



Grant Final Report

Due Date: _____

Project No. _____ Name of Project: _____

Organization: _____

Amount of Grant from Northland Foundation: _____

Project Director/Contact Person: _____

Address of Contact Person: _____ Phone #: _____

E-Mail Address of Contact Person: _____

1. Please provide the Northland Foundation with the information requested below as it relates to your total project. (Include numbers for each box.)

TOTAL NUMBER OF PARTICIPANTS SERVED		TOTAL NUMBER OF COMMUNITIES SERVED (Cities, Townships & Villages)	TOTAL NUMBER OF ORGANIZATIONS SERVED
CHILDREN & YOUTH	ADULTS		
#	#	#	#

2. Please write and attach a brief description (1–3 paragraphs) of the project activities and outcomes.

3. Please write and attach one anecdote (story) that reflects a positive impact on the project audience.

4. Have all the grant funds been expended? **YES** _____ **NO** _____

If the grant funds have not been expended, please state how the remaining dollars will be used for the project. Also, list the amount of grant dollars not spent. \$ _____