE

INDICATE ANY CHANGES

Civic Address: (in Nova Scotia) 2362 HIGHWAY #3

BARRINGTON, NS, BOW 1E0

Mailing Address: PO BOX 187

BARRINGTON, NS, BOW 1E0

Changedto: 2283 Highway #3
Barrington NS BOW I EO

RECOGNIZED AGENT

Name and Civic Address: (in Nova Scotia) MARY E TOWNSEND

80 FACTORY HILL ROAD **BARRINGTON NOVA SCOTIA BOW 1E0**

Mailing Address: (in Nova Scotia) 80 FACTORY HILL ROAD

BARRINGTON NOVA SCOTIA BOW 1E0

INDICATE ANY CHANGES



Service Nova Scotia

Registry of Joint Stock Companies

Financial Reports
Societies Act
Page 1 of 2

| for the fiscal period ending | |
|---|--|
| <u> </u> | |
| | 20 |
| Income Membership fees Fund raising - Quilting, Crafts, raffles Other revenue - Donations Other revenue - Municipal Grant A. Total Income | 175 849 200. 500. 1724. 0 |
| Expenditures Administration — Joint Stocks Education and training. Insurance Professional fees Guilting supplies Salaries Community projects Other expenditures Other expenditures B. Total Expenditures | 31 528 135 14651 1047 21960 |
| C. Net Surplus or (Deficit) (A - B = C) | - 472.0 |
| D. Surplus or (Deficit), beginning of year | 5287 |
| E. Surplus or (Deficit), end of year (C + D = E) | 4815.0 |
| Auditor or Director: Director: (signature) Director: (signature) | e) |
| Phyllis S. Cunningham Shirly (name) | <u> 1655 </u> |

STATEMENT OF INCOME AND EXPENDITURES FOR

(name)



Service Nova Scotia

Registry of Joint Stock Companies

Financial Reports
Societies Act
Page 2 of 2

| BALANCE SHEET FOR | |
|---|------------------------------------|
| Good Will Clab (society name) | |
| for the fiscal period ending <u>2020 - /2 - 3 /</u> (yyyy/mm/dd) | 20 |
| Assets | |
| Current Assets Cash and deposits Accounts receivable | <u>48/5.</u> |
| Prepaid expenses Capital/Fixed Assets Equipment Land and buildings | 1000. 27900 |
| Other capital/fixed Assets A. Total Assets | 33715.0 |
| Liabilities Current liabilities Amounts payable Taxes payable Long Term Debt Mortgage Other B. Total Liabilities | NIL NIL NIL NIL |
| Equity Retained earnings/deficit General reserve C. Total Equity | 4815 2 6 900. 33415.0 |
| Total Liabilities and Equity (A must equal B + C) 0 | 0 |
| Auditor or Director: Director: (signature) | Pass_ |
| Phyllis S. Cunningham (name) | |



Annual Statement

Societies Act

Registry ID: 1267104

DIRECTORS

INDICATE ANY CHANGES (NO P.O. BOX)

ELIZABETH SCOTT 11 TOM'S ROAD BARRINGTON NS B0W 1E0

LILLIAN PERRY 324 RIVER ROAD RIVERHEAD NS BOW 1E0

MARY TOWSEND 80 FACTORY HILL ROAD BARRINGTON NS BOW 1E0

PHILLIS CUNNINGHAM 1372 ROUTE 330 CENTERVILLE NS BOW 2G0

RACHAEL NICKERSON 69 PETTICOAT LANE BARRINGTON NS BOW 1E0

TRUDY-SCOTT
24-TOM'S ROAD
BARRINGTON NS BOW 1E0-

resigned

OFFICERS

INDICATE ANY CHANGES (NO P.O. BOX)

PHILLIS S. CUNNINGHAM 1372 ROUTE 330 CENTERVILLE NS BOW 2G0

Office Held: President

ELIZABETH SCOTT 11 TOM'S ROAD BARRINGTON NS BOW 1E0 Office Held: Vice-president

ELIZABETH SCOTT 11 TOM'S ROAD BARRINGTON NS BOW 1E0 Office Held: Vice-president

RACHAEL NICKERSON 69 PETTICOAT LANE BARRINGTON NS BOW 1E0 Office Held: SECRETARY "647" #00353m010# 49m33567"