



FINAL REPORT

Hard copy via mail is still acceptable, but **scanned/electronic copy preferred** including copies of receipts. We reserve the right to request to review original receipts.

Reply to: hancock.county.foundation@gmail.com

Garner Chiropractic Center, ATTN: Amanda Fritz, 680 US HWY 18 West,
Garner, IA 50438

Organization: _____

Mailing Address: _____

Note: Reports are due within 30-days of the end of the project.

Short Explanation of the project: _____

Date Project Completed: _____

Total Project Funds Spent on Project: _____

Total Foundation Funds Spent on Project: _____

What publicity methods did you use to inform the public of the Hancock County Foundation funds?: _____

IMPORTANT: Please send 1-2 pictures of the completed project or “action” shots from program if program based. Photos sent electronically are preferred.

Date: _____

Submitted by: _____

Phone Number: _____