Ontario Soil and Crop Improvement Association

Tier One Grant Claim Form 2023-2024

ELIGIBLE TIMEFRAME: APRIL 1, 2023 to FEBRUARY 1, 2024

Pre-approval MUST be secured prior to making a claim. Please submit the claim as soon as you have Proof of Payment

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Local/Regional Association		Mailing address			
Name of Project					
-					
Contact Name		Email Address			
Condition		Lindii Addi C55			
Phone/Cell	Date Received in	Guelph		Office Use	
				Only	
Project Information - If applying for a Tier One	grant that covers	more than one project typ	e, please select ALL that apply:		
Educational Activity	Bus Tour/Field Trip		Rental of Meeting Hall (excluding AGM)		
Field Day	In-Field Tr	ials	Communication/Outreach Activ	ities	
Guest Speaker	Membersh	nip Expansion	Twilight Meeting		
	Membersi	iip Expansion			
Demonstration of New Equipment OR Management Technique	Other				
Actual Project Cash Costs					
Complete the table below. All items to be claimed ML					
cheques or copies of Bank Statements that clearly sho to be captured in the chart on the next page.	ow items cleared in	n the account). In-Kind con	tributions are NOT eligible for t	the grant, but are	
to be captured in the chart on the next page.					
Cost Items		Services/Supplies	Labour	Total	
(please see guidelines for elgible/non-eligible items)					
			n . Durit of Text is Co.		
Tier One Project Total Cost \$ (Maximum grant is \$2,500 / year for each county/district/region project)					
	(iviaxiiiium grant	ıs ⊅∠,⊃uu /year for each col	inty/district/region project)		
Is the applicant registered for HS	ST? Note: If you a	are registered, you may i	not claim the cost of HST)	Yes No	

Supplementary Information

For Reporting purposes, it is important to capture details on ALL contributions of cash and in-kind.

Please complete the following two tables to the best of your knowledge as this information is valuable and will be provided to OMAFRA in our year-end reporting to help justify the importance of these types of funding opportunities.

Other Cash Contributions (i.e. industry partners)

Please complete the table below clearly identifying dollars provided from outside sources, which helped make the project a success (i.e. sponsorship, additional funding sources, etc). This information is to be provided as evidence of the additional value these grants bring to the associations/community.

These contributions are NOT eligible for grant funding, but none the less are important for reporting purposes.

Other Sources of Cash Contributions towards the Project (Company/Individual Name)	Total Amount
Total Other Cash Contributions \$	

In-Kind Contributions

Complete the table below clearly identifying In-Kind materials, services or labour that were provided to successfully complete this project/event. These contributions are NOT eligible for grant funding, but none the less are important for reporting purposes.

Source/Type of In-Kind Contributions	Services/Supplies	List # of Hrs and assume \$20/hr	Total Amount
Total In-Kind Contributions \$			

Description of Completed Project and what was Achieved/Learned				
For reporting purposes, please include a description of what was learned/achieved through this	Her One Project.			
	s an in-field trial, Please attach the MAFRA Report Form			
Name of OMAFRA Contact Person: (where applicable)				
Declaration and Signature				
By submitting this claim, the authorized signing authority hereby certifies to Ontario Soil and Cro (OSCIA) that the information contained in the Tier One claim is complete in all respects. The Tier the approved funding for the Tier One project was used for the sole purpose as intended.				
County/District/Region:				
Name of Signing Authority for Tier One project: (please print)				
Signature: Date	:			
TOTAL AMOUNT REQUESTED (from page 1): \$	SIGNATURES AND SUPPORTING DOCUMENTATION MUST ACCOMPANY THIS CLAIM FORM			
O)				
Approved by: ———————————————————————————————————	Date:			
Approved by:				