

SALUS MUTUAL DONATION APPLICATION

Salus Mutual Insurance Company ("Salus Mutual") supports a number of local charitable and volunteer organizations each year with gifts that can include money, in-kind items, and possibly volunteer help.

Donations will be considered for organizations and events whose goals provide a direct benefit to the Company (e.g., fire prevention and the purchase of fire department equipment), or whose goals improve the quality of life for the communities where we do business. These organizations or events will include, but not be limited to, those who focus on cultural, agricultural, environmental, health, heritage, or educational goals, or fire prevention.

Salus Mutual, under normal circumstances, will not consider donations to: "for profit" organizations or events; religious or sectarian organizations or events, unless they support broad-based community needs; adult sporting teams, organizations, or events. We will, however, consider donations to youth sports teams, organizations, or events.

In-kind donation requests (e.g., pens, fire extinguishers) will be considered as long as they meet the Company criteria listed above.

To request a donation, please fill out this Donation Application and sent it to us, either by mail or email.

Mail: Salus Mutual Insurance Company

Donations Committee Employee Representative

29584 Pioneer Line, P.O. Box 312

Dutton, Ontario N0L 1J0

Email: <u>donations@salusmutual.ca</u>

For any questions, feel free to contact us in writing, or by phone at 1-866-931-2809.

| Please tell us about your organization. | |
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| Organization name: | |
| Charitable number: | |
| Address: | |
| Telephone number: | |
| Contact person: | |
| Email: | |
| What is the purpose of your organization? What do you do, who do you help, etc.? | |
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| Tell us more about your organization (e.g., history, number of members, number of volunteers, etc.). |
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| Have you received funding or other support from Salus Mutual in the past? Yes No If yes, outline the details. |
| Please tell us about your request. |
| What is the amount, or type of in-kind donation, requested? |
| Provide us with a brief description of your project and how you expect to use the provided donation. |
| If applicable, list the other organizations you have applied to for support for this project. |
| How do you plan to provide recognition of Salus Mutual's support for your project? |

Salus Mutual strives to support organizations with good governance and financial stability. If your donation request is of a large nature, Salus Mutual may request the following additional information:

- 1. A list of your officers and their contact information
- 2. A budget for your project, listing the expenses and revenues
- 3. A copy of your organization's most recent financial statement

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