FINAL REPORT

Grants to Organizations
2027-2028

Upon completion of your project/program fill out this form with a recent financial statement and return by no later than March 31, 2028 to:

Robin Smith, Community Development Coordinator
By mail: P.O. Box 280, Shelburne NS, B0T 1W0
In person: 414 Woodlawn Drive. Shelburne, NS B0T 1W0
By Fax: 902-875-1278
Email: robin.smith@municipalityofshelburne.ca

Organization:	
Contact Person:	
Phone:	Email:
Signature:	Date:
Grant Amount approved:	
Total project/program cost:	
☐ Recent Financial Statement that identifies the grant funds attached (check box)	
Please provide a summary (below) of your project/program and how you spent your grant funds. Receipts do not need to be provided, however, we advise you keep them for at least two years so that they are available if requested. Please indicate the funding you received from other Municipal Units in 2027/2028:	