



**FISCAL YEAR 2023-24
COMMUNITY ENHANCEMENT PROGRAM GRANT
Final Exit Report**

Title of Project/Program:

Applicant Organization (Project Sponsor):

Date of Project Completion:

Grant Amount:

Contact Person:

Project Report

1. Project Description: Describe the Community Enhancement project, including any challenges, accomplishments, or major changes from the original proposal. (Please attach photos and promotional information when possible. Use additional sheets as needed to provide a complete detail of the project)

2. Project Outcome: Describe how the project met goals set by the Community Enhancement Program and the objectives described in the proposal.
3. Was the project successful? What metrics are used to determine the success? (e.g. number of participants, area restored or cleaned, number/type of items provided for community use)
4. Names of other organizations that partnered or collaborated with this project:

Final Budget Report

5. Budget: Describe how grant funds were spent. Include copies of invoices, receipts and contracts. Describe any significant changes to your original budget estimates (if applicable).
6. Match funds and Project Budget: List all sources for match funds received (e.g. volunteer hours, cash, and in-kind donations). For the 2023-2024 grant cycle, please use \$29.95/hour to calculate the value of volunteer labor.

Project budget: List all project expenses and demonstrate which expenses were met with matching funds, and which expenses were met by grant funds.

Expense	Grant Funds Requested	Matching Funds (Cash)	In-Kind Matching Support	Total
Example: 50 hours of labor at \$29.95/hr setup & tear down	\$0	\$0	\$1,497.50	\$1,497.50
Example: Supplies (paint, glue & brushes)	\$200	\$0	\$0	\$200
Total				

7. What was the percent of Total Budget provided by applicant?

Per the Community Enhancement Project Agreement, excess grant funds received and not spent will be returned to the City of Sherwood within the earlier of thirty (30) days after completion of the project or July 30, 2024.

The undersigned certifies that the information in the application is true and complete to the best of their knowledge.

Signature of Party Authorized to
Represent the Organization

Printed name

Date