



**WINKLER
COMMUNITY
FOUNDATION**

Winkler Community Foundation
2-880L 15th Street Winkler, MB, R6W 0H5
Grants phone line: 431-775-8923

FINAL GRANT REPORT

The Winkler Community Foundation (WCF) looks forward to receiving information on the grant awarded to your organization. Please submit FINAL REPORT once your project/program is complete. Final reports should be emailed to grants@winklercommunityfoundation.com. Funding should be used within 1 year of grant awarded. If an extension is needed, a written request is required for Board approval.

The report helps us learn about how the grant helped your organization succeed and how we can both meet our common goal of service to the community. We share the project information with our donor(s) & the community at large.

Reminders:

- Receipts for capital expenses must also be submitted with the FINAL GRANT Report.
- Please include digital photos illustrating the project funded by the grant.

Failure to submit Final report to the Winkler Community Foundation may result in the grant dollars having to be paid back to the WCF and may impact your organization's eligibility to receive future grants from the WCF.

Name of Organization: _____	
Project Name/Purpose: _____	
Address: _____	
City: _____	Postal Code: _____
Contact Name: _____	Contact Phone: _____
Email: _____	
Total Project Cost: _____	Grant Amount Received: _____
Year Grant Received: _____	

PROJECT INCOME AND EXPENSES

It is necessary to include receipts, invoices or cleared cheques.

Project Income		Project Expenditures	
Description	Funds	Items	Cost
WCF Grant			
Other			
Your Contribution			
Donations in Kind			
Total project Income		Total Expenditures	

GRANT EVALUATION

1. **How has the grant impacted your organization? What specific results or outcomes were achieved with your grant from WCF? Were there any results you did not expect?**
2. **Share a quote from staff, participants, and/or user about program/project.**
3. **Share any other comments you feel would be helpful for the Winkler Community Foundation to hear.**

SIGNATURES

By signing below, you are validating the accuracy of the information in this report and giving permission to WCF to share the information and pictures publicly.

Signature

Position/Title

Name (please print)

Date