



FINAL REPORT FORM

This form should be returned to the Foundation no later than: _____

Organization: _____

Address: _____
(Street or PO Box) (City, State) (Zip Code)

Executive Director: _____ Primary Contact: _____

Date project was completed: _____

PROJECT INFORMATION

- A. Specifically what did you ask the Foundation to fund?

- B. Please describe how you accomplished your program objectives. What was the final completion date for the project?

- C. What were the overall strengths of the project?

- D. What were the overall weaknesses of the project?

- E. Describe the audience served specifically referring to geographic location and age range and the number of people directly and indirectly served during the project.

- F. How did this project benefit the community at large?

FINANCIAL RESOURCES

- A. Did you successfully raise the necessary funds to fully implement the project? __yes __no
Please list the amounts and source:

\$ _____ Source: _____

\$ _____ Source: _____

\$ _____ Source: _____

\$ _____ Source: _____

- B. What financial resources will be available for the continuation of this program?

- C. Budget: Provide a project budget, detailing the expenditure of TGKVF grant:

INCOME:	TGKVF	\$ _____
	Other sources	\$ _____
		\$ _____
		\$ _____

EXPENSES:

Project expenses (Cash and In-Kind)

Total Expenditures	\$ _____	\$ _____
	(Cash)	(In-Kind)

Please attach copies of all invoices, receipts, etc.

Other comments: