



## District Grant Report 2016-2017

This report must be completed and uploaded on [matchinggrants.org](http://matchinggrants.org) by June 1, 2017. If it is a progress report, a final report must be submitted no later than June 1, 2018 or 30 days after project completion, whichever comes first.

District Grant #  P-1181   Progress Report  Final Report

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Rotary Club:  Rock Springs Rotary Club

Project Title:  Literacy Project

### Project Description:

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1. Briefly describe the project. What was or will be done and where did or will the project activities take place? Explain how the beneficiaries and other community members were or will be involved?

**This project was a Literacy Project to inform parents how to read, sing and interact with their new baby. The packets prepared by Rotary were given to the local hospital obstetrics department staff for their distribution to the parents**

2. How many Rotarians participated in this project? (estimate if progress report)  12+

3. What did or will they do? Please give at least two examples.

**The Rock Springs Rotary Club assembled individual packets containing the baby T shirts with "Read to Me" printed on them and a booklet entitled "Every Child Ready to Read" also a cover letter to the parents and some information where to get additional reading booklets.**

4. How many non-Rotarians benefited from this project? (estimate if progress report) \_\_\_\_\_

**There were 440 packets given to the local hospital, Memorial Hospital of Sweetwater County. A minimum of 440 sets of parents ( non-rotarians) were benefitted.**

5. Who are the beneficiaries and what is or will be the expected long-term community impact of this project?

**The main beneficiaries of this Literacy Project will be the babies as they grow up. Hopefully, the parents benefitted too.**

6. If a cooperating organization was involved, what was their role?

**The local hospital was greatly involved as they were the ones who actually gave the Rotary Literacy Packets to the parents.**

7. Income:

Income Source	Amount
<b>NO INCOME GENERATED FROM THIS PROJECT</b>	
<b>Total Project Income</b>	

8. Expenditures: (number receipts starting with 1 and indicate a receipt # (s) for each expenditure) (Do not include travel expenses)

If international project convert amounts to US dollars	Receipt # (s)	Amount
400 booklets with shipping		<b>\$3230.70</b>
Cover letter copying (Staples)		<b>\$ 42.40</b>
<b>Total project expenditures</b>		<b>\$3273.10</b>

**Copies of receipts are attached!**

9. Project score (5=strongly, 4=agree, 3= neutral, 2=disagree, 1=strongly disagree)

	Project Score	Comments
The overall project was successful	<b>5</b>	
The grant process worked well	<b>5</b>	
My interaction with partner clubs was good	<b>-</b>	<b>No Partnering Club</b>
We achieved the results we expected	<b>5</b>	

10. What worked well on this project and why?

**Rotary members were enthusiastic about this project and worked to get the packets assembled.**

**Hospital personnel gave out the packets to the parents.**

**Local newspaper & Sweetwater NOW covered the packet presentation at the hospital.**

11. What did not work well and how would you suggest improving it?

**The HIPPA regulations at the hospital prevented our Rotary Club from getting any feedback from the parents.**

**Inclusion of a questionnaire with a stamped self addressed envelope may provided us with some feedback in the future.**

12. How was this project publicized? **In the local newspaper – Rocket-Miner and SweetwaterNOW**

13. (Progress report only) What still remains to be completed on this project?

**This Literacy Project is now complete with a total 990 packets delivered to the hospital.**

Project Inventory

Please list all items provided in this grant that are over \$75 in value and are not expendable.

<b>Item Purchased</b>	<b>Date of Purchase</b>	<b>Cost</b>	<b>Destination/ Location</b>	<b>Comments</b>

By signing this report, I confirm that to the best of my knowledge these District Grant funds were spent only for eligible items in accordance with Trustee-approved guidelines, and that all the information contained herein is true and accurate. Receipts for all grant-funded expenditures are attached. I also understand that all photographs submitted in connection with this report will become the property of RI and will not be returned. I warrant that I own all rights to the photographs, including copyright, and hereby grant the District, RI and TRF a royalty free irrevocable license to use the photographs now or in the future, through the District and the world in any manner it so chooses and in any medium now known or developed. This includes the right to modify the photographs as necessary in the District's and RI's sole discretion. This also includes, without limitation, use on or in the web sites, magazines, brochures, pamphlets, exhibitions and any other promotional materials of the District, RI, and TRF.

**Please attach all receipts or an invoice and a copy of the check used to pay the invoice. Funds over \$100 not used must be returned to the district grants treasurer.**

Certifying signature of primary contact  Date: 6-14-17

Print name and Club name Kenneth L. Oldenburg Rock Springs Rotary Club  
President

**Upload this report on matchinggrants.org in .pdf format only**



STAPLES

copy&print

Nelson, John

Order Due: Monday, 02/08/16, 3:30 PM

Order Number



2078894815

Order Received:

Monday, 02/08/16, 2:30 PM

Contact Phone:

(307) 362-6893

Call When Ready for Pickup:

Y

Job 1 of 1

Job Type: Custom Copy & Print

SKU	Description	Qty	Subtotal
736087	251-500 BW LTR PREM	400	40.00

Order Summary:

Sub-Total:	\$40.00
Estimated Total:	\$40.00

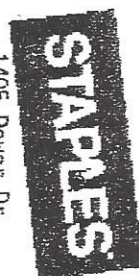
Back-up Procedures for Order :2078894815

Use these instructions ONLY If the F10 Register key or 'Retrieve Customer Order' button failed to retrieve order details

- For each item in the order:  
Press the 'Quantity' button. Type the listed quantity and press enter. Type the listed SKU number and press enter.
- Verify the order details for accuracy(ensuring no SKUs were missed)
- Complete transaction.

CUSTOMER CONTACT LOG

Contact Phone: (307) 362-6893



1405 Dewar Dr.  
ROCK SPRINGS, WY 82901  
(307) 362-5159

SALE	QTY	SKU	PRICE
1785176	4	005	04759
1408	02/08/16	02:31	

\*\*\*\*\* Customer Order 2078894815 \*\*\*\*\*  
 400 251-500 BW LTR PREM 40.00  
 736087 0.100ea  
 Questions on Customer Order 2078894815  
 Call Customer Service at 1-800-3STAPLES  
 \*\*\*\*\*

Cash Change TOTAL ITEMS 400 7.60

Staples brand products,  
 Below Budget. Above Expectations.  
 THANK YOU FOR SHOPPING AT STAPLES!  
 Shop online at www.staples.com

Get with the program.  
 Staples Rewards members get up to 5%  
 back in rewards and free shipping every  
 day. Exclusions apply. See an associate  
 for full program details or to enroll.



# Payment Receipt

DATE 1/26/2016



**Lee Pesky**  
LEARNING CENTER

3324 Elder Street, Boise, ID 83705

Payment Received From:
John Nelson 1229 Lowell Ave Rock Springs, ID 82901

DESCRIPTION	QTY	PAYMENT METH...	CHECK NO.
		Master Card	
		RATE	AMOUNT
Every Child Ready to Learn Book	400	7.50	3,000.00
<p>LEE PESKY LEARNING CENTER 3324 ELDER ST. BOISE ID 83705 208-333-0008</p> <p>Merchant ID: 172800302 Term ID: 5263</p> <p><b>Phone Order</b></p> <p>MASTERCARD XXXXXXXXXXXX1147 Entry Method: Manual Apprvd: OnLine      Batch#: 000003 01/26/16                      19:17:54 AVS Code: Y CVV2 Code: H</p> <p>Inv#: 00000003      Appr Code: 026008</p> <p><b>Total: \$ 3,000.00</b></p>			
		<b>Total</b>	<b>\$3,000.00</b>

If you have any questions about this receipt at (208) 577-1110. She is in the office Tuesday at that time.

Customer Copy

THANK YOU

keeper our call

For immediate assistance, please call the

# Payment Receipt

DATE 2/11/2016



## Lee Pesky

LEARNING CENTER

3324 Elder Street, Boise, ID 83705

Payment Received From:
John Nelson 1229 Lowell Ave Rock Springs ID 82901

DESCRIPTION	QTY	PAYMENT METH...	CHECK NO.
		Master Card	
		RATE	AMOUNT
Shipping ECRL books	1	230.70	230.70
<p>LEE PESKY LEARNING CENTER 3324 ELDER ST. BOISE ID 83705 208-333-0008</p> <p>Merchant ID: 172600302 Term ID: 5263</p> <p><b>Phone Order</b></p> <p>MASTERCARD XXXXXXXXXXXX1147 Entry Method: Manual Apprvd: OnLine      Batch#: 000000 02/11/16                      10:46:39 AVS Code: Y CVV2 Code: H</p> <p>Inv#: 00000001      Appr Code: 01194B</p>			
<b>Total: \$</b>		<b>230.70</b>	<b>\$230.70</b>

If you have any questions about this receipt at (208) 577-1110. She is in the office Tues at that time.

For immediate assistance, please call the F

Customer Copy

THANK YOU