

ACTUAL PROJECT / PROGRAM COSTS

Revenue	
MAP Grant Received:	\$
Self Help:	\$
	\$
	\$
	\$
	\$
	\$
TOTAL REVENUE	\$

Expenses		Receipts Attached
1.	\$	
2.	\$	
3.	\$	
4.	\$	
5.	\$	
6.	\$	
TOTAL EXPENSES	\$	

**All expenses must be eligible for support and within the approved grant period/fiscal year. Please ensure copies of financial documentation (Ex. Receipts) are clear and readable.*

DECLARATION

I hereby certify the above information is correct and factual.

Sport Organization signing authority

Date

PROVINCIAL SPORT ORGANIZATIONS / MULTI-SPORT ORGANIZATIONS USE ONLY					
Amount Approved:		Authorization:		Date:	
Payment Date:		Cheque #:		Amount Paid:	