

## FINANCIAL STATEMENT

Grantee:			
<b>Expenditure Report Period</b>	From: (mm/dd/yy)	<b>To:</b> (1	mm/dd/yy)
Funds received to date from Sea Turtle Grant Program \$			
Funds requested with this states% of total grant amo% of total grant amo	ount with 6-Month Rep	-	
Submitted with this report: (Check the appropriate boxes):			
6-Month Programmatic Report Final Programmat Deliverables for 6-Month report Deliverables for F Receipts for 6-Month report Receipts for Final			Final Report
I hereby certify that to the best of my knowledge and belief the above report covers the expenditures on this project, is complete and accurate, and expenditures have been made in accordance with the grant policy. Supporting documents are available for audit.			
Institutional Financial Representative (not Project Manager)			Date
Signature			Telephone
Title			Fax
Institution Email Addr		SS	
For STC use only Deliverables approved by: Report approved by: Financial report approved by:			
Check issued: Check #	Date:	Amount:	