GRANT USE REPORT

Reporting Date ________________

ORGANIZATION

Name

Contact Person

PROJECT

Actual Dates of Project: _____________________________________________

Approximate Number of Persons Served: ________________________________

Explain briefly how your project was or was not able to accomplish its stated goal. If this is an ongoing program, what changes will be made to keep it, or make it more, effective:

_________________________________________________________________

_________________________________________________________________

_________________________________________________________________

FUNDING

Funds received from the Watertown Area Community Foundation in previous year: ________________
Funds received from the WACF Youth Council in previous year: ________________
Funds received from the WACF Women in Giving in previous year: ________________

Please provide an itemized, detailed report on the expenditure of granted funds. Attach copies of invoices as appropriate:

_________________________________________________________________

_________________________________________________________________

_________________________________________________________________

_________________________________________________________________

List amounts and sources of other funds received for this project:

_________________________________________________________________

_________________________________________________________________

_________________________________________________________________

TOTAL PROJECT COST $ ________________

This report will be reviewed prior to the consideration of future requests by your organization.

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(605)882-3731 Fax (605) 753-5731
email: foundation@iw.net