



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

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: