

JOINT EMERGENCY PREPAREDNESS PROGRAM CLAIM

AGENCY:			
PROJECT # :		TITLE:	
APPROVED RESOURCE ALLOCATION		CLAIM	
JEPP COMMITMENT	\$	AMOUNT OF CLAIM	\$
MUNICIPAL COMMITMENT	\$	PERIOD COVERED BY THIS CLAIM:	
FIRST NATION COMMITMENT	\$		
TOTAL	\$		
		APRIL 1, 20	TO MARCH 31, 20
SUPPORTING DOCUMENTATION			
ATTACH INVOICES COVERING THE TOTAL COST OF THE PROJECT (INVOICES MUST INDICATE DATE PAID).			

I CERTIFY:		
<p>A. THAT THE EXPENDITURES CLAIMED ARE SUPPORTED IN THE ACCOUNTS OF _____ _____ AND ARE SUPPORTED BY PROPER DOCUMENTATION; AND (AGENCY)</p>		
<p>B. THAT NO PORTION OF SAID EXPENDITURES HAS BEEN INCLUDED IN ANY PREVIOUS CLAIM; AND</p>		
<p>C. THAT ALL APPLICABLE AND KNOWN CREDITS OR REFUNDS HAVE BEEN TAKEN INTO ACCOUNT AND THE DIRECTOR, YUKON EMERGENCY MEASURES BRANCH WILL BE PROMPTLY NOTIFIED OF ANY FURTHER CREDITS OR REFUNDS RECEIVED.</p>		
APPROVED AUDITOR OR DESIGNATED FINANCIAL OFFICIAL TITLE		
	SIGNATURE	DATE
Clerk/Treasurer		

FOR EMO USE ONLY		
MANAGER, EMERGENCY MEASURES	SIGNATURE	DATE

