



Grant Report Cover Summary

Today's Date: _____

Date Grant Received: _____

Organization Name : _____

Address: _____

Telephone: _____ Fax: _____

Email: _____ Web Address: _____

Name of Executive Director: _____

Name of Contact Person: _____

Program/Project Name (if applicable): _____

Grant period: _____

Grant Amount: _____

Type of Grant: General Operating Support
 Project/Program support

Purpose of Grant: _____
