

COLUMBIA SHUSWAP REGIONAL DISTRICT

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AN	II-IN-AID REPORTING FORM	
	. Name of Organization: Amount of Grant-in-Aid received:	
4.	Total project expenses: (include copies of paid invoices)	
5.	Describe how the project, program, service or special event's anticipated objectives and timelines were met or not met: (attach photographs where applicable)	
6.	Describe how this project, service or special event will continue to be sustainable past the grant time period:	
	ON BEHALF OF THE ORGANIZATION, I/WE HEREBY DECLARE	
-	THAT THE GRANT-IN-AID FUNDING WAS UTILIZED FOR THE PURPOSE FOR WHICH THE FUNDS WERE SOUGHT	
ו	DATED AT, BC, THIS DAY OF, 20	
 	NAME	
-	SIGNATURE	