



SCHEDULE "A"

RECEIVED

OCT 25 2022

MUNICIPALITY OF BARRINGTON
APPLICATION FORM

GRANTS TO NON-PROFIT ORGANIZATIONS, CEMETERIES, COMMUNITY HALLS, SOCIETIES AND
MUSEUMS - Maximum of \$500

NAME OF APPLICANT ORGANIZATION: Barrington Ground Search & Rescue
CONTACT PERSON: David W. Nickerson (President) Jeff Gregory (Treasurer)
ADDRESS: 65 Island View Drive BOX 7 Comp 4 Barrington NS BOWIEO
TELEPHONE: _____ EMAIL: chickerson82@hotmail.com
NS REGISTRY OF JOINT STOCKS NUMBER: 89261 5048 RR 0001
FEDERAL CHARITABLE STATUS NUMBER: _____

1. Please indicate the grant amount for which you are applying: \$ 402.49

2. Please identify the community, area and/or group(s) your organization serves:

We Serve all of Shelburne County. At times provide mutual aid to other teams in NS6SAR.

3. Please describe your organization's specific project/program/service:

Recently installed cell phone booster in BGSAR/Emo command hall. Without this phone calls were being missed and or not recieved.

4. Please provide a list of your membership including name, position, address and telephone number:

NAME	POSITION	ADDRESS	TELEPHONE
David W. Nickerson	President	6938 Woods Herb NS	902 635-3127
Lewis Ross	Vice President	Clam Point NS	902 637-8097
Jeff Gregory	Treasurer	65 Islandview Dr.	902 637-2962

5. Authorization:

Application prepared By: David W. Nickerson ²⁵ David W. Nickerson / 10/2022
 (Contact Person) Signature Print DD/MM/YY

Board/Committee: Lewis Ross Lewis Ross 25/10/2022
 (Signing Officer) Signature Print DD/MM/YY

6. 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



building centre

ATTEN: Juleyade Hunt EMO

WILSON'S SHOPPING CENTRE LTD.
 P.O. BOX 70
 BARRINGTON PASSAGE
 NOVA SCOTIA B0W 1G0
 PHONE (902) 637-2300
 FAX (902) 637-2517

160547-00 BQ2312-00 NS

S BARR GROUND SEARCH & RESCUE
O C/O JEFF GREGORY
L RR#1 BARRINGTON
D
T SHELB. CO. PA NS BOW 1EO
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PH. (902) 637-2962

*** INVOICE ***

Date	Loc	Invoice No.
07/19/22	01	BL1018
Time	Customer P.O.	Sales ID
8:40	LEWIS	REB
Loaded by:	Checked by:	Delivered by:

Stockkeeping			Item Number	Description	Quantities	Price	U/M	Amount	T a x	L o c	
Ordered	Shipped	U/M									
1		EA	803-6124	SMOOTH TALKER Z1 60DB CELL BOOSTER KIT	1	349.99	EA	349.99	T	1	
				CHARGE		402.49					
								Sub Total	349.99		
								GST / HST	52.50		
								PST	.00		
								TOTAL →	402.49		

A FINANCE CHARGE will be added to your account if it is not received and paid in full by the last day of the month following. The FINANCE CHARGE is computed by applying a periodic rate of 2% per month. ANNUAL PERCENTAGE RATE 26.82%

1. Check your load - no adjustments made if not called to our attention at time of delivery.
2. All returns must be accompanied by your sales invoice.
3. 10% re-stocking charge on return of special orders.

MERCHANDISE RECEIVED COMPLETE AND IN GOOD CONDITION.

J. Lewis

H.S.T. REGISTRATION NO. R 105703011

Thank You
CUSTOMER