

Bucks County Tourism Grant Program

Grant Completion Report Expenditures Worksheet

Name of Organization:					
Project Title:					
Program Director:					
Email:					
Today's Date:					
Grant Award Amount:					
Year Grant Awarded:					
Activity/Description	<u>Vendor Name</u>	Total Expense of Activity	Applied Bucks County Tourism Grant Award Amount	Proof of Payment	Receipt/Invoice Attached?
Total Expenditures**					

^{*}Above expenditures must be in accordance with the terms set for in the Rules and Regulations.

^{**}Total expenses requested by the Tourism Grant Program must be in accordance with the percent match as set forth in the Rules and Regulations.