Building Manitoba Incentive Invoice

1601 Van Horne Avenue East
Brandon Manitoba
Canada R7A 7K2
Phone: (204) 726-6855
Fax: (204) 726-6847
Toll Free: 1-888-253-1488
firecomm@gov.mb.ca
www.firemedic.ca

CALENDAR YEAR – JANUARY 1, 2016 – DECEMBER 31, 2016

Mutual Aid District Co-ordinator: _____

Mutual Aid District: _____

Complete Address: _____

*Item or Project Description**	*Total*
	TOTAL $

I _____ attest that the above information is correct and true.
(Please Print Name)

_____ _____
MAD Co-ordinator (Signature Required) Date

_____ _____
Deputy Fire Commissioner Date

***District Resolution, Receipts and PROOF OF PURCHASE to be attached to this form.**

***All Mutual Aid District Incentive Forms must be submitted by December 31st of each year.**