



Go Global Georgia STEP Grant Reimbursement Form

Company Name _____ Company Address _____
 Primary Contact _____
 Contact Email _____ Telephone Number _____
 Activity _____ Date Submitted _____
 Invoice# _____

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 Select One*	Description/Notes	Amount in Foreign Currency	Exchange Rate	Amount in USD
				Total	

*Must match activity chosen above.

Company Representative Signature _____ Date _____