



Flagstaff County Recreation Grant Grant Recipient Reporting Form

Grant Year: _____

Agricultural Society: _____

Grant Recipient Information

Name of Organization: _____

Organization Type (i.e., municipality, school, non-profit, etc.): _____

Non-Profit or Society Number: _____

Mailing Address: _____

Town/Village: _____ Postal Code: _____

Primary Contact: _____ Position: _____

Phone: _____ Email: _____

Project/Program Information

Briefly describe the project/program for which you received recreation grant funding:

Describe how the project/program supported Flagstaff County's goal with recreation grant funding:

Describe how this grant has helped to enhance recreation opportunities and individual well-being in the community:

Financial Information

Revenue	Amount Received (\$)
Recreation Grant	\$

Expenses	Amount Expended (\$)	Capital or Operating
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
Total Expenses	\$	

Signature

By signing below the representatives of the organization thereby certify that the above information provided in this report is accurate and the granted funds were utilized as reported to the best of their knowledge.

Recipient Signature Date

Please return the completed form to each Agricultural Society that you have received funding from.