

NORTHLAND FOUNDATION Grant Progress Report

Due Date: _____

Project No. _____

Name of Project: _____

Organization: _____

Project Director/Contact Person: _____

Address of Contact Person: _____

Phone # of Contact Person: _____

E-Mail Address of Contact Person: _____

Date of Grant from Northland Foundation: _____

Amount of Grant from Northland Foundation: _____

Report period from _____ to _____

I. Narrative Section

Attach a narrative report, which addresses the following during this grant period:

- a. Please list your project's goals and objectives. Describe the project outcomes under each goal and the activities accomplished during this reporting period.
 1. Please share one anecdote (story) of how this project has had an impact on its target audience.
 2. Provide total unduplicated count of individuals served during this reporting period. Identify the number of children/youth and number of adults served.
- b. Describe any changes in the project (i.e. staff, work program and budget). **Any significant changes should be discussed with the Northland Foundation staff.**
- c. What unanticipated events, activities or experiences, positive or negative, happened during the course of the grant period?
- d. What specific efforts have been made for project continuation beyond this grant period?
- e. Attach copies of project publicity, newspaper articles, brochures, schedules of events, newsletters etc. Describe any indications of community interest and involvement.

II. Financial Section

Provide the necessary financial information relative to the grant. Please use the attached Grant Expenditures and Sources of Funding Report.

NORTHLAND FOUNDATION

Progress Report

II. Financial Section (page 2)

Grant Expenditures and Sources of Funding Report

Project Number _____

Project Name _____

Amount of Northland Foundation Grant _____

Report Date _____

EXPENDITURES								
Category (Itemized List of Expenses)	Budget (from Original Grant Budget)				Actual Expenditures			
	Northland	Grantee	Other	Total	Northland	Grantee	Other	Total
1.								
2.								
3.								
4.								
5.								
6.								
7.								
8.								
9.								
10.								
11.								
Totals								
Sources of Funding								
Source	Budget (from Original Grant Budget)				Actual Receipts to Date			
Northland								
Grantee								
Other (Name Sources)								
Totals								
Expenditures Over (Under) Sources								

Prepared By _____ (Name) _____ (Phone) Approved By _____ (Project Director)