

Stinson/Bolinas Community Fund Grant Report

Grantee Name:

Grant #:

Grant Period:

Grant Purpose:

Person preparing report:

Did the project funded by this grant fulfill the goals you had established? Please explain.

What goals, if any, were not achieved? Please explain.

Were there any changes in the project's purposes or goals since the grant was awarded? If so, why were those changes made and how did they affect the project?

Was the grant completed within the time schedule you supplied on the application? If not, why?

Describe specific project achievements and indicators of effectiveness of this grant.

If your application referenced additional sources of funding being sought, did that funding come through? If so, from what sources did you receive support?

Do not mail grant reports to Marin Community foundation. Please mail completed grant report forms to:
Deborah White Grants Consultant Stinson/Bolinas Community Fund PO Box 367 Stinson Beach CA 94970