



GEORGIA EXPORT GRANT STEP GRANT REIMBURSEMENT FORM

Company Name _____

Company Address _____

Primary Contact _____

Contact Email _____ Telephone Number _____

Activity *(choose one) _____ Date Submitted _____

Invoice# _____

Event Name _____

Event Location _____

Event Dates _____

Please follow the instructions outlined in the reimbursement guidelines. No reimbursement will be granted until this worksheet and receipts are organized and submitted in one complete packet. Website for currency converter:
<https://www1.oanda.com/currency/converter/>.

Date	Trade Activity*	Description/Notes	Amount in Foreign Currency	Exchange Rate	Amount in USD
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
				Total	

*Must match activity chosen above.

Company Representative Signature _____ Date _____

