

 **Matching Grant Recipient Final Report**

1. Organization/Business Name:

2. Project Contact Person, phone number and email

3. Summary of Project:

4. Accounting of Expenditures: Amounts should be at least double of the awarded amount

 to show proof of the match.

1. Attach receipts for items purchased.
2. Attach receipts for professional labor required for project.
3. Attach description of “in-kind” work. In-kind work may be billed at $20 an hour or less.
4. Attach receipts for matching funds.
5. Attach Photos of Finished Project.

Signature of Head of Organization : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*For PCAC only: Date received:* *\_\_\_\_\_\_\_\_\_\_\_\_ By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*