

**Grant Expense Report**

***Please complete all information and attach requested documentation***

|  |  |  |
| --- | --- | --- |
| **Date**: Click here to enter a date. | | **Grant Amount Awarded**: $Click here to enter text. |
| **ORGANIZATION INFORMATION** | | |
| **Name of Organization**: Click here to enter text. | | |
| **Contact Name:** Click here to enter text. | | |
| **Email**: Click here to enter text. | **Phone:** Click here to enter text. | |
|  | | |
| **PROJECT INFORMATION** | | |
| **Name of Project:** Click here to enter text. | | |
| **What did the project accomplish?** Click here to enter text. | | |
| **How many people did it serve?** Click here to enter text. | | |
| **What change was completed?** Click here to enter text. | | |
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| --- | --- | --- | --- |
| **PROJECT EXPENSE LISTING** | | | |
| **Date** | **Description** | **Amount** | **Total** |
| Click here to enter a date. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter a date. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter a date. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter a date. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter a date. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **TOTAL** | | $Click here to enter text. | $Click here to enter text. |
| **Signature of Project Coordinator:** | | | |

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| **OFFICE USE ONLY** | |
| **Date Received:** |  |
| **Received by:** |  |