



# Community Cares Program

Report for Quarter Ending September 30, 2017

*Funding must be used for Laclede County residents only*

## **\*\*Report Due by October 10, 2017\*\***

*Please Note: This report is required to be filed on a timely basis by the by-laws of the governing board. Failure to meet this requirement may jeopardize your funds disbursement. Unused 2017 Community Cares Grant funding must be returned to Lebanon Area Foundation by January 15, 2018.*

**\*\*Please note you must account for the entire amount received, and show the funding was used for the purposes stated in your grant award letter. If you are holding funds in reserve for future use, please indicate as such.**

Return to: Lebanon Area Foundation, P.O. Box 1042, Lebanon, MO 65536 or fax to (417)588-3251

Organization: \_\_\_\_\_

Name of person completing the form: \_\_\_\_\_

Contact phone number: \_\_\_\_\_

Address to send the check: \_\_\_\_\_

\_\_\_\_\_

Community Cares Funds used in this quarter: \$ \_\_\_\_\_ Distributed Funds Unused: \$ \_\_\_\_\_

Number of clients (Laclede County only) served by these funds: \_\_\_\_\_

Does this complete your project for the year? circle one Yes / No

If yes, what date did your project end? \_\_\_\_\_

(if project is complete, additional reporting forms will not need to be filed this year.)

Please give specific comments on how Community Cares funding was used this quarter.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**\*Please attach financial documentation of funds utilized during this quarter to the report (i.e. receipts and/or invoices for items/services specified in your 2017 Community Cares grant application).**

*If you currently are not, but would like to receive future report forms and/or deadline reminders by email, please provide your email address:* \_\_\_\_\_

If you have any questions regarding this form, please contact the Lebanon Area Foundation Administrator, Melinda Fries at (417) 532-8868, FAX (417) 588-3251, or email mfries@lafcares.org