



Neighborhood Matching Grant Project Reimbursement Form

3. What worked well?

4. What changes would you make to future projects?

5. Any other information? Is there any other information you would like to share about the project?



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Actual Project Expenses

The following types of expenses are reimbursable: List is not inclusive of all reimburseable expenses.

- **Materials / Supplies** (construction or planting materials, non-alcoholic refreshments, safety equipment, etc.)
- **Contracted Services** (site planners, sidewalk installation, audio visual techs, etc.)
- **Salaries / Wages** (babysitters, clean up crews, security techs, etc.)
- **Rentals / Leases** (equipment, tools, chairs, tables, tents, etc.)
- **Printing / Reproduction** (flyers, banners, invitations, newsletters, etc.)*
- **Capital Purchases** (signage, bike racks, etc.)
- **Other Project Expenses** (permit fees, insurance, etc.)

Please list your actual project expenses below. Please be specific. A receipt or invoice must be provided for each project expense claimed.

Project Expenses	Amounts:
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
Grand Total of Reimbursement Expenses:	a) \$



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Actual Project Match

The following types of donations and volunteer hours are eligible for your project match:

- **In-kind Donations** (services, materials and cash) Please include the name of the person or organization providing the match
- **Volunteer Hours** Please include the name of the person or group of persons volunteering
 - Travel (Including your time and expenses such as gas, bus fare, parking etc.)
 - Preparing application forms, designing project, project research
 - Making phone calls, emailing, faxing, site visits and in person communications
 - Presenting your ideas to the NAC

In-kind Donations	Amounts:
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
Total Donations	b) \$



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Project Match (continued)

Volunteer Participation	Hours	Amount Hours x \$25.43
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
Total Volunteer Hours c)		\$

Grand Total of Actual Project Match = donations and volunteer hours must be equal to or greater than the grand total of reimbursable expenses (a)	(d)	\$
Total of reimbursable expenses*	(a)	\$

* The NAC will be reimbursed based on the receipts submitted for Actual Project Expenses (a) up to the grand total of Actual Project Match (d) but cannot exceed \$3,000.