# DISTRICT 5240 CHARITABLE FOUNDATION ROTARACT GRANT FINAL REPORT

### The Final Report is due within ninety days of project completion . Email to dcfgrants@district5240.org

| Rotaract Grant Number:    | Project Location: |  |
|---------------------------|-------------------|--|
| Sponsoring Rotaract Club: |                   |  |
| Sponsoring Rotary Club:   |                   |  |

## **PROJECT NARRATIVE**

| 1. | What were the origina | l objectives | of the project? |
|----|-----------------------|--------------|-----------------|
|----|-----------------------|--------------|-----------------|

2. What was accomplished? Photographs can help tell your story. Please submit any photos of the project especially those showing involvement of Rotaractors, Rotarians and beneficiaries?

3. When and where did the project take place?

#### 4. Who were the beneficiaries

## **ROTARIAN INVOLVEMENT AND OVERSIGHT**

- 1. How many Rotarians/Rotaractors participated in the project?
- 2. How did Rotaractors and Rotarians oversee the project?

## **FINANCIAL STATEMENT**

Itemized Expenses – Include receipts or justification for each expense claimed.

Identify changes, if any, from the approved grant application

| If the currency of the expenses is not in US Dollars, include the | exchange rate 1 USD = |             |
|-------------------------------------------------------------------|-----------------------|-------------|
| Expense                                                           | Supplier              | Cost (US\$) |
|                                                                   |                       |             |
|                                                                   |                       |             |
|                                                                   |                       |             |
|                                                                   |                       |             |
|                                                                   |                       |             |
|                                                                   |                       |             |
|                                                                   |                       |             |
|                                                                   |                       |             |
| Total Project Cost                                                |                       |             |
| Amount Requested From DCF                                         |                       |             |

#### **CERTIFYING SIGNATURE**

The current Sponsoring Rotary Club President and Rotaract Club President must certify the report. By signing this report, I confirm to the best of my knowledge that these Rotaract Grant funds were spent according to DCF-approved guidelines and that the information contained herein is true and accurate. Original receipts for all expenses incurred will be kept on file for at least five years, or longer if required by local law, in case they are needed for auditing purposes. I also understand that all photographs submitted in connection with this report will become the property of District 5240 Charitable Foundation and will not be returned. I warrant that the Sponsoring Rotary Club and/or Sponsoring Rotaract Club own the rights to the photographs, including copyright, and hereby grant District 5240 and the District 5240 Charitable Foundation a royalty free irrevocable license to use the photographs now or at any time in the future, throughout the world in any manner it so chooses and in any medium now known or later developed, including without limitation, use on or in the web sites, magazines, brochures, pamphlets, exhibitions and any other promotional materials of District 5240 and the DCF.

| Sponsoring Rotaract Club                   |       |
|--------------------------------------------|-------|
| Club President (Print)                     | Phone |
| Signature                                  | Date  |
| Sponsoring Rotary Club                     |       |
| Club President (Print)                     | Phone |
| Signature                                  | Date  |
| Make Check payable to the Rotaract Club of |       |
| Mail Check to:                             |       |

#### Approved by the District Charitable Foundation Grants Chair:

| Print Name: |  |
|-------------|--|
|             |  |
| Signature:  |  |
|             |  |
| Date:       |  |