AT Maintenance and Operations Grant Interim Disbursement Request AT Corridor on land owned/ partially owned by HRM

Please submit this report by email to HRM Offices if final grant disbursement is needed before January 31st (due to a cash deficit for projects), and 30 days before funds are required.

| HRM Office: |
|---|
| Emma Martin, AT Community Programs Coordinator; Email: <u>ATGrants@halifax.ca</u> |
| Submission date: |
| |
| AT Maintenance and Operations Grant Awarded on (month, year): |
| |
| Organization Identification |
| 1. Group: Name, Mailing Address, Email, Phone, Fax, Website |
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| |
| 2. Reporting for the Grant Recipient: Name, Title in Organization, Phone and Email |
| |
| 3. Project Lead (if different from reporting contact): Name, title in organization, phone, email |
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| Active Transportation Corridor |
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| Describe any outstanding project(s) expected to be completed before March 31st: Summary and expected budget |
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| Describe any outstanding project(s) that will not be completed before March approximate budget | 31st: Summary and |
|--|--------------------|
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| | |
| Budget Reporting | |
| -Complete this section before the Grant Disbursement. Reporting totals will be co on the form. | pied automatically |
| Please submit supporting documents listed below: | |
| • Contractor (s)' invoices naming the Recipient that hired the Contractor (s)' s | ervices: |
| Copy of all receipts for eligible expenses to which the Contribution Amount | |
| HRM AT Maintenance and Operations Grant Summary | 11 |
| HRM Contribution Amount awarded as per awarding document (including carry or | ver and |
| up to \$2,000 organizational expenses) | ver and |
| HRM Contribution paid to date (\$0 if no payment was received; include carry-over, | if any |
| was recorded in the awarding) | |
| | |
| OTHER FUNDING SOURCES – only those received for active transportation co Other Municipal funds (Councilor district funds, other grants) | rridors maintained |
| Province – CCH- Operational Funding for Abandoned Rails Corridors | |
| Province – OHV-IF Funding | |
| TCT Funding | |
| Corporate funding | |
| Trail Association's own funds, including unspent HST | |
| Other sources of funding- please specify | |
| TOTAL OTHER FUNDING SOURCES | |
| 10112011210121000011020 | |
| ORGANIZATIONAL EXPENSES (Include all, not just those funded from HR | RM Grant) |
| TOTAL ORGANIZATIONAL EXPENSES | |
| MAINTENANCE EXPENSES (Include all, not just those funded from HRM (| Grant) |
| CONTRACTOR SERVICES- include labour and any supplies purchased by | |
| contractors directly and included in their invoices | |
| SUPPLIES/ MATERIALS/ EQUIPMENT Purchased by recipient directly and | |
| not included in the contractors' invoices | |
| TOTAL MAINTENANCE EXPENSES | |
| TOTAL OVERALL EXPENSES | |



Grant Disbursement Request

| \$HRM Award = HRM Contribution Amount awarded in 2023-2024 | |
|--|--|
| \$Total Other Funding Sources = Amount received from all other funders, including own | |
| organization's contribution | |
| \$Organizational Expenses = Total Organizational expenses reported | |
| \$Organizational expenses above \$2,000 to be paid with other sources of funding (e.g. | |
| CCTH, HRM- RT Grants, own funds)- include the amount to your right | |
| \$HRM's contribution towards organizational expenses (up to \$2,000) = | |
| \$Organizational Expenses - \$ Organizational expenses paid with other sources of funding | |
| \$Total Maintenance Expenses = Total maintenance expenses reported | |
| | |
| \$HRM's Contribution paid to date | |
| HRM's Contribution Amount Available = \$Award - \$ HRM's Contribution paid to date | |
| \$Balance from HRM contribution award= \$HRM's Contribution paid to date + \$Total Other Funding Sources - Total Maintenance Expenses - \$HRM's contribution towards organizational expenses (up to \$2,000) | |
| Positive result: no payments Negative result: \$Deficit | |
| HRM's payment = \$Deficit to be paid by HRM up to HRM's Contribution Amount Available - include in the right column the smaller of the \$deficit above or the HRM's Contribution Amount Available | |

| Submitted by: | | |
|-----------------------|--|--|
| Print name and title: | | |
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| | | |
| Signature: | | |
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