Off-highway Ve Statement of Expend	hicle In ditures	frastruc	ture Fund	t				
Organization (Grant Re	cipient)							
Address								
Postal Code			Tel:		Email:			
Contact Name:								
Type of Project								
Project Cost Estimate								
Amount of Grant Approv	ved		•					
Itemize Total Cost	of Proje	ct						
ltem			Paid To			Receipt/Cheq	ue No.	Amount

Donations	Brief Description		Amount
Value of Donated Labour(unskilled)			
Value of Donated Labour (Skilled)			
Value of Donated Equipment			
Value of Donated Materials			
		Project Total	

CERTIFICATION

Amount

The above itemized Financial Statement represents the total costs of the entire project or if multi-year project, expenditures to date, as approved for grant by the Ministerial Advisory Committee on Off-highway Vehicles and is supported by cancelled cheques, paid invoices or receipts to the full amount of the approved grant.

All cancelled cheques, paid invoices or receipts will be held for a period of seven (7) years from the date of this statement.

SIGNATURE:	SIGNATURE:								
	Position:								
Date:		Date:							
	ust be signed by two (2) members of Ministerial Advis			association and submitted to the Trail way Vehicles.					
FOR OFFICE USE ONLY									
(A) Certified that the above statement and supporting documentation were inspected and verified.									
highway Vehicles was car				/ Ministerial Advisory Committee on Off					
Documents Inspected and Verified			Date						
Final Inspection by		D	Date						
Signature		Р	Print Name						
Position		D	Date						
(B) Additional Comment	:s								
Signature		D	Date						
(C) Final Payment Requ	isition								

Date

Percentage