



BUCKS COUNTY CONSERVATION DISTRICT

1456 FERRY ROAD, SUITE 704
DOYLESTOWN, PA 18901-5550

Over 60 Years In Pursuit of Environmental Excellence

Water Quality Fund Mini Grant Reimbursement Request

For **Reimbursement** items, please fill out the table below and attach copies of receipts/proof of payment.

	Date	Item	Vendor/Supplier	Cost
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10				
Total Reimbursement Request				
Total Grant Award				
Remaining Award Value				

Is this your FINAL Reimbursement Request? **YES** / **NO** (circle one)

Proof of match (50% or greater of award amount) is required before final reimbursement. Provide details of match contributions on the following page.



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Please submit a **project report** with your final reimbursement request. The 1-2 page report should include:

Title – Location – Date – Partners – Project Description – Project Impact – Photos

For **Match Documentation**, please fill out the table below and attach copies of receipts/proof of payment AND documentation of IN KIND support (sign-ins/correspondence)

	Date	Item	Vendor/Supplier	Cost
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10				
Total Match Contribution				
Total Grant Award				
% Match contribution (Match/Grant*100)				