Hello,

Please note the following response to Community Grant Application has been submitted at Tuesday February 20th 2024 10:02 AM with reference number 2024-02-20-001.

- **Name:**
  Mike McLean

- **Phone Number:**
  7056510505

- **Email Address:**
  propertymanager@mchclakefield.ca

- **Organization Name (If Applicable):**
  Morton Community Healthcare Centre

- **Address (including Postal Code):**
  150 Strickland Street

- **Are you applying on behalf of an organization or as an individual?**
  Organization

- **Are you a non-profit organization or registered charity?**
  Non-Profit Organization

- **Do any of the following apply to you?**
  N/A

- **Amount of Grant Request:**
  Portion of municipal property tax rebate

- **Please select one of the following that apply to your application:**
  Program that enhances the health and well-being of the community

- **Describe how the Community Grant Funding will be utilized upon approval:**
  The funding will help pay for roof repairs to the Medical building.

- **Please provide a description of how the organization intends to measure the success of the project/event/program:**
  The success of this project will be measured for years, as it is helping the Morton Medical Centre to maintain the building for the future.

- **What is the approximate geographic audience demographic that you plan to target? (e.g. 300 Adults and 50 kids)**
  The Morton Medical Centre serves over 10,000 patients per year.

- **Any additional information you find necessary:**
  In 2022 we received $3544.00 from the township as a tax rebate. We are applying now for 2023 and 2024. Many thanks in advance

- **Name:**
  Mike McLean

- **Date:**
  2/20/2024

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