

Grant Final Report

| Due D | ate: | | | | | | |
|---|---|--------------|---------------|--------------|---|--|--------|
| Projec | t No | | Nam | e of Project | t: | | |
| Organ | ization: | <u> </u> | | | | | |
| Amou | nt of Gr | ant fro | om Noi | thland Fou | ndation: | | |
| Projec | t Direct | tor/Co | ntact P | erson: | | | |
| Address of Contact Person:Phone #: | | | | | | | |
| Email | Addres | s of C | ontact | Person: | | | |
| Please provide the Northland Foundation with the information requested below as it relates to your total project. (Include numbers for each box.) | | | | | | | |
| | TOTAL NUMBER OF PARTICIPANTS SERVED | | | | TOTAL NUMBER OF COMMUNITIES SERVED | TOTAL NUMBER OF ORGANIZATIONS SERVED | |
| | CHILDREN & YOUTH | | | ADULTS | (Cities, Townships & Villages) | | |
| | Ages 0-5 | Ages 6-12 | Ages 13-19 | Ages 20+ | | 1 | |
| | # | # | # | # | # | # | |
| Please write and attach a brief description (1–3 paragraphs) of the project activities and outcomes. | | | | | | | |
| | | | | | e (story) and any pictures yo t on the project audience. | u would like to share | |
| 4. Have all the grant funds been expended? YES NO | | | | | | | |
| | | | | | ded, please state how the rer | maining dollars will be use | ed for |

Email your application to grants@northlandfdn.org or mail to

Northland Foundation 202 W. Superior St., Suite 800 Duluth, Minnesota 55802