

## APPLICATION FOR THE SOCIAL INCLUSION AND INFRASTRUCTURE GRANT



The Social Inclusion & Infrastructure Grant was developed to assist organizations to fund projects to support vulnerable populations in the community. The grant will serve to mitigate social issues through a combination of preventative and intervention based initiatives.

ECTION 1: ORGANIZATION INFORMATION						
Legal Organization Name: Cold Lake John Howard	Society					
Contact Person: Phil Crump	Email: coldlakejohnhowardsociety@gmail.com					
Mailing Address: 4716-49 <sup>th</sup> Ave., Cold Lake, AB. T9M 1Y3	Work Phone: 780-201-9732					
.5 2.0	Alternate Phone:					
Office Location (if different from the above):	☐ Not-for-Profit #: 50199884136					
4801-51str., Cold Lake, Ab.	☐ Charity Registration #:					

#### **Our Mission:**

- 1. Provide supports to the most vulnerable members of the community through direct outreach and education.
- 2. Build capacity for Cold Lake John Howard Society.
- 3. Increase public awareness and education of social justice in crime prevention and public safety.

#### **Our Vision:**

To provide support for vulnerable and at-risk members of the community through direct outreach and education.

#### **SECTION 2: EXPECTED PROJECT/PROGRAM OUTCOMES**

**Need:** The population we serve is primarily homeless, adult, indigenous males.

We also have females who access our services during the day. They are often homeless as well, and come to access food, hygiene items and referrals from the Outreach worker.

Social Inclusion funds will provide emergency shelter to the homeless, adult, males in our community.

Since Cold Lake John Howard Society opened, numbers have steadily increased as awareness of our services has grown. Other agencies have also been referring clients for assistance The following statistics were collected during the months the program has been open:

In March 2021, 67 individuals accessed our services.

In April 2021, 94 individuals connected with John Howard Society.

By September 2021, we had over 300 client visits to the centre.

The needs are for overnight shelter, food, water, basic personal items like hygiene products, socks, clothes and coats and assistance in connecting to social service agencies. For many of the clients that utilize the services provided, it is the only resource they currently have.

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#### Goal:

The program goal is to get people off the streets and provide a variety of supports that assist individuals in achieving some form of stability, hoping to support clients to move forward with their lives.

Our main focus is also prevention... simply put we hope to prevent our clients from hypothermia, frostbite and death in the cold winter months.

We also expect to see a decrease in crime as needed resources are provided to this population. The decrease in crime and vagrancy has been reported by the RCMP in the area.

#### **SECTION 3: PROJECT/PROGRAM INFORMATION**

- Amount of Funding being requested (please refer to the Handbook for funding limitations):
   \$40,000
- 2. Anticipated start date for this program: As soon as funds are available, and staff is hired and trained.



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3. **Strategy:** Describe the program strategy that will be applied to mitigate the underlying factors contributing to poverty, homelessness, food insecurity, addiction, mental health and/or family violence as it pertains to social inclusion (*using 100 words or less*):

The strategy is based on a Harm Reduction Model. This type of approach reduces crime, reduces victimization, focuses on positive change and encourages prosocial behaviours.

The intention is to provide a variety of supports through the 3 branches of the Outreach program. The daytime Drop-in, the Mat program and the individual Outreach program. By providing these 3 services under the Outreach umbrella we hope to assist individuals in achieving stability and moving forward with their lives. Collaborating with other agencies will be essential in each case.

Our evaluation will involve recording information as new clients served, ongoing clients served, total number of client visits, total number of client contacts, services provided individual clients, agencies referred to, and agencies referred from.

4. <u>Rationale:</u> Provide a summary of key research findings which support why the program strategy proposed is best for achieving the program goal (*using 100 words or less*):

Research suggests Outreach and skilled case management play an important part in providing supports to the vulnerable. Outreach involves working with a homeless client to identify the challenges they face. Once these are identified, case management is made available to the client to connect them with appropriate supports that can help them achieve housing stability. This can include financial assistance and management, mental health treatment, detox and addictions treatment, counseling, skills training, and other services and resources.

This model recognizes that each homeless individual is unique and requires personal attention. The client-focused approach is critical.

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5. Describe the planned collaboration with fellow social and civic service partners to achieve the program's goal; a variety of combinations of social/civic and stakeholder relationships may be considered (*using 100 words or less*):

Community partners are many. To name a few...the RCMP, local Peace Officers, Community Corrections, the Mayor and City of Cold Lake, 4 Wing Cold Lake, Family Community Support Services, Lakeland Centre for FASD, Cold Lake Food Bank, Dr. Margaret Savage Crisis Centre, Addiction Services, local churches, Cold Lake First Nations, Elizabeth Metis Settlement, Kokum's Corner, CLFN medical Transport, Thorpe Recovery Centre, local AA and NA support groups, Alberta Supports, Alberta Health Services Naloxone kit distribution and Portage College.

In fact, the program's success depends on many partnerships. For this population, partnerships are key to connection and access to community.

- 6. List potential barriers that may arise while implementing the proposed program. How will they be mitigated to ensure the success of the project? (using 100 words or less)
  Unfortunately, barriers are many and varied.
  - 1) The Covid pandemic. The pandemic has made access to services for the vulnerable exceedingly difficult, if not impossible. With services going virtual and applications being done on-line, if you do not have a phone, a computer and a home address you cannot apply.

For example, Alberta Supports Emergency Benefits:

"How To Apply

Before You begin

To apply on-line, you need:

- A personal email
- A MyAlberta Digital ID
- A bank account at a bank that offers Interac e-transfers
- A valid Alberta driver's licence or identification card."

Many of our clients have none of these and most are missing at least 2.

- 2) Funding. Resources and services for the homeless and vulnerable population are vastly underfunded.
- 3) Bureaucracy- navigating government agencies and accessing services is difficult for most of us. For the vulnerable who often have mental health challenges and addiction issues it is too difficult, confusing, stressful and they often give-up.



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- 4) Judgement. The issues of the homeless are complex and challenging. Many people judge, often without ever investigating the causes. As a result, our clients feel shame and embarrassment, so they are reluctant to ask for help.
- 7. How do you intend to acknowledge the City of Cold Lake and Cold Lake and District FCSS as sponsors?

We will acknowledge our sponsor on our website, on our Facebook page, in media releases and through Interagency. Also, CLJHS would be open to most any form of acknowledgement the city might suggest or require.

- 8. <u>Indicators:</u> What outcome indicators will be used to measure if the program strategy is on track and achieving the program goal?
  - One of the program measures we have created is to track the services each client utilizes daily. \*(See attached CLJHS Intake Services form)
  - One client may use several different supports and services provided by the Centre in a single visit.

For example, a client may eat breakfast and lunch, use washrooms and require hygiene products, use the phone and/or computers and speak with Outreach worker about getting supports or going to detox and treatment.

In addition, if the Mat program is operational, the client can access needed shelter over night.

Consultation will be done with the RCMP, Cold Lake Peace Officers, local agencies and businesses for indications that the Outreach Program has helped make the community a healthier place to live. Individual clients will be interviewed for their views on the value of the overall program for themselves.

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#### SECTION 4: DECLARATION

By signing and submitting this application form, I confirm that:

- 1. The information provided on this application is true, complete and correct.
- 2. I understand my application may be declined:
  - (a) If I have submitted any false statements or concealed any relevant or significant facts as both constitute misrepresentation.
  - (b) If I do not comply with any request for information required to effectively administer and maintain the integrity of the program.
  - (c) At the discretion of the City of Cold Lake and Cold Lake and District FCSS.
- 3. Any funds from the City of Cold Lake will not be used to support any political or religious activities.
- 4. The grant will not be used to fund individuals recognized as producing tobacco, alcohol, or cannabis products.
- 5. I will represent the City of Cold Lake and Cold Lake and District FCSS in a positive manner and acknowledge them as sponsors.
- 6. I understand that my attendance as a delegate may be required by the City of Cold Lake and Cold Lake and District FCSS to speak about this application.
- 7. I have read, understood, and agree to abide by the terms and conditions outlined in the Social Inclusion and Infrastructure Grant Handbook.

Applicant Name: PHIL CRUMP

Date: October 30, 2021 Applicant Signature Phil Grump

Please return full application by October 1st to:

Cold Lake and District FCSS 5220 54 Street Cold Lake, AB T9M 1W2 Phone: (780) 594-4495

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## APPLICATION FOR THE SOCIAL INCLUSION AND INFRASTRUCTURE GRANT



INTERNAL OFFICE USE ONLY									
Received by:	Date:	Initial:							
SECTION 5: DOCUMENT CHECKL	IST (required for all applications)								
☐ Completed Application Form									
Three (3) letters of support from	om the community (e.g. social/civic serv	ice, stakeholder partners) □							
Confirmation of land ownersh	ip, long-term lease or permission to use	e the property 🗖 Last Audited							
Financial Statements									
	☐ Budget (may include items, purpose, costs, proposals, and fundraising strategies) The below may be used, or you may attach your own to this Application.								
SECTION 6: BUDGET	CWI to time / tppiloation.								
Income	Current Budget	Proposed Budget							
	Program Revenue								
Program Generated									
Social Inclusion and Infrastructure Grant		40,000.00							
Grants	60,000 (reimbursable grant from RDN								
	for Mat program Jan-Mar	,							
	25,000 (City of Cold Lake grant 2021								
Donations	for outreach worker salary) 15 ,000 (non-designated grant funds								
Donations	from 2021)								
	5,000 (for use on expenses related to								
	food and food costs)								
Other (describe)									
Total:	105,000	40,000							
	Personnel Expenses	05,000,01, (, 0, , 1,							
Salaries	22,500 (for outreach worker 2021)	25,000 Salary for Outreach program coordinator @ 22.50 / hr 11,800							
	80 ,000 (for Mat program night	Salary for night workers and security							
	workers and security 2021)	for Mat program							
Benefits		(6,000 for security)							
Training	500								
Travel & Subsistence									
Other (describe)									
Total:	103,000	36,800							
A location Company	Operational Expenses								
Administrative Expenses (telephone, office etc.)	1,200								
Facility Expenses									
(rent, insurance, custodial etc.)	20,400 (rent in 2021)	3,000 Rent							
Other (describe)									

5513 - 48 Avenue, Cold Lake, AB • T9M 1A1 • Ph: 780-594-4494 • Fax: 780-594-3480

Information on this form is collected for the sole use of the City of Cold Lake and is protected under the authority of the Freedom of Information and Protection of Privacy Act, Sec. 33 (c) which regulates the collection, use and disclosure of personal information.



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Travel & Subsistence			
Other (describe)			
	Total:	21,600	3,000
		Program Expenses	
Supplies		1,000	200 (laundry services for Mat
			program
Workshops			
Marketing			
Other (describe)			
	Total:	1,000	200

### **COLD LAKE JOHN HOWARD SOCIETY: Intake and Services**

DATE	NAME	TEMP TAKEN	COVID Q. 1,2,3. SYMPTOMS, CONTACT, TRAVEL	MEALS Breakfast, Lunc	WASHROOOMS & HYGIENE	PHONE& COMPUTERS	OUTREACH	MAT PROGRAM



October 15, 2021

To whom it may concern:

#### **RE: Letter of Support for Cold Lake John Howard Society**

My name is Lisa Murphy, Executive Director at the Lakeland Centre for Fetal Alcohol Spectrum Disorder (LCFASD). I am writing in support of the Cold Lake John Howard Society and their grant application to the City of Cold Lake Social Inclusion and Infrastructure. LCFASD is deeply grateful and inspired by the strong commitment and dedicated work by the Cold Lake John Howard Society (CLJHS) in our community. We are proud of our partnership with the CLJHS; and we support and encourage their proposal.

The Lakeland Centre for FASD is proud of its association with Cold Lake John Howard Society; the Cold Lake John Howard Society is an organization which puts the community first and has a long history of taking steps to improve the quality of life and safety of the people who utilize their services.

The services provided by the CLJHS are invaluable to our community, offering support the vulnerable population in Cold Lake and being the only agency in our community that works with homeless men. We are honored to have a strong working relationship with CLJHS; LCFASD often work in collaboration to support and connect men with FASD, and Mental Health and Addiction needs with wrap around community support services. Without the CLJHS, the community would have limited advocacy for this specific vulnerable population; CLJHS fills this need and has had a noticeable and positive impact in our local community.

The Lakeland Centre for FASD provides services across the lifespan to persons prenatally exposed to alcohol. Lakeland Centre for FASD serves a 350km radius in the Lakeland Region, including 7 First Nations communities, and 4 Metis Settlements. We believe that this project is of great benefit to our clients as well as others in our community.

Sincerely,

Lisa Murphy, BSW, RSW Executive Director

Lakeland Centre for FASD

1.877.594.5454





Royal Canadian Gendarmerie royale Mounted Police du Canada Security Classification/Designation Protected A

Cold Lake John Howard Society Cold Lake, AB

Our File

September 21, 2021

To whom it may concern,

It is a pleasure to write a letter in support of the Cold Lake John Howard Society. The RCMP of Cold Lake, AB are deeply grateful and inspired by the strong commitment and dedicated work by the CLJHS in our community. The staff and members of the RCMP Detachment are proud of its partnership with the Cold Lake John Howard Society; and we support and encourage their proposal.

The Cold Lake John Howard Society is an organization which puts the community first and has a long history of taking steps to improve the quality of life and safety of the people who utilize their services. They continue to work towards enhancing their ability to protect their clients and those in need in a meaningful and respectful way. Cold Lake John Howard Society services the vulnerable population In Cold Lake and surrounding areas. CLIHS is the only agency in our community that works with our homeless men. The agency provides food, shelter, and outreach services. This unique agency collaborates with many other helping agencies such as Probation, Primary Care Network, Alberta Works (income support) and provides Outreach supports such as taking individuals to appointments and helping fill out forms. CLIHS provides clients with access to a phone and computer use. These services help when making and keeping appointments. The Outreach worker provides advocacy with court which sometimes means 4 hours of waiting for the courts to return calls. The worker provides whatever supports the client may need, such as transportation for medical appointments.

Without the CLIHS, the community would have a huge gap in services and there would be limited advocacy for the vulnerable population. CLIHS currently fills the needs of those clients and has had a noticeable and positive impact in the local community.

Sincerely,

Sgt Ryan Howrish Operations NCO

**Acting Detachment Commander** 

RCMP Cold Lake



#### **COLD LAKE FIRST NATIONS**

P.O. Box 1769 | Cold Lake, AB | T9M 1P4 Phone: 780-594-7183 | www.clfns.com

September 22, 2021

To Whom it May Concern,

RE: Cold Lake John Howard Society – (CLJHS)

My name is Charles Muskego, Band Administrator for Cold Lake First Nations (CLFN). I am writing in support of the Cold Lake John Howard Society. CLFN is proud of its association with the Cold Lake John Howard Society, and we support and encourage their proposal.

Cold Lake John Howard Society services the vulnerable population In Cold Lake and surrounding areas. CLJHS is the only agency in our community that works with our homeless men. The agency provides food, shelter, and outreach services. This unique agency collaborates with many other helping agencies such as Probation, Primary Care Network, Alberta Works (income support) and provides Outreach supports such as taking individuals to appointments and helping fill out forms. CLJHS provides clients with access to a phone and computer use. These services help when making and keeping appointments. The Outreach worker provides advocacy with court which sometimes means 4 hours of waiting for the courts to return calls. The worker provides whatever supports the client may need, such as transportation for medical appointments.

Without the CLJHS, the community would have a huge gap in services and there would be limited advocacy for the vulnerable population. CLJHS currently fills the needs of those clients and has had a noticeable and positive impact in the local community.

Sincerely,

Charles Muskego Band Administrator Cold Lake First Nations

# THE COLD LAKE JOHN HOWARD SOCIETY FINANCIAL STATEMENTS YEAR ENDED DECEMBER 31, 2020

(Unaudited - See Notice To Reader)

# THE COLD LAKE JOHN HOWARD SOCIETY INDEX TO FINANCIAL STATEMENTS YEAR ENDED DECEMBER 31, 2020

(Unaudited - See Notice To Reader)

	Page
NOTICE TO READER	1
FINANCIAL STATEMENTS	
Statement of Financial Position	2
Statement of Revenues and Expenditures	3
Statement of Changes in Net Assets	4



#### NOTICE TO READER

On the basis of information provided by management, we have compiled the statement of financial position of The Cold Lake John Howard Society as at December 31, 2020 and the statements of revenues and expenditures and changes in net assets for the year then ended.

We have not performed an audit or a review engagement in respect of these financial statements and, accordingly, we express no assurance thereon.

Readers are cautioned that these statements may not be appropriate for their purposes.

The financial statements for the year ended December 31, 2019 were compiled by another accounting firm and were neither audited nor reviewed and are presented for comparative purposes only.

KAFT Professional Corporation.

Cold Lake, Alberta May 5, 2021

CHARTERED PROFESSIONAL ACCOUNTANTS

# THE COLD LAKE JOHN HOWARD SOCIETY STATEMENT OF FINANCIAL POSITION DECEMBER 31, 2020

(Unaudited - See Notice To Reader)

ASSETS	
CURRENT	
Cash	\$ 78,097
Accounts receivable	600
Goods and services tax recoverable	18
	\$ 78,715
LIABILITIES AND NET ASSETS	
CURRENT	
Accounts payable	\$ 1,001
DEFERRED CONTRIBUTION	72,555
DEFERRED CONTIRBUTION - SHELTER PROGRAM	4,908
TOTAL LIABILITIES	78,464
NET ASSETS	251_
	\$ 78,715

ON BEHALF OF THE BOARD

Plil Crump

31D0F90D6E9848D...

Director

# THE COLD LAKE JOHN HOWARD SOCIETY STATEMENT OF REVENUES AND EXPENDITURES YEAR ENDED DECEMBER 31, 2020

(Unaudited - See Notice To Reader)

REVENUES Donation Amortization of deferred contribution	\$ 747 3,645
EXPENSES	 4,392
Advertising and promotion	577
Insurance	1,681
Memberships	250
Professional fees	 1,144
	 3,652
EXCESS OF REVENUES OVER EXPENSES FROM OPERATIONS	740
OTHER INCOME	 1
EXCESS OF REVENUES OVER EXPENSES	\$ 741

# THE COLD LAKE JOHN HOWARD SOCIETY STATEMENT OF CHANGES IN NET ASSETS YEAR ENDED DECEMBER 31, 2020

(Unaudited - See Notice To Reader)

		General Fund	Restricted Fund	Third Fund	U	2020 Inaudited
NET ASSETS - BEGINNING OF YEAR EXCESS OF REVENUES OVER	\$	(490) \$	-	\$ -	\$	(490)
EXPENSES	_	741	-	-		741
NET ASSETS - END OF YEAR	\$	251 \$	-	\$ -	\$	251



Canada Revenue Agence du revenu du Canada

#### **Registered Charity Information Return**

Protected B when completed

Se	ction A: Identification					
•	To help you fill out this form, refer to Guide T4033, Completing the Registered Charity Information	Return.	. It can be f	ound at <b>cana</b>	da.ca/cra-fo	rms.
Not	e: Even if a charity is inactive, an information return must be filed to maintain its registered status.					
Cor	nplete the following:					
1	. Charity name:					
	COLD LAKE JOHN HOWARD SOCIETY					
2	. Return for fiscal period ending:  3. BN/registration number:	4.	Web addre	ss (if applicat	ole):	
	Year Month Day 2   0   2   0   1   2   3   1  72336 1093 RR 0001					
A1	Was the charity in a subordinate position to a head body?			1510	Yes	X No
	Name:	BN (9	digits, 2 lett	ers, 4 digits. Exa	ample: 123456	789RR0001)
A2	Has the charity wound-up, dissolved, or terminated operations?			1570	Yes	X No
A3	Is the charity designated as a public foundation or private foundation?			1600	Yes	X No
	If yes, you must complete Schedule 1, Foundations. To confirm the charity's designation, go to detail page.	the CR	A's List of	charities and	refer to the o	:harity's
Se	ction B: Directors/trustees and like officials					
B1	All charities must complete Form T1235, Directors/Trustees and Like Officials Worksheet. Only the available to the public. Charities subject to the Ontario Corporations Act must also complete Form Ontario Not-for-Profit Corporations.					
for y	e: If you would like these individuals to have the authority to communicate with the CRA on behalf of your Business Number (BN). For more information, go to canada.ca/charities-giving, select "Opera anization" and see "Change director."	f your c ating a r	harity, thei egistered o	name must a harity," then "	ilso appear a Making a ch	is an owner ange to you
Se	ction C: Programs and general information					
C1	Was the charity active during the fiscal period?			1800	X Yes	No
C2	Describe all <b>ongoing</b> and <b>new</b> charitable programs the charity carried on during this fiscal period t documents). "Programs" includes all of the charitable activities that the charity carries out on its ow qualified donees and intermediaries. The charity may also use this space to describe the contributi example, number of volunteers and/or hours. <b>Do not</b> include the names of employees or volunteer organizations they support. <b>Do not</b> describe fundraising activities in this space.	n throu ions of i	igh employ its voluntee	ees or volunte ers in carrying	ers as well a out its activi	as through ties, for
Do	not attach additional sheets of paper or annual reports.					
	going programs: uth and Adult Emotion Management Courses					
Ne	w programs:					

	gistered charities may make gifts to qualified donee anizations described in the Income Tax Act.	s. Qualifie	d donees are other registered Cana	adian charities, as well a	s certain othe	er
C3	Did the charity make gifts or transfer funds to qualifie	d donees o	r other organizations?	2000	Yes	X No
	Important: If yes, you must complete Form T1236,		· ·		-	
C4	•	es through entities, or i	employees, volunteers, agents, joint v means (other than qualified donees) fo	ventures, or any activity/	Yes	X No
	•					
C5						
	This question has been removed.					
C6	If the charity carried on fundraising activities or engagused during the fiscal period:	ged third pa	rrties to carry on fundraising activities	on its behalf, select all fur	ndraising meth	ods that it
	2500 Advertisements/print/radio/ TV commercials	2570	Sales	2620 Teleph	one/TV solicita	ations
	2510 Auctions	2575	Internet	2630 Tourna	ment/sporting	events
	2530 Collection plate/boxes	2580	Mail campaigns	2640 Cause	-related marke	eting
	2540 Door-to-door solicitation	2590	Planned-giving programs	2650 Other		
	2550 Draws/lotteries	2600	Targeted corporate donations/sponsorships	2660 Specify:		
	2560 Fundraising dinners/galas/concerts	2610	Targeted contacts			
C7	Did the charity pay external fundraisers?  If yes, you must complete the following lines, and co (a) Enter the gross revenue collected by the fundraise	mplete Sch	nedule 4, Confidential data, Table 1.	5450	Yes	X No
	(b) Enter the amounts paid to and/or retained by the	fundraisers		5460	\$	0
	(c) Select the method of payment to the fundraiser:					
	2730 Commissions	2750	Finder's fee	2770	Honoraria	
	2740 Bonuses	2760	Set fee for services	2780	Other	
		2790 S	pecify:			
	(d) Did the fundraiser issue tax receipts on behalf of t	he charity?	·	2800	Yes	X No
C8	Did the charity compensate any of its directors/truster charity for services provided during the fiscal period (				Yes	X No
C9	Did the charity incur any expenses for compensation Important: If yes, you must complete Schedule 3, C			3400	Yes	X No
C10	Did the charity receive any donations or gifts of any k was <b>not</b> resident in Canada and was <b>not</b> any of the f				Yes	X No
	<ul><li>a Canadian citizen, nor</li><li>employed in Canada, nor</li><li>carrying on a business in Canada, nor</li></ul>					

• a person having disposed of taxable Canadian property?

Important: If yes, you must complete Schedule 4, Confidential data, Table 2, for each donation of \$10,000 or more.

Protected	В	when	completed
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C11	Did the charity receive any non-cash gifts for which it issued tax receipts?		4000	Yes	X No
C12			5800	Yes	X No
C13			5810	Yes	x No
			5820	Yes	X No
C14	, , , , , , , , , , , , , , , , , , , ,		5830	Yes	X No
C15	Did the charity have direct partnership holdings at any time during the fiscal period?		3030	1 es	XINO
Sec	tion D: Financial information				
Fill o	ut either Section D or Schedule 6, Detailed financial information.				
If an	y of the following applies to the charity, complete Schedule 6 instead of Section D:  (a) The charity's revenue exceeds \$100,000.  (b) The amount of all property (for example, investments, rental properties) not used in charitable activities was	s more th	an \$25,0	00.	
	(c) The charity had permission to accumulate funds during this fiscal period.				
Sho	w all amounts to the nearest single Canadian dollar. Do not enter "See attached financial statements."	All releva	nt fields	must be fille	d out.
D1	Was the financial information reported below prepared on an accrual or cash basis?		4020	X Accrual	Cash
D2	Summary of financial position:				
	Using the charity's own financial statements, enter the following:				
	Did the charity own land and/or buildings?		4050	Yes	X No
	Total assets (including land and buildings)		4200	\$	78,714
	Total liabilities		4350	\$	78,463
	Did the charity borrow from, loan to, or invest assets with any non-arm's length persons?		4400	Yes	X No
D3	Revenue:				
	Did the charity issue tax receipts for gifts?		4490	Yes	X No
	If yes, enter the total eligible amount of all gifts for which the charity has issued or will issue tax receipts		4500	\$	0
	Total amount of 10 year gifts received	0			
	Total amount received from other registered charities		4510	\$	0
	Total other gifts received for which a tax receipt was <b>not</b> issued by the charity (excluding amounts at lines 4575 and 4630)		4530	\$	0
	Did the charity receive any revenue from any level of government in Canada?		4565	Yes	X No
	If yes, total amount received		4570	\$	0
	Total tax-receipted revenue from all sources outside of Canada (government and non-government)	0			
	Total <b>non</b> tax-receipted revenue from all sources outside of Canada (government and non-government)		4575	\$	0
	Total <b>non</b> tax-receipted revenue from fundraising		4630	\$	0
	Total revenue from sale of goods and services (except to any level of government in Canada)		4640 4650	\$	4 202
	Other revenue not already included in the amounts above		4700	\$	4,392 4,392
	Total revenue (add lines 4500, 4510 to 4570, and 4575 to 4650)		4700	Ψ	4,002
D4	Expenditures:		1000	•	
	Professional and consulting fees		4860 4810	\$ \$	1,143 0
	Travel and vehicle expenses		4920	\$	2,508
	All other expenditures not already included in the amounts above (excluding gifts to qualified donees)  Total expenditures (excluding gifts to qualified donees) (add lines 4860, 4810, and 4920)		4950	\$	3,651
	Of the amount at line 4950:				
	(a) Total expenditures on charitable activities	3,079			
	(b) Total expenditures on management and administration	571			
	Total amount of gifts made to all qualified donees		5050	\$	0
	Total expenditures (add lines 4950 and 5050)		5100	\$	3,651

#### **Section E: Certification**

This return must be signed by a person who has authority to sign on behalf of the charity. It is a serious offence under the Income Tax Act to provide false or deceptive information.

I certify that the information given on this annual return and any attachment is, to the best of my knowledge, correct, complete, and current.

Name (print):		Signature:
PHIL CRUMP		Phil Crump
Position in charity:	Date:	Phone number: 31D0F90D6E9848D
PRESIDENT	2021/05/05	780 594-1420

#### Section F: Confidential data

Enter the physical address of the charity and the address in Canada for the charity's books and records. Post office box numbers and rural routes are not sufficient.

	Physical addre	ss of the charity	Address for the charity	's books and records
Complete street address	4716 49TH AVE		4716 49TH AVE	
City	COLD LAKE		COLD LAKE	
Province or territory and postal code	AB	T9M 1Y3	AB	T9M 1Y3

F2 Name and address of individual who completed this return.

Name: KAFT CPA				
Company name (if applicable): KAFT CPA				
Complete street address: 4807 51 STREET BOX 1559				
City, province or territory, and postal code: COLD LAKE	AB	T9M 1P4		
Phone number: 780 594-5800		Is this the same individual who certified in Section E above?	Yes	X No

#### **Privacy statement**

Personal information is collected under the authority of the Income Tax Act and is used to establish and validate the identity and contact information of directors, trustees, officers, like officials, and authorized representatives of the organization. This information will also be used as a basis for the indirect collection of additional personal information from other internal and external sources, which includes personal tax information, and relevant financial and biographical information. Personal information will be used to assess the risk of registration with respect to the obligations and requirements as outlined in the Act and the common law. The social insurance number (SIN) is collected under subsection 237 of the Act and is used for identification purposes.

The Canada Revenue Agency (CRA) will make the information on this annual information return available to the public on the Charities Directorate website, except for information identified as confidential. Personal information may also be disclosed under information-sharing agreements and in accordance with section 241 of the Act. Incomplete or inaccurate information may result in compliance measures including revocation of registered status.

Personal information is described in personal information bank CRA PPU 200 and is protected under the Privacy Act. Individuals have a right of protection, access to and correction or notation of their personal information. You are entitled to complain to the Privacy Commissioner of Canada regarding our handling of your information.

Notification to directors and like officials: The CRA strongly encourages the organization to voluntarily inform its directors and like officials that it has collected and disclosed their personal information to the CRA.

X I confirm that I have read the Privacy statement above.

#### Checklist

A charity's complete annual information return includes:

- Form T3010, Registered Charity Information Return, and all applicable schedules
- a copy of the charity's financial statements
- Form T1235, Directors/Trustees and Like Officials Worksheet
- Form RC232, Corporations Information Act Annual Return for Ontario Not-for-Profit Corporations (if applicable)
- Form T1236, Qualified donees worksheet/Amounts provided to other organizations (if applicable)
- Form T2081, Excess Corporate Holdings Worksheet for Private Foundations (if applicable)

If financial statements are not included, the charity's registration may be revoked.

		Foundations			Schedul	e 1
1 Did the foundation acquire	control of a corporation?			10	00 Yes	X No
	ny debts other than for current op ole activities?				10 Yes	X No
For private foundations only:						
	y shares, rights to acquire share				20 Yes	X No
	ore than 2% of any class of share and attach Form T2081, Excess			scal periou:	Yes Yes	X No
	Activ	ities outside Canada			Schedul	e 2
Important: If you complete this s	section, you must answer yes to	question C4.				
For more information go to cal	nada.ca/charities-giving and se	ee Guidance CG-002, Ca	nadian registere	d charities carrying ou	ut activities outsi	de Canada.
1 Total expenditures on activ	rities/programs/projects carried o	on outside Canada, exclud	ding gifts to qualif	ied donees 20	\$	0
arrangement including a co	inancial resources spent on progontract, agency agreement, or jo	int venture to any other ir	idividual or organ	ization	10 Yes	X No
If yes, provide details of the	amount reported in question 1 or	n line 200, that the charity	transferred to thes	se individuals or organiza	ations in the follow	ing table:
Nam	e of individual/organization		activities v	code where the vere carried out end of Schedule 2)	Amount Show amounts to t Canadian d	the nearest
Important: If you entered inform  3 Using the table below, enter	nation in the table above, you <b>mu</b> er the countries outside Canada			ns or devoted any of its	resources.	
	I			I		
4 Were any projects underta	ken outside Canada funded by C	Global Affairs Canada		22	20 Yes	X No
If yes, what was the total a	amount the charity spent under the	his arrangement?		23	\$	0
5 Were any of the charity's a	ectivities outside of Canada carrie	ed out by employees of th	e charity?	24	40 Yes	X No
6 Were any of the charity's a	ctivities outside of Canada carrie	ed out by volunteers of th	e charity?	25	50 Yes	X No
7 Did the charity export good	ds as part of its charitable activiti	es?		26	60 Yes	X No
If yes, list the items export	ed, their destination, the country	code, and their value.				
Item ex	xported	Destination (c	ity/region)	Country code	Value (C/	AN \$)

			FIOLEC	ted b when comple
Compensation				Schedule 3
Important: If you complete this section, you must answer yes to question C9.				
(a) Enter the number of permanent, full-time, compensated positions in the fiscal period represent the number of positions the charity had including both managerial position not include independent contractors. Do not enter a dollar amount.	s and others, ar	nd should	300	ļ
(b) For the ten (10) highest compensated, permanent, full-time positions enter the num within each of the following annual compensation categories. Do not tick the boxes,		s that are		
305 0 \$1 - \$39,999 310 0 \$40,000 - \$79,999	31	0 \$80,	000 – \$119,9	99
320 0 \$120,000 - \$159,999 325 0 \$160,000 - \$199,999	33	0 \$200	,000 – \$249,	999
335 0 \$250,000 - \$299,999 340 0 \$300,000 - \$349,999	34	0 \$350	,000 and ove	er .
2 (a) Enter the <b>number</b> of part-time or part-year (for example, seasonal) employees the c			370	(
the fiscal period			380 \$	ı
Total expenditure on all compensation in the fiscal period.			390 \$	
Confidential data				Schedule 4
The information in this schedule is for the CRA's use and may be shared as permitted le departments and agencies).  1. Information about external fundraisers  Enter the name(s) and arm's length status of each external fundraiser.	oy law (for exai	nple, with cert	ain other go	vernment
Name (confidential)				ngth? Yes/No dential)
			(001111	acitialy
2. Information about donors not resident in Canada		•		
<ul> <li>a Canadian citizen, nor</li> <li>employed in Canada, nor</li> <li>carrying on business in Canada, nor</li> <li>a person having disposed of taxable Canadian property.</li> </ul> Enter the name of each donor and the value of the gift in the table below. Select whether the entity, charity, non-profit organization), a government or an individual.	donor was an or	ganization (for	example a bu	siness, corporate
	Type of	donor (confide	ential)	
Name (confidential)	Organization	Government	Individual	Value (CAN \$)
Non-cash gifts				Schedule 5
mportant: If you complete this section, you must answer yes to question C11.				Scriedule 5
Select all types of non-cash gifts received for which a tax receipt was issued:				
500 Artwork/wine/jewellery 525 Ecological properties			ublicly traded	
505 Building materials 530 Life insurance policies			mmodities/m ooks	uluai iungs
510 Clothing/furniture/food 535 Medical equipment/supp	lies	560 O	ther	
515 Vehicles 540 Privately-held securities		565 Specif	y:	
520 Cultural properties  545 Machinery/equipment/ computers/software				
2 Enter the total amount of tax-receipted non-cash gifts			580 \$	(

Detailed financial in	nformation	Schedule 6
Fill out this schedule if any of the following applies to the charity:  (a) The charity's revenue exceeded \$100,000.  (b) The amount of all property (for example, investments, rental properti (c) The charity had permission to accumulate funds during this fiscal per	•	000.
Was the financial information reported below prepared on an accrual or ca	sh basis?402	0 Accrual Cash
Statement of financial position		
Show all amounts to the nearest single Canadian dollar. Do not enter	"see attached financial statements." All relevant field	ds must be filled out.
Assets:	Liabilities:	
Cash, bank accounts, and short-term investments 4100 \$	O Accounts payable and accrued liabilities	4300 \$ 0
4440	0 Deferred revenue	4310 \$ 0
Amounts receivable from non-arm's length persons  Amounts receivable from all others	Bololica lovolido	4320 \$ 0
/ thousand reconstable from all others		4330 \$ 0
44.40		4350 \$ 0
Long term investments	Total liabilities (add lines 4300 to 4330)	<del>*************************************</del>
	0	
Zaria dria bariango in Gariada	0	
AACE		
dapital assets outside dariada	O Amount included in lines 4150, 4155,	
Accumulated amortization of capital assets	4160, 4165 and 4170 not used in	4250 \$ 0
Other assets	charitable activities	Ψ 0
10 year gifts \$ 0  Total assets (add lines 4100 to 4170) \$4200	0	
Statement of operations		
Revenue:		
Total eligible amount of all gifts for which the charity has issued or will issu	ue tax receipts	4500 \$ 0
Total eligible amount of tax-receipted tuition fees		
Total amount of 10 year gifts received		
Total amount received from other registered charities		4510 \$ 0
Total other gifts received for which a tax receipt was <b>not</b> issued by the cha		4530 \$ 0
Total revenue received from federal government	,	4540 \$ 0
Total revenue received from provincial/territorial governments		4550 \$ 0
Total revenue received from municipal/regional governments		4560 \$ 0
Total tax-receipted revenue from all sources outside of Canada (government)	ent and 4571 \$ 0	
Total <b>non</b> tax-receipted revenue from all sources outside Canada (governr		4575 \$ 0
Total interest and investment income received or earned		4580 \$ 0
Gross proceeds from disposition of assets	4590 \$ 0	
Net proceeds from disposition of assets (show a negative amount with bra		4600 \$ 0
Gross income received from rental of land and/or buildings		4610 \$ 0
Total <b>non</b> tax-receipted revenues received for memberships, dues and ass		<del>\$</del> 0
Total <b>non</b> tax-receipted revenue from fundraising		4630 \$ 0
Total revenue from sale of goods and services (except to any level of gove		4640 \$ 0
		4650 \$ 0
Specify type(s) of revenue included in the amount reported at 4650		
Total revenue (add lines 4500, 4510 to 4560, 4575, 4580, and 4600 to 4		4700 \$ 0

Expenditures:						
Advertising and promotion				4800	\$	0
Travel and vehicle expenses.				4810	\$	0
Interest and bank charges				4820	\$	0
Licences, memberships, and dues				4830	\$	0
Office supplies and expenses.				4840	\$	0
Occupancy costs				4850	\$	0
Professional and consulting fees				4860	\$	0
Education and training for staff and volunteers				4870	\$	0
Total expenditure on all compensation (enter the amount reported at line 390 in Schedule 3, if applie				4880	\$	0
Fair market value of all donated goods used in charitable activities	,			4890	\$	0
Purchased supplies and assets				4891	\$	0
Amortization of capitalized assets				4900	\$	0
Research grants and scholarships as part of charitable activities				4910	\$	0
All other expenditures not included in the amounts above (excluding gifts to qualified donees)				4920	\$	0
Specify type(s) of expenditures included in the amount reported at 4920						
Total expenditures before gifts to qualified donees (add lines 4800 to 4920)				4950	\$	0
· · · · · · · · · · · · · · · · · · ·						
Of the amounts at lines 4950:						
(a) Total expenditures on charitable activities		\$	0			
(b) Total expenditures on management and administration		\$	0			
(c) Total expenditures on fundraising		\$	0			
(d) Total other expenditures included in line 4950	5040	\$	0			
Total amount of gifts made to all qualified donees				5050	\$	0
Total expenditures (add lines 4950 and 5050)				5100	\$	0
Other financial information						
Permission to accumulate property:						
Only registered charities that have written permission to accumulate should complete this section.						
• Enter the amount accumulated for the fiscal period, including income earned on accumulated fund	ds			5500	\$	0
Enter the amount disbursed for the fiscal period for the specified purpose				5510	\$	0_
Permission to reduce disbursement quota:						
If the charity has received approval to make a reduction to its disbursement quota, enter the amoun	t for the	fiscal period		5750	\$	0_
Property not used in charitable activities:						
Enter the average value of property not used for charitable activities or administration during:						
The 24 months before the <b>beginning</b> of the fiscal period				5900	\$	0
The 24 months before the <b>end</b> of the fiscal period				5910	\$	0
- The 2-4 mentals before the <b>end</b> of the needs period					-	

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# Directors/Trustees and Like Officials Worksheet

Canada Revenue Agence du revenu Agency du Canada	Directors/Trustee		s and Like Officials Worksheet	Protected B when completed
You <b>must</b> give us complete information for each direc officials are persons who govern a registered charity.	stor/trustee and like official who, at any See the reverse for information on fillin	time during the fiscal p g out this form.	You <b>must</b> give us complete information for each director/frustee and like official who, at any time during the fiscal period of this return, was a member of the charity's board of directors/trustees. Directors/trustees and like officials are persons who govern a registered charity. See the reverse for information on filling out this form.	Fectors/trustees. Directors/trustees and like Giru GIVOO EIVOOR
Total number of directors/trustees and like officials:	Charity name:		Business number:	Return for fiscal period ending (YYYY/MM/DD):
11	COLD LAKE JOHN HOWARD SC	RD SOCIETY	72336 1093 RR 0001	2 0 2 0 1 2 3 1
<b>Note:</b> If you would like these individuals to have the authority to communicate with the CRA on behalf of your charity, their name must to <b>canada.ca/charities-giving</b> , select "Operating a registered charity," then "Making a change to your organization" and see "Change	authority to communicate with the CRA egistered charity," then "Making a chan	on behalf of your chari ge to your organizatior	ity, their name must also appear as an owner for your Businer of and see "Change director."	also appear as an owner for your Business Number (BN). For more information, go director."
Public information			Confidential data	8893
Last name: CRUMP First name:	e: PHIL	Initial:	Residential address – Street number and name: 4716 49TH AVE	34B <i>A</i>
Term ▶ Start date (Y/M/D):   2   0   1   6   1   0	0   1   End date (Y/M/D):		City: COLD LAKE Prov/Terr: AB	Postal code:   T   9   M   1   Y   3
Position: PRESIDENT	At arm's length with other Directors?	X Yes No	Phone number   7   8   0   -   5   9   4   -   1   4   2   0   Dat	Date of birth (Y/M/D):   1   9   5   1   0   9   0   4 6.
Last name: SUTTERFIELD First name:	e: CANDICE	Initial:	Residential address – Street number and name: 4703 58 ST	STREET
Term ▶ Start date (Y/M/D):   2   0   1   6   1   0	0   1   End date (Y/M/D):		City: COLD LAKE Prov/Terr: AB	Postal code:   T   9   M   1   T   9   YE
Position: DIRECTOR	At arm's length with other Directors?	X Yes No	Phone number   7   8   0   -   5   9   4   -   4   6   0   1   Dat	Date of birth (Y/M/D):  1  9  8  3  0  7  3  1  8  1  1  1  1  1  1  1  1  1  1  1  1  1
Last name: ALLEN First name:	e: LYLA	Initial:	Residential address – Street number and name: 1106 13 AVE	
Term ▶ Start date (Y/M/D):   2   0   1   6   1   0	0   1   End date (Y/M/D):		City: COLD LAKE Prov/Terr: AB	Postal code:   T   9   M   1   J   4 G
Position: DIRECTOR	At arm's length with other Directors?	X Yes No	Phone number   7   8   0   -   6   3   9   -   0   4   4   0   Dat	Date of birth (Y/M/D):   1   9   6   6   0   9   1   1   1   1   1   1   1   1   1
Last name: GILLAN First name:	e: DIANE	Initial:	Residential address – Street number and name: BOX 543	
Term ▶ Start date (Y/M/D):   2   0   1   6   1   0	0   1   End date (Y/M/D):		City: COLD LAKE Prov/Terr: AB	Postal code:   T   9   M   1   P   2
Position: DIRECTOR	At arm's length with other Directors?	X Yes No	Phone number   7   8   0   -   5   9   4   -   4   5   7   1   Dat	Date of birth (Y/M/D):   1   9   6   2   0   9   1   7
Last name: BOUDREAU First name:	e: TANYA	Initial:	Residential address – Street number and name: #308 1705 7	7 AVE
Term ▶ Start date (Y/M/D):   2   0   1   8   0   4	1   8   End date (Y/M/D):		City: COLD LAKE Prov/Terr: AB	Postal code:   T   9   M   0   A   6
Position: DIRECTOR	At arm's length with other Directors?	X Yes No	Phone number   7   8   0   -   8   2   7   -   8   1   1   0   Dat	Date of birth (Y/M/D):   1   9   7   4   1   1   2   0
Last name: TURCHYN First name:	e: KIMBERLY	Initial:	Residential address – Street number and name: BOX 153	
Term ▶ Start date (Y/M/D):   2   0   1   8   0   2	1 3 End date (Y/M/D):		City: CHERRY GROVE   Prov/Terr: AB	Postal code:   T   0   A   0   T   0
Position: DIRECTOR	At arm's length with other Directors?	X Yes No	Phone number   7   8   0   -   5   7   3   -   8   8   6   4   Dat	8 8 6 4 Date of birth (Y/M/D):   1   9   7   5   0   7   0   6
Last name: VARDY First name:	e: GREGORY	Initial:	Residential address - Street number and name: 6807B 47 ST	
Term ▶ Start date (Y/M/D):   2   0   1   9   1   2	1   1   End date (Y/M/D):		City: COLD LAKE Prov/Terr: AB	Postal code:   T   9   M   0   B   1
Position: DIRECTOR	At arm's length with other Directors?	X Yes No	Phone number   4   1   6   -   7   2   0   -   3   6   4   8   Dai	Date of birth (Y/M/D):   1   9   8   2   0   8   0   3
Last name: YOUNG First name:	e: TARMARA	Initial:	Residential address – Street number and name: BOX 691	
Term ▶ Start date (Y/M/D):   2   0   1   9   1   2	1   1   End date (Y/M/D):		City: ELK POINT   Prov/Terr: AB	Postal code:   T   0   A   1   A   0
Position: DIRECTOR	At arm's length with other Directors?	X Yes No	Phone number   7   8   0   -   6   1   4   -   7   3   6   7   Dat	Date of birth (Y/M/D):   1   9   6   9   0   6   1   5
Last name: WINTER First name:	e: PATERESA	Initial:	Residential address – Street number and name: 1104 11AVE	
Term ▶ Start date (Y/M/D):   2   0   1   9   1   2	1   1   End date (Y/M/D):		City: COLD LAKE Prov/Terr: AB	Postal code:   T   9   M   1   J   4
Position: DIRECTOR	At arm's length with other Directors?	X Yes No	Phone number   4   0   3   -   3   7   6   -   6   8   3   5   Date of birth (Y/M/D):   1   9	e of birth (Y/M/D):   1   9   9   4   0   7   3   1



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Directors/Trustees and Like Officials Worksheet

Canada Revenue Agence du revenu Agency du Canada

Agency du Canada				rustees and LIKE	Directors/Trustees and Like Officials Worksheet			ient CU
You must give us complete information for each director/trustee and like official who, at any time during the fiscal period of this return, was a member of the charity's board of directors/trustees. Directors/trustees and like officials are persons who govern a registered charity. See the reverse for information on filling out this form.	each dire d charity	ector/t	trustee and like official who, at any the reverse for information on fillin	time during the fiscal g out this form.	period of this return, was a mer	nber of the charity's board of dire	ctors/trustees. Directors/trustees and like	:: COL Sign
Total number of directors/trustees and like officials:	officials:		Charity name:		Business	s number:	Return for fiscal period ending (YYYY/MM/DD):	Env
								elop
Note: If you would like these individuals to have the authority to communicate with the CRA on being canada.ca/charities-diving select "Operating a registered charity." then "Making a change to a	have the	author	ority to communicate with the CRA tered charity." then "Making a chan	on behalf of your cha	rity, their name must also apperance and see "Change director."	ar as an owner for your Business	shalf of your charity, their name must also appear as an owner for your Business Number (BN). For more information, go your organization, and see "Change director."	IOHN e ID:
Public information					Confidential data			HOW 8E9
	First name:		MICHELLE	Initial:	Residential address – Street nu	Street number and name: 2007 LEFEBVRE	/RE PLACE	VARE 34B
Term ▶ Start date (Y/M/D):   2   0   1   9	1 2	_	1   End date (Y/M/D):		City: COLD LAKE	Prov/Terr: AB	Postal code:   T   9   M   1   K   3	AB-7
Position: DIRECTOR		Ata	At arm's length with other Directors?	X Yes No	Phone number   7   8   0	-   5   7   3   -   4   1   6   7   Date	Date of birth (Y/M/D):   1   9   7   4   0   5   3   1	397-
Last name: MOORE	First name:		DON	Initial:	Residential address – Street nu	Street number and name: 4911 57 AVE		4DC
Term ▶ Start date (Y/M/D):   2   0   2   0	0 1	2	9   End date (Y/M/D):		City: COLD LAKE	Prov/Terr: AB	Postal code:   T   9   M   0   J   1	1
Position: DIRECTOR		Ata	At arm's length with other Directors?	X Yes No	Phone number   7   8   0	- 4 0 4 - 9 6 2 7 Date	of birth (Y/M/D):   1   9   8   8   1   1   1   1	1 1
Last name:	First name:	me:		Initial:	Residential address – Street nu	- Street number and name:		8788
Term ▶ Start date (Y/M/D):			End date (Y/M/D):		City:	Prov/Terr:	Postal code:	4D9
Position:		Ata	At arm's length with other Directors?	Yes No	Phone number		Date of birth (Y/M/D):	4105
Last name:	First name:	me:		Initial:	Residential address – Street nu	Street number and name:		
Term ▶ Start date (Y/M/D):			End date (Y/M/D):		City:	Prov/Terr:	Postal code:	_
Position:		Ata	At arm's length with other Directors?	Yes No	Phone number		of birth (Y/M/D):	
Last name:	First name:	me:		Initial:	Residential address – Street nu	Street number and name:		
Term ▶ Start date (Y/M/D):			End date (Y/M/D):		City:	Prov/Terr:	Postal code:	ı
Position:		Ata	At arm's length with other Directors?	Yes No	Phone number		Date of birth (Y/M/D):	
Last name:	First name:	me:		Initial:	Residential address – Street nu	Street number and name:		
Term ▶ Start date (Y/M/D):			End date (Y/M/D):		City:	Prov/Terr:	Postal code:	
Position:		Ata	At arm's length with other Directors?	Yes No	Phone number		of birth (Y/M/D):	
Last name:	First name:	me:		Initial:	Residential address – Street nu	Street number and name:		
Term ▶ Start date (Y/M/D):			End date (Y/M/D):		City:	Prov/Terr:	Postal code:	ı
Position:		At a	At arm's length with other Directors?	Yes No	Phone number		Date of birth (Y/M/D):	
Last name:	First name:	me:		Initial:	Residential address – Street nu	Street number and name:		
Term ▶ Start date (Y/M/D):			End date (Y/M/D):		City:	Prov/Terr:	Postal code:	
Position:		At a	At arm's length with other Directors?	Yes No	Phone number		of birth (Y/M/D):	
Last name:	First name:	me:		Initial:	Residential address – Street nu	Street number and name:		
Term ▶ Start date (Y/M/D):			End date (Y/M/D):		City:	Prov/Terr:	Postal code:	
Position:		At a	At arm's length with other Directors?	Yes No	Phone number	Date	Date of birth (Y/M/D):	

13102

(Ce formulaire est disponible en français.)



May 5, 2021 Confidential

The Cold Lake John Howard Society 5220 54 Street
Cold Lake Alberta T9M 1W2

Attention: Mr. Phil Crump, President

Dear Phil:

The purpose of this letter is to outline the nature of our involvement with the financial statements of The Cold Lake John Howard Society for the year ending December 31, 2020. As agreed we will compile financial statements in accordance with the standards applicable to compilation engagements for the year ended December 31, 2020 from information provided by you. We will not perform an audit or a review engagement on such information.

Unless unanticipated difficulties are encountered, our communication will be substantially in the following form:

#### NOTICE TO READER

On the basis of information provided by management, we have compiled the statement of financial position of The Cold Lake John Howard Society as at December 31, 2020 and the statements of revenues and expenditures and changes in net assets for the year then ended.

We have not performed an audit or a review engagement in respect of these financial statements and, accordingly, we express no assurance thereon.

Readers are cautioned that these statements may not be appropriate for their purposes.

The financial statements for the year ended December 31, 2019 were compiled by another accounting firm and were neither audited nor reviewed and are presented for comparative purposes only.

#### **Our Responsibilities**

Since we are accepting this engagement as accountant, not as auditor, we request that you do not record this as an auditing engagement in the minutes of your members' meetings. Our services will not result in the expression of an audit opinion or any other form of assurance on the financial statements nor the fulfilling of any statutory or other audit requirement. You may wish to obtain legal advice concerning statutory (or contractual) audit requirements.

It is understood and agreed that:

- a) you will provide us with accurate and complete information necessary to compile such statements;
- b) the responsibility for the accuracy and completeness of the representations in the financial statements remains with you;
- c) each page of the financial statements will be conspicuously marked as being unaudited;
- d) you will attach our *Notice to Reader* communication when distributing the financial statements to third parties;
- e) the financial statements may either lack disclosure required by, or otherwise not be in accordance with, an applicable financial reporting framework and may not be appropriate for general purpose use; and
- f) uninformed readers could be misled unless they are aware of the possible limitations of the statements and our very limited involvement.

This engagement cannot be relied upon to prevent or detect error and fraud and other irregularities. We wish to emphasize that responsibility for the prevention and detection of error and fraud and other irregularities must remain with management.

#### **Confidentiality**

One of the underlying principles of the profession is a duty of confidentiality with respect to client affairs. Each professional accountant must preserve the secrecy of all confidential information that becomes known during the practice of the profession. Accordingly, we will not provide any third party with confidential information concerning the affairs of The Cold Lake John Howard Society unless:

- We have been specifically authorized with prior consent;
- We have been ordered or expressly authorized by law or by the Code of Professional Conduct/Code of Ethics; or
- The information requested is (or enters into) public domain.

In performing our services, we will send messages and documents electronically. You acknowledge that electronic communication carries the possibility of inadvertent misdirection, interception or non-delivery of confidential material, or infection by a virus. If you do not consent to our use of electronic communications, please notify us in writing.

We do not accept responsibility and will not be liable for any damage or loss caused in connection with the interception or corruption of an electronic communication.

#### Use and Distribution of Our Communication

The compilation of the financial statements and the issuance of our *Notice to Reader* communication are solely for the use of those to whom our report is specifically addressed by us. We make no representations of any kind to any third party in respect of these financial statements, and we accept no responsibility for their use by any third party.

If you require our consent in this regard, management agrees to provide, on a timely basis, a draft of the other information for our review prior to the issuance of the notice to reader report.

#### **Ownership**

The working papers, files, other materials, reports and work created, developed or performed by us during the course of the engagement are the property of our firm, constitute confidential information and will be retained by us in accordance with our firm's policies and procedures.

During the course of our work, we may provide, for your own use, certain software, spreadsheets and other intellectual property to assist with the provision of our services. Such software, spreadsheets and other intellectual property must not be copied, distributed or used for any other purpose. We also do not provide any warranties in relation to these items and will not be liable for any damage or loss incurred by you in connection with your use of them.

We retain the copyright and all intellectual property rights in any original materials provided to you.

#### **File Inspections**

In accordance with professional regulations (and by our firm's policy), our client files must periodically be reviewed by practice inspectors and by other firm personnel to ensure that we are adhering to professional and our firm's standards. File reviewers are required to maintain confidentiality of client information.

#### **Accounting Advice**

Except as outlined in this letter, this engagement does not contemplate the provision of specific accounting advice or opinions or the issuance of a written report on the application of accounting standards to specific transactions and to the facts and circumstances of the entity. Such services, if requested, would be provided under a separate engagement.



#### **Dispute Resolution**

You agree that:

- a) Any dispute that may arise regarding the meaning, performance or enforcement of this engagement will, prior to resorting to litigation, be submitted to mediation; and
- b) You will engage in the mediation process in good faith once a written request to mediate has been given by any party to the engagement.

Any mediation initiated as a result of this engagement shall be administered within the Province of Alberta by [name of mediation organization], according to its mediation rules, and any ensuing litigation shall be conducted within such province, according to provincial law. The results of any such mediation shall be binding only upon agreement of each party to be bound. The costs of any mediation proceeding shall be shared equally by the participating parties.

#### **Indemnity**

The Cold Lake John Howard Society hereby agrees to indemnify, defend (by counsel retained and instructed by us) and hold harmless our firm (and its partners, agents or employees) from and against any and all losses, costs (including solicitors' fees), damages, expenses, claims, demands or liabilities arising out of (or in consequence of):

- a) The breach by The Cold Lake John Howard Society, or its directors, officers, agents or employees, of any of the covenants made by The Cold Lake John Howard Society herein, including, without restricting the generality of the foregoing, the misuse of, or the unauthorized dissemination of, our engagement report or the financial statements in reference to which the engagement report is issued, or any other work product made available to you by our firm.
- b) The services performed by us pursuant to this engagement, unless, and to the extent that, such losses, costs, damages and expenses are found by a court of competent jurisdiction to have been due to the negligence of our firm. In the event that the matter is settled out of court, we will mutually agree on the extent of the indemnification to be provided by your organization.

We will use all reasonable efforts to complete the engagement as described in this letter within the agreed upon time frames. However, we shall not be liable for failures or delays in performance that arise from causes beyond our control, including the untimely performance by The Cold Lake John Howard Society of its obligations.

#### Billing

Our fees and costs will be billed monthly and are payable upon receipt. Invoices unpaid 30 days past the billing date may be deemed delinquent and are subject to an interest charge of 2.00% per month or 24.00% (APR) per annum. We reserve the right to suspend our services or to withdraw from this engagement in the event that any of our invoices are deemed delinquent. In the event that any collection action is required to collect unpaid balances due to us, you agree to reimburse us for our costs of collection, including lawyers' fees.

#### Costs of Responding to Government or Legal Processes

In the event we are required to respond to a subpoena, court order, government agency or other legal process for the production of documents and/or testimony relative to information we obtained and/or prepared during the course of this engagement, you agree to compensate us at our normal hourly rates for the time we expend in connection with such response and to reimburse us for all of our out-of-pocket costs (including applicable GST) incurred.

#### **Communications**

In connection with this engagement, we may communicate with you or others via telephone, facsimile, post, courier and email transmission. As all communications can be intercepted or otherwise used or communicated by an unintended third party, or may not be delivered to each of the parties to whom they are directed and only to such parties, we cannot guarantee or warrant that communications from us will be properly delivered only to the addressee. Therefore, we specifically disclaim and waive any liability or responsibility whatsoever for interception or unintentional disclosure of communications transmitted by us in connection with the performance of this engagement. In that regard, you agree that we shall have no liability for any loss or damage to any person or entity resulting from: communications, including any consequential, incidental, direct or indirect; special damages, such as loss of revenues or anticipated profits; or disclosure or communication of confidential or proprietary information.



#### **Termination**

Management acknowledges and understands that failure to fulfill its obligations as set out in this engagement letter will result, upon written notice, in the termination of the engagement.

Either party may terminate this agreement for any reason upon providing written notice to the other party [not less than 30 calendar days before the effective date of termination]. If early termination takes place, The Cold Lake John Howard Society shall be responsible for all time and expenses incurred up to the termination date.

If we are unable to complete the engagement we may withdraw from the engagement before issuing a notice to reader report. If this occurs, we will communicate the reasons and provide details

#### Proceeds of Crime (Money Laundering) and Terrorist Financing Act

The *Proceeds of Crime (Money Laundering) and Terrorist Financing Act* places legal requirements on our firm to report transactions that may be suspicious of being related to a money laundering or terrorist financing offence. It also requires our firm to report large cash transactions equal to or greater than \$10,000, cross-border currency and monetary instruments equal to or greater than \$10,000, and whether we are in possession or control of property that is considered terrorist property. Finally, the *Act* requires our firm ascertain the identity and existence of clients and other entities. To meet these obligations, our firm may have to report information about The Cold Lake John Howard Society that might otherwise be confidential. The reporting of this information may place The Cold Lake John Howard Society and our firm in a conflict of interest. Should such a conflict arise, our firm may be required to withdraw from this engagement. Please be advised that we will do everything in our power to avoid such conflicts and that only information that is required will be disclosed. You hereby acknowledge this legal requirement placed upon our firm and the potential conflict of interest that may arise as a result of it. You also hereby authorize our firm to release and disclose information related to The Cold Lake John Howard Society when required by statute to do so.

#### **Personal Information**

It is acknowledged that we will have access to all personal information in your custody that we require to complete our engagement. Our services are provided on the basis that:

- 1. you represent to us that you have obtained any required consents for collection, use and disclosure to us of personal information required under applicable privacy legislation; and
- 2. we will hold all personal information in compliance with our firm's Privacy Statement.

#### Other Terms of Engagement

Subject to management review and approval, we will carry out such bookkeeping as we find necessary prior to the preparation of the financial statements, prepare the necessary federal and provincial income tax returns and prepare any special reports as required. Management will provide the information necessary to complete the returns/reports and will file them with the appropriate authorities on a timely basis.

It should be noted that our accounting work in the area of GST and other commodity taxes is limited to that appropriate to compile the financial statements. Accordingly, we may not detect situations where you are incorrectly collecting GST or incorrectly claiming input tax credits. As you are aware, failure to properly account for the GST could result in you or your company becoming liable for tax, interest or penalties. These situations may also arise for provincial sales tax, custom duties and excise taxes.

We will also be pleased to provide additional services upon request. Such services include income tax planning, GST and PST advice, business financing, management consulting and valuations.

#### Not Liable For Any Failures or Delays Beyond Our Control

We will use all reasonable efforts to complete the engagement as described in this letter within the agreed-upon time frames. However, we shall not be liable for failures or delays in performance that arise from causes beyond our control, including the untimely performance by your organization of its obligations.



#### **Consequential Loss**

Our firm and its partners, officers or employees will not be responsible for any consequential loss, injury or damages suffered by the client including but not limited to loss of use, earnings and business interruption, or the unauthorized distribution of any confidential document or report prepared by or on behalf of our firm, including the partners, officers or employees of the accounting firm for the exclusive use of the client.

#### **Relevant Parties**

The client will not assert any claim for damages against our firm unless the client has concurrently or previously asserted a claim against all other persons who might reasonably be liable in relation to that claim. Any release, waiver, or covenant to otherwise not sue or enforce any remedy known to law given by the client to a third party shall be deemed to apply in favour of our firm.

#### **Third Parties**

The financial documents are prepared solely for the use of the client with whom we have entered into a contract and there are no representations of any kind made by us to any party with whom we have not entered into a written contract.

#### Personal Fee Guarantee

In consideration for the services rendered by this accountant to the organization, the undersigned personally guarantees payment of all invoices rendered in connection with terms of this engagement.

#### Bookkeeping, Tax Returns and Other Reports

Subject to management review and approval, we will carry out such bookkeeping as we find necessary prior to the preparation of the financial statements; prepare the necessary federal and provincial income tax returns; and prepare any special reports as required. Management will provide the information necessary to complete the returns / reports and will file them with the appropriate authorities on a timely basis.

#### **GST Services**

It should be noted that our accounting work in the area of GST and other commodity taxes is limited to that appropriate to compile the financial statements. Accordingly, we may not detect situations where you are incorrectly collecting GST or incorrectly claiming input tax credits. As you are aware, failure to properly account for the GST could result in you or your organization becoming liable for tax, interest or penalties. These situations may also arise for provincial sales tax, custom duties, and excise taxes.

#### Conclusion

This engagement letter includes the relevant terms that will govern the engagement for which it has been prepared. The terms of this letter supersede any prior oral or written representations or commitments by or between the parties. Any material changes or additions to the terms set forth in this letter will only become effective if evidenced by a written amendment to this letter, signed by all of the parties.



If you have any questions about the contents of this letter, please raise them with us. If the services outlined are in accordance with your requirements, and if the above terms are acceptable to you, please sign the copy of this letter in the space provided and return it to us.

We appreciate the opportunity of continuing to be of service to your organization.

Yours truly,

Femi Ajayi Partner femi.ajayi@kaftcpa.com

KAFT PROFESSIONAL CORPORATION

The services and terms set out above are as agreed to on behalf of The Cold Lake John Howard Society by:

As a representative of The Cold Lake John Howard Society

Phil (rump Mr. Phil Gironapp@Pa@sident

DocuSigned by:

May 3, 2021

Date signed

#### THE COLD LAKE JOHN HOWARD SOCIETY

5220 54 Street Cold Lake, Alberta T9M 1W2

May 5, 2021

KAFT PROFESSIONAL CORPORATION Box 26 Cold Lake Alberta T9M1P4

Dear Sir / Madam:

We are writing at your request to confirm our understanding about your engagement to compile financial statements for the year ended December 31, 2020 consisting of the statement of financial position and the statements of revenues and expenditures and changes in net assets of The Cold Lake John Howard Society. We confirm the following:

- 1. You have explained to us your limited involvement with these financial statements; that you compiled the statements based on information we presented to you and have not audited, reviewed, or otherwise attempted to verify the accuracy or completeness of the information presented.
- 2. We have reviewed, approved and recorded all of the following:
  - a) Adjusting journal entries you prepared or changed;
  - b) Account codes you determined or changed;
  - c) Transactions you classified; and
  - d) Accounting records you prepared or changed.
- 3. You have explained to us that these financial statements may not be suitable for use by persons other than our management.
- 4. We have obtained all consents that are required under applicable privacy legislation for the collection, use, and disclosure to you of personal information.

Further, we confirm, to the best of our knowledge and belief, the following representations made by us to you during your compilation of these financial statements:

- 1. All accounting and financial records and related data of the organization have been made available to you, and you have been made aware of and given access to outside sources of information where applicable.
- 2. All information necessary to compile these financial statements has been disclosed to you.
- 3. No events have occurred or are pending, and no facts have been discovered to date, which would cause these financial statements to be misleading.
- 4. These financial statements have been reviewed by management and we acknowledge sole responsibility for their content.
- 5. The statements disclose all significant assets, liabilities, revenues, and expenses of The Cold Lake John Howard Society.
- 6. The statements disclose only assets, liabilities, revenues, and expenses of The Cold Lake John Howard Society. Transactions between the organization and its members and other persons related to it have been disclosed to you. Specifically, members' personal use of organization assets has been disclosed to you and is properly reflected in the statements.
- 7. We hereby acknowledge that KAFT PROFESSIONAL CORPORATION have made us aware of your legal obligations under the Proceeds of Crime (Money Laundering) and Terrorist Financing Act. We hereby acknowledge that we are aware of potential conflict of interest that may arise as a result of your legal obligations under this Act and authorize KAFT PROFESSIONAL CORPORATION to release and disclose information about The Cold Lake John Howard Society as required by statute.

- 8. We have reviewed thse financial statements and we acknowledge sole responsibility for their content.
- 9. You have reviewed the above items and the aforementioned financial statements with us and that we fully understand the information discussed above and contained in the financial statements.
- 10. You have reviewed the Company income tax returns with us and that we understand the liabilities associated with these returns.
- 11. We have reviewed your fees for this engagement and the amount is satisfactory.

Yours truly,

#### THE COLD LAKE JOHN HOWARD SOCIETY

Mr. Phil Crump

Mr. Phil Crump

May 3, 2021

Date signed



May 5, 2021

The Cold Lake John Howard Society 5220 54 Street Cold Lake Alberta T9M 1W2

The Code of Ethics and Rules of Professional conduct adopted by the Chartered Professional Accountants Association, states that a member:

"Shall not divulge information concerning the business affairs of his employer or client without their consent, unless required to do so by law."

Since we have been appointed accountants of your firm, we feel that to provide the level of professional services you require, it would be in your best interest, as our valued clients, to allow us to assist in inquiries from your bank, lawyer, insurance agents, and governmental audits.

To allow us to perform our function in a professional manner, we would appreciate your authority to:

- 1. Answer queries from your lawyer and transmit to the Records Office of the Company, copies of your financial statements as required by the Companies Act.
- 2. Answer queries from your banker and transmit to your Bank, copies of your financial statements as required by them.
- 3. Answer queries from your insurance agent, but only insofar as is necessary to ensure that you have adequate insurance coverage.
- 4. Answer queries from governmental auditors who have authority to review the books and records of the Company under both federal and provincial regulations and statutes, and to transmit such tax filings, reports, and financial statements as required by law.

Releases will be restricted to the above unless we have your authority to assist or disclose information in other areas as you may require from time to time, from us, in our capacity as your professional accountants.

Regards,

Femi Ajayi Partner

femi.ajayi@kaftcpa.com

KAFT PROFESSIONAL CORPORATION



The releases set out in the above letter are in accordance with our requirements and we hereby agree to the terms and conditions of the release of the above specifically documented information as applicable.

As a representative of The Cold Lake John Howard Society

| Docusigned by:
| Phil Crump

| Mr. Phil Class President
| May 3, 2021
| Date signed



January 1, 2021

To the Board of Directors of The Cold Lake John Howard Society 5220 54 Street Cold Lake, Alberta T9M 1W2

Dear Mr. Crump:

We have been engaged to compile the financial statements of The Cold Lake John Howard Society for the year ended December 31, 2020.

It is required that we communicate with you annually regarding all relationships between the company and our firm that, in our professional judgment, may reasonably be thought to bear on our independence.

In determining which relationships to report, the standards require us to consider relevant rules and related interpretations prescribed by the appropriate Chartered Professional Accountants Association of Alberta and applicable legislation, covering such matters as:

- a) holding a financial interest, either directly or indirectly, in a client;
- b) holding a position, either directly or indirectly, that gives the right or responsibility to exert significant influence over the financial or accounting policies of a client;
- c) personal or business relationships of immediate family, close relatives, partners or retired partners, either directly or indirectly, with a client;
- d) economic dependence on a client; and
- e) provision of services in addition to the compilation engagement.

We have prepared the following comments to facilitate our discussion with you regarding independence matters arising since January 1, 2020.

We are aware of the following relationships between the company and our firm that, in our professional judgment, may reasonably be thought to bear on our independence. The following relationships represent matters that have occurred from January 1, 2020 to January 1, 2021.

- a) Our firm provides annual bookkeeping services. This relationship could be viewed to be a threat to our independence in that we must review our own work. We believe any threat is mitigated by the following safeguards:
- i.) this work is done by a staff member who is not a member of the compilation team;
  - ii.) we obtain your approval of the annual bookkeeping and GST results with you after we have reviewed them with you in detail;

- iii.) we are a member of a professional accounting organization and are therefore subject to periodic practice inspection and to on-going professional development requirements.
- b) During our annual compilation of your financial statements it is usual for us to make simple adjustments for such items as accounts receivable, accounts payable, amortization and any other required adjustments as determined in our discussions with you. This relationship could be viewed to be a threat to our independence in that we must review my own work. I believe any threat is mitigated by the following safeguards:
- i.) we obtain your approval of these adjustments after we have reviewed them with you in detail, and your approval is indicated by signature on the representation letter;
- ii.) we are a member of a professional accounting organization and therefore subject to periodic practice inspection and to on-going professional development requirements.

We hereby confirm that we are independent with respect to The Cold Lake John Howard Society within the meaning of the Code of Ethical Principles and Rules of Conduct of the CPA Association of Alberta as of January 1, 2021.

This report is intended solely for the use of the Board of Directors and others within the company and should not be used for any other purpose.

We look forward to discussing with you the matters addressed in this letter.

Yours truly,

**Chartered Professional Accountants** 

KAFT Professional Corporation.



#### THE COLD LAKE JOHN HOWARD SOCIETY

5220 54 Street Cold Lake, Alberta T9M 1W2

MINUTES OF A SPECIAL MEETING OF THE SHAREHOLDERS OF **THE COLD LAKE JOHN HOWARD SOCIETY** HELD COLD LAKE, IN THE PROVINCE OF ALBERTA, AT 10:00 AM THIS  $14^{TH}$  DAY OF MAY 2021

PRESENT: Phil Crump

being all of the voting shareholders of the Company.

#### **Financial Statements**

The President produced for the perusal of the meeting a copy of the financial statements provided by the Company's accountant for the fiscal period ended December 31, 2020.

UPON MOTION DULY MADE, SECONDED AND UNANIMOUSLY CARRIED, It was resolved that the financial statements as prepared and reviewed by the accountant and as presented by the President be accepted.

#### **Appointment of Accountant**

The President recommended to the meeting that audited financial statements for the past year were not required.

UPON MOTION DULY MADE, SECONDED AND UNANIMOUSLY CARRIED, it was resolved that in accordance with the Alberta Business Corporation Act, the Company does hereby waive the appointment of an auditor for the fiscal period ended December 31, 2020, and will utilize the unaudited financial statements that were prepared and reviewed by the Company's accountant, KAFT Professional Corporation, Chartered Professional Accountants, and further, that this firm be appointed as the Company's accountant for the ensuing fiscal year.

#### Adjournment

There being no further business to come before the meeting, UPON MOTION DULY MADE, SECONDED AND UNANIMOUSLY CARRIED, THAT THE MEETING BE ADJOURNED, and the following notice would be read and ordered inserted into the minutes:

"We, the undersigned, being all the shareholders of the Company, do hereby consent to holding of this meeting at the above time and place and to the transactions of such business as has come before this meeting without notice of this meeting as attested to by our signatures hereto."

As a representative of The Cold Lake John Howard Society

Mr. Phils CPGPGPS FIRESident

May 3, 2021

Date signed