Municipality of the County of Pictou
Municipal Grant Reporting Form
Deadline January 31st

Name of Organization:_____

Contact Person: _____

Phone: _____

Email Address: _____

Type of Grant (check one)

- ☐ Municipal Council Grant
- ☐ Community Connectivity Grant
- ☐ Recreation Grant
- ☐ District Community Connectivity Event Fund Grant District # _____
- ☐ District Municipal Service Grant District # _____

Value of the Grant: _____

Purpose of the Grant: _____

Use reverse side of form to provide additional information.

TYPE OF EXPENSE	COST
Please attach copies of invoices, cancelled cheques or receipts as proof that the grant was spent for the purpose it was approved.	
1.	$
2.	$
3.	$
4.	$
5.	$
6.	$
7.	$
8.	$
9.	$
10.	$
TOTAL COSTS	$

$_____ - $_____ = $_____

Insert grant amount **Insert total costs** **Unspent balance to be returned to the Municipality of Pictou County. If negative enter $0.00. Please enclose cheque with this report.**

I hereby certify that the information contained in this report is true and accurate to the best of my knowledge.

_____ _____

Signature of Authorized Individual Date

Failure to submit this report by Jan. 31st will result in your organization being ineligible for any new funding until the report has been received. Organizations who require additional time to complete their project beyond Jan. 31st must notify the Municipality in writing and receive approval at Municipal Council. Mail completed report to the Municipality of Pictou County, PO Box 910, Pictou, NS B0K 1H0.