

GRANT COMPLETION REPORT

This Agreement is between The William Stretesky Foundation, hereinafter referred to as Foundation, and _____, hereinafter referred to as Recipient, and lists the guidelines as requested by the Foundation for completion of the grant:

A. Recipient Information.

1. Name of Organization or program:

2. Mailing Address:

3. Phone:

Fax:

Email:

4. Director/Contact person:

5. Amount of Grant: \$

Grant Application No.

B. Items Required for Grant Completion Report. (Please place answers on a separate sheet.)

1. A brief summary of the project/program funded by The William Stretesky Foundation.
2. Were there any variances that occurred, such as structural, financial or otherwise? If so, please explain the type, how your organization handled it, and how it affected your project/program.
3. Were there any factors that contributed to or impeded your project's/program's success?
4. Future plans as a result of this project/program.
5. If applicable, please provide copies of any press releases, media stories or other materials that have been published regarding this particular project/program.
6. Add any comments, suggestions or criticisms that you have with working the Executive Director or the Directors of The William Stretesky Foundation, and if there are any ways that we could better have assisted you through the entire grant process.

Director/Contact Person

Dated: _____

(Return this form and any attachments to Kimberly K. Orth, Executive Director, The William Stretesky Foundation, 306 Cedar Street, Julesburg, CO 80737. Questions, call (970) 474-3466.