

Program:

Business Type:

Date:

Name of Organization:

Prepared by:

Project Name:

Project No.:

Claim Period: To:

All Programs – Eligible Costs Incurred and Paid (excl. HST and Payroll below, if applicable)

Date of Invoice	Name of Supplier	Description of Item or Service	Invoice Number	Cost (\$)	Cheque #	Document Attached?

Subtotal Program Costs:

Payroll – To Be Completed for all Claimed Wages

Check if vacation will be paid out each pay period

Employee Name	Pay Period	Total Hrs.	\$/hr	Total Wage Cost	Vacation Paid	Gross Paid	EI Employer Share	CPP Employer Share	EHT	WSIB	Other	Total

Other (Please Specify):

Subtotal Payroll Costs:

Total Program + Payroll Costs:

Total RII Contribution (50%):

Please describe how you strategically attained your Project Milestones as specified in the Contribution Agreement, Annex 1: Project Statement of Work.

Was your project inclusive of any of the following groups or organizations: Youth, Women, Indigenous peoples, Official Language Minority Communities, Persons with disabilities, Visible minorities, Newcomers to Canada? If yes, please explain:

Does the Recipient recommend this project for a Success Story?

Yes

No

Please provide a brief summary of your Success Story:

Project Investment

What was the total RIIEO funding received?	
What was your total cash investment for this project?	
Cash Contribution by other partners:	
Cash contribution by other Government Programs:	
Total project contributions:	

Of your total project costs, what was the value invested in:

Productivity Improvements	Research & Development	Clean Technology
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Sales

Annual sales at the beginning of the project:	Annual Sales at the end of the project: <i>(Please provide estimate if unavailable)</i>	Sales Growth:

Do you estimate future sales growth as a result of this project?

Outcomes

	Number Developed/Commercialized	Value of Sales Generated
New Products:		
New Services:		
New Processes:		

New intellectual property created or licensed (please detail):

Please list new partnerships/collaborations formed:

Jobs resulting from

Job Type	Jobs CREATED Number of full-time equivalents ¹		Jobs MAINTAINED ⁴ Number of fulltime equivalents ¹	
	Permanent ²	Temporary ³	Permanent ²	Temporary ³
# in Management occupations, business and finance occupations:				
# in Professional occupations in natural and applied sciences:				
# in Technical occupations related to natural and applied sciences:				
# in occupations in manufacturing and utilities:				
# in other occupations (includes primary industry, trades, services):				
TOTAL:				

Job Definitions

¹ Full-time equivalent (FTE) is equivalent to one employee working full time or more than one person part-time, such that the total working time is the equivalent of one person working full-time. Generally, full-time positions will involve between 35 and 40 hours in a regular workweek. An FTE calculation is the total hours worked in a week divided by the regular workweek. FTEs do not include positions created as a result of subcontracts to undertake work on the project (e.g. construction, suppliers, etc.).

² Permanent job is a position without a fixed end date.

³ Temporary job is defined as a temporary or contract position with a fixed end date.

⁴ Maintained refers to employment that existed prior to the project, but which would not have continued, or would have been unlikely to continue, if the project had not been funded. (Defined by the Federal Economic Development Agency for Southern Ontario)

Number of employees who received training as a result of this project?

Checklist

Invoices are attached and dates are within the approved Funding Period.

Claim has been made for Eligible Costs only (as listed in Annex 1 of your Contribution Agreement). Claim does not include HST.

Documentation requested in Schedule A of your Contribution Agreement is attached (if applicable).

Project deliverables are attached (i.e. reports, business plan, photos of the project, marketing flyer).

All required performance indicator fields have been filled out.

Proof of payment is attached: Bank statement, images of cleared cheques (front/back), etc.

The Government of Canada, FedDev Ontario, and Grenville CFDC have been acknowledged as funders in your publications/advertising where relevant to your project (If so, please provide us with samples for our records).

Claim has been signed by authorized personnel (below).

We require a HANDWRITTEN signature for this Final Claim Form.

You may submit an electronic version so we can begin processing your claim.

A signed copy must follow and is to be submitted via:

E-mail: info@grenvillecfdc.com

Fax: (613) 925-3758

Mail: PO Box 309
Prescott, ON K0E 1T0

Name of Authorized Official of Recipient

Title

Signature

Date

I have the legal authority to bind the Recipient.

I attest that this is the final claim for this Project.

I certify that the project is was not a "Designated Project" as defined under CEAA (2012).

I certify that the project was implemented in compliance with the terms and conditions of the Contribution Agreement.