



NAME(S) OF REPRESENTATIVE(S) ATTENDING: _____

INITIATIVE EXPENSES

Airfare (economy-rate flights)	#Flights () x Fee \$ () = _____
Per diems (max \$50 per representative per day)	#Days () x Fee \$ () x #Reps () = _____
Accommodation (max \$300 per night)	#Nights () x Fee \$ () x #Rooms () = _____
Event Registration Fees	#Reps () x Fee \$ () = _____
Ground Travel (cabs, trains, ferries, etc)	_____
Fuel	_____
Vehicle Rental	_____
Personal vehicle cost (\$0.50/km)	_____
Communication expenses (phone, mail, data charges)	_____
Insurance	_____
Marketing/collateral materials	_____
Other cost: _____	_____

TOTAL EXPENSES

75% TOTAL

AMOUNT REQUESTED

OTHER CONTRIBUTIONS

Government/FACTOR Funding _____

Sponsors _____

Other: _____

By initialling below, the applicant certifies that all information provided in this application is true and correct. The applicant also acknowledges they have thoroughly reviewed the guidelines and application in its entirety before signing, and accepts all rules and guidelines as stated in the document.

PRINT NAME: _____ **SIGNATURE:** _____

DATE: _____