

The information collected on this form is collected under the authority of the Freedom of Information and Protection of Privacy Act (FOIPPA) and the Child Care BC Act (SBC 2001, c. 4) and will be used for the purpose of administering the Childcare BC New Spaces Fund. Personal information is protected from unauthorized use and disclosure in accordance with the Freedom of Information and Protection of Privacy Act. Any questions or concerns about the collection of this information should be directed to the Director, Child Care Capital and Community Services, PO Box 9788 Stn Prov Govt, Victoria BC V8W 9S5, Phone: in Greater Victoria: (250) 385-6501. Elsewhere in BC, Toll Free: 1 (888) 388-6622, Fax: (250) 387-2997.

Funding Agreement Number:					
Organization:					
Child Care Centre Name:					
	Approved Expenditures as Submitted on Application		Actual Expenditures (please provide actual expenditures by category)		
Building/Renovation Costs					
Site Development Costs					
Furnishing/Equipment Costs					
Professional Fees					
Total Expenditures					
Total Project Cost					
Total Funding Awarded					
Total Actual Expenditures					
Certification:					
I, undersigned, do hereby certify that all the information provided is true and complete to the best of my knowledge and belief. I also agree to retain all original financial records related to this child care funding, and to make them available for examination upon request or in the event of an audit.					
Authorized Signatory on behalf of the Organization:		Date: YYYY	MM	DD	Telephone:
					()
Once this report has been reviewed, you will be contacted regarding any variance of funds, and/or if a reimbursement from you is required. If no reimbursement is required, your final contract disbursement will be forwarded within 30 days.					
MINISTRY USE ONLY					
Total Project Cost Approved:	\$				
Total Expenditures:	\$				
Total Advance:	\$				
Balance Owing:	\$				