



Grant # _____, 20____

SCHEDULE E: COMMUNITY GRANT REPORTING

Name/Name of Organization: _____

Name of Project: _____

Amount Awarded: _____ Date Grant Awarded: _____

OFFICE USE ONLY. Resolution #: _____ Category: _____

How did this Grant positively impact your project?

Please provide a simple budget for your project and identify what the grant money was used for.

Revenue	Expense	Total

Additional Comments/Feedback: _____

Are there any supporting/additional documents with this report? Y / N. If yes, how many pages? _____

Name/Signature of Representative Date Submitted

We would love to see any pictures of your successful project, so please attach or send to office@portclements.ca!