



EAST HANTS

COMMUNITY GRANT REPORT FORM

Address: Box 230, Suite 270, 15 Commerce Court, Elmsdale B2S 3K5 Phone: (902) 883.3387 Toll Free: 1-866-758-2299

DEPARTMENT OF PARKS, RECREATION AND CULTURE

PROJECT _____

NAME OF ORGANIZATION _____

Contact Person _____

Address _____

Phone No.: _____

TYPE OF GRANT RECEIVED Recreation Programming Recreation Operating

New Leisure Initiative Event Hosting

AMOUNT OF GRANT: _____

DATE APPROVED: _____

ITEMIZED PROJECT EXPENDITURES (Please attach copies of receipts, cancelled cheques, etc. where available).

PLEASE REPORT **COMPLETE** PROJECT EXPENSES

ITEM	PAID TO	\$AMOUNT
A. _____	_____	_____
B. _____	_____	_____
C. _____	_____	_____
D. _____	_____	_____
E. _____	_____	_____
F. _____	_____	_____
G. _____	_____	_____
H. _____	_____	_____
I. _____	_____	_____
	TOTAL	\$ _____

Signature _____

Position _____

Date _____

Signature _____

Position _____

Date _____

This statement must be signed by two members of the Executive of the Association and submitted to the above address within 12 months or before applying for another grant.