



Friends of Gwinnett Seniors Grantee Report

To ensure compliance with the Grant Agreement, this Report must be completed 13 months after receipt of funds. Attach additional page(s) if more space is needed.

Organization Name:	
Contact Name/Title:	
Email Address:	
Program Name:	
Grant Amount Awarded:	Date Funds Released:
How were grant funds used? Were there any deviations in expenses projected in the budget? If so, please give details.	
Describe the results you achieved because of this grant. Refer to the measures of effectiveness.	
Describe the successes and challenges you encountered in the implementation of the program and indicate whether they required changes to the planned execution.	
Has the program achieved the proposed objectives?	
Submitted by:	Date submitted: