Diocese of Allentown Local Poverty Relief Fund Grant Report

Check One: Interim Report (please check Final Report if all funds are expended.)
Final Report
Name and Address of Organization:
Name of Person Completing Report and Telephone Number:
Phone:
Date of Report:
Amount of grant received: Expenses paid from grant (attach separate list if necessary) 1) 2) 3) 4) 5) 6) Total expenses to date: Please do not include recipient names or other confidential information Remaining grant funds: Please describe your plan to spend the remaining grant funds:

Please provide a summary of the activities provided with Poverty Relief Funds to date.			
Please describe how the prodescribed in your original gr	ect is working in relationship to rant proposal.	the goals and outcomes	
Is there any additional information you would like to provide?			
Person Completing Form			
Signature:		-	
Timica Ivanic.		=	
Organization Leader			
Signature:		_	
Printed Name:		_	
Title:		-	
Pastor (if applicable)			
Signature:		-	
Printed Name:		-	

Please email to stewardship@allentowndiocese.org or mail to:

Office of Stewardship & Development Attention: Poverty Relief Allocations Committee Diocese of Allentown P.O. Box F Allentown, PA 18105