

# STAFF REPORT

**Department: Administration**

**Date: March 5, 2024**

**Item: Recommendation regarding Food Bank Donation Request**

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**Recommendation:** Be It Resolved That: The Corporate Services Committee defer a decision on this item pending further clarification from the Food Bank.

**Background:** The Espanola Helping Hand Food Bank is requesting that the Town cover their building rental costs on an annual basis at a current rate of \$1,500 per month for an annual total of \$18,000. Food Banks are not typically a municipally funded service. Staff canvassed 9 comparator municipalities and of them, only 1 municipality makes a donation to their local Food Bank in the amount of \$200 annually. A few of the comparators reported that their Food Bank has not asked for support or have sufficient funds to cover such costs through their fundraising efforts.

**Analysis:** Staff is recommending deferral of a recommendation on this item as we would like the Food Bank to provide clarification as to the need for their request. Unless the Food Bank has been experiencing major shortfalls in their fundraising to cover their operating and building costs, staff does not recommend that a donation be made from the Town. If local fundraising efforts are meeting the needs of the Food Bank, then Staff's position is that the municipality should leave it to individual rate payers to decide whether they wish to make a donation or not. It is expected that this clarification will be provided at the Corporate Services Committee meeting.

It should be further noted that the Manitoulin District Services Board contributes funds to local Foodbanks that come in part from provincial funding and through Food Banks Canada.

Staff wishes to acknowledge the importance of the Food Bank in general of course and we certainly commend the Food Bank and its volunteers for the work that they do.

**Existing Policy:** F25-01280, Charitable Donations Policy

**Strategic Goal:** N/A



**Financial Commitment:** N/A

**Budgeted:** Yes  No

**Implementation:** Upon Council Recommendation

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**Department Manager:** Joseph Burke

**CAO/Clerk:** Joseph Burke

**Approval of Recommendation:** Yes  No

**Comments:**