Ward Budget Approval Form



Use of this form

This form should be completed for all City Living, Local Life (CLLL) spending of allocated funds for each participating ward. This form is part of the audit trail for use of public funds. Officers will keep copies for internal records but applicants are encouraged to retain copies for their own use. Any spending approved must be for projects and activities that benefit mainly people who live or work in the ward, whose budget the spending sum is being allocated from. Further guidance about the use of this form is available from the Community Engagement Team.

Essential information

Name of individual making the request:		
If the request is being made by an		
organisation, please give name of		
organisation and position within		
organisation:		
Telephone, postal address and email:		
If this request is from a voluntary and		
community group (i.e. not an individual		
resident) please briefly outline the		
group's structure, purpose and history:		
3. cap c ca actano, p arp coo arra tactory.		
Annagement by signatomit to the	Cima at una	Data
Agreement* by signatory** to the account to which the approved	Signature	Date:
account to which the approved spending sum will be deposited to.		
Contact details:	Daytime tel:	
Contact details.	Daytime tel.	
	Mobile:	
	E mail:	
	E-mail:	
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^{*}By way of this agreement you and your group are committing to utilising the spending sum according to the aims of CLLL. You must keep proper records of expenditures in relation to this application (for example by retaining receipts and invoices). You agree with the Council to allow their nominated officer(s) access to records which might be required by Internal Audit and/or the Community Engagement Team.

** The person making this application can be the same person who is the signatory to the bank account of the voluntary and community group.

Amount sought, and spending purpose

Note: Money cannot be deposited to personal accounts. If money is to be deposited to an account for spending over a period of time then a voluntary and community organisation which agrees to accept the funds for CLLL spending purposes will have to be identified by the applicant.

Spending Sum required:	£	
Name of Bank/Building Society		
Address of Bank/Building Society		
Name of Account:		
Account Number:		
Sort Code:		
is it for, and how will the money be sper meets specific aims of CLLL.	use of the spending sum requested, i.e. whant, and by <u>ticking</u> and then <u>explaining</u> how i	
CLLL aims are to: 1) enhance understanding of local areas (includemography, local assets and community re		
build stronger connections and relationshit (networking within and beyond ward boundary)	ips within communities	
3) help to identify, assess and prioritise impr 4) devise practical solutions that engage and	ovements in local areas	
5) work with local people and organisations	<u> </u>	

For official use only

Approval

Officer comments to Councillors (the Support Officer is expected to offer a view by way of an assessment of how well the application meets the CLLL aims, including advice in support or against the application):		
Ward Councillor endorsement (note:	Councillor 1	
all three Ward Councillors must provide	Name (block caps):	
their individual approval (email approvals are accepted).	Date approval received:	
approvais are accepted).	Councillor 2	
	Name (block caps):	
	Date approval received:	
	Councillor 3	
	Name (block caps):	
	Date approval received:	
	I	
It is not expected that all applications will be approved and with the requested sum. Please record here the amount approved:		
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