

Community Investment Grants Accountability Statement

Statement to be completed and submitted within 60 days of the completion of the project/grant being used.

Authorize Signature	Date
Please attach: o Financial statement for the event li	isting all expenditures and revenues
How was the Municipality's contribution to the pro	ject recognized?
How were the grant funds used:	
Description of Completed Project:	
Amount Received:	
Email Address:	
Phone Number:	
Contact Name:	
Address:	
Organization:	

Personal information collected on this form is collected un the authority of the Municipal Act, 2001, S.O. 2001 c. 25 and will be used for the purpose of creating a records to determine eligibility for a municipal Community Investment Grant. Questions about this collection should be addressed to the Clerk of the Municipality of Kincardine at 1475 Concession 5, RR #5, Kincardine, ON N2Z 2X6