



Cascade Community Foundation

Enhancing The Greater Forest Hills Communities

CCF Grant

FINAL EVALUATION AND EXPENDITURE REPORT

Grant Recipient's name _____ Project name _____

Grant Amount _____ Total Expenses _____

PLEASE INCLUDE YOUR FINAL BUDGET FOR THE PROJECT RELECTING THE USE OF THE FUNDS RECEIVED FROM THE GRANT.

Grant fulfilled the criteria for which CCF Fund (fund descriptions are found on the website under "apply for a grant")?

Benefit Fund

Area Enhancement Fund

Activities Fund

Did the grant appear in any newsletter or articles? Please include a copy. _____

What geographical area or who was impacted by this grant? If possible give a specific example of a person. _____

Please include a representative picture of this project, preferably of a person who benefitted.

Would you be willing to do a video report on your grant? _____

Did a CCF board or staff member visit to see the grant in action? _____

Please provide any additional comments or feedback you think would be helpful to the Cascade Community Foundation. _____

Grant Recipient Signature/Printed Name

Date

Mail or E-mail completed form to: president@cascadecommunityfoundation.com or Cascade Community Foundation, Attn: Grant Committee
6757 Cascade Road SE, Suite 105, Grand Rapids, MI 49546