

## **Grant Distribution Progress Report**

Please print or type, separate sneets are acceptable:	
Today's Date:	Date Grant Awarded:
Project/Ministry Name:	
Project/Ministry Coordinator: (if changed from original grant request, please include updated contact information)	
1. Detail of the ministry/project's all-	ocation of funds. If possible, attach receipts copies.
Expense Item	<u>Cost</u>
<ol> <li>How successful has the project/m</li> </ol>	ninistry been in accomplishing the objectives stated in the
grant application?	
3. Please share a "success story" from the project/ministry.	
4. Do you have any comments or ac	dditional information relevant to your grant award that
you'd like to share?	

Progress reports must be submitted to the Catholic Community Foundation within 6-months of the grant distribution.

Please email Progress Report & any additional information to <a href="mailto:mbannwarth@ccfesd.org">mbannwarth@ccfesd.org</a> or mail to:

The Catholic Community Foundation for Eastern South Dakota
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