



**SUNSHINE COAST REGIONAL DISTRICT
ELECTORAL AREAS' GRANT-IN-AID REPORTING OUT FORM for 2023 Grant**

Society/Organization's Legal Name: _____

Mailing Address: _____ Phone No.: _____

_____ Cell No.: _____

_____ E-mail: _____

Contact Person: _____ Title: _____

What Area(s) were reached by your project, program, service or special event?

Egmont / Pender Harbour ☐ Halfmoon Bay ☐ Roberts Creek ☐

Elphinstone ☐ West Howe Sound & Islands ☐ Regional (All Areas including Municipalities) ☐

Town of Gibsons ☐ District of Sechelt ☐

Amount of Electoral Areas' Grant-in-Aid received: \$ _____

Describe the project, program, service or special event for which the Society / Organization is reporting out (attach receipts, if applicable):

Describe how the project, program, service or special event's anticipated goals / objectives and timelines were or were not met:

Describe how this project, service or special event will continue to be sustainable past the grant time period: