

## **Local Project Fund Report**



Please submit completed report to <u>Financial.Secretary@heu.org</u> within two (2) months of completion of local project. Funds will not be disbursed until report is submitted.

Local Name:	Project Date(s):
What was the local project?	
What did your local achieve?	
What did your local learn?	
How many members did you collect contact	t information from?
If contact information was not collected, wh	nat was the reason?
Did the servicing representative and/or Provided they support the project?	rincial Executive members participate and how

## **FINAL COST OF PROJECT:**

Lost Wages	Names	# of Hours	
Equipment			
-1			
Supplies			
Community			
Outreach/Advertising			
Other Assistance requested			
(please be specific)			
- ,			
Total Cost of Project \$ Cost Share Amount To Be Paid \$			
Motion Passed at Quorate Local Meeting? ☐ YES ☐ NO			
Receipts Attached?	☐ YES ☐ NO		
Local Secretary-Treasurer - Print Name Local Chairperson - Print Name			
Local Secretary-Treasurer Signature Local Chairperson Signature			
2004 Oldingologiatalo			
FOR HEU PROVINCIAL OFFICE USE ONLY			
DATE RECEIVED:			