REPORT 2018 July Cycle

GENERAL INFORMATION									
Organization Information									
Legal Name:		Federal Tax ID#:							
khanfas471@gmail.com		22-222222							
Address:	City:	State:	Zip Code:						
test	test	test	548711						
Website:		Fax:							
najimfoundation.org		(123) 456-7890							
Head Of Organization									
Name:		Title:							
test		test							
E-Mail Address:		Phone:							
khanfas471@gmail.com		(123) 456-7890							
Application Contact									
Name:	Title:	E-Mail Address:	Phone:						
fas khan	test	khanfas471@gmail.com	(123) 456-7890						
REPORT INFORMA	TION								
Report Funding Cycle:		Report Date:							
2018 July Cycle		08/05/2019 12:00 am							
1: Please include in your report the dollar amount of the funds that were awarded, the date they were									
funded and what the funds supported.									
Awarded Amount: 20,000		Date:							
2: Were the objectives cited in your original proposal met? Please address each started objective and how it was met.									
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modification of the objective.									

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4: What needs were addressed?

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5: What method of evaluation did you use to monitor and measure the project's outcome and what are the result?

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6: Do you plan to continue this project, and if so, how do you plan to sustain it?

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7: Please provide any other comments of information relevant to this grant.

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8: Please provide an updated detailed projected budget with expenses for the received grant. Also include the totals for the budgeted and actual amount. Explain any discrepancies between the budgeted and the actual expenses for the project.

Line Item	Total Project	Najim Requested	· ·	Najim Funds
Description	Funds Allocation	Funds		Allocation
Parenting Specialist Salary (FT)	\$34,320	\$20,000	\$5,500	\$0

TOTAL:	\$34,320	\$20,000	\$5,500	\$0
Signature				
test123				