



District Grant Final Report 2018-2019

This report must be completed and uploaded on matchinggrants.org within 30 days after completion of the project but no later than 2 years after the date of approval of the project.

District Grant # 2783 _____

Rotary Club: Gillette Energy Rotary Club _____

Project Title: VIP Project Vaccines for Influenza Prevention

Project Description:

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

From October 26, 2019 through November of 2019, 2761 school students from Campbell County signed up for vaccinations. There was a 5% increase from (125 more) 2018. The project funding changed slightly, with the following; District Grant: \$3500.00 and Gillette Energy Rotary actually contributed \$5,500.00 for a total of \$9,000.00 that was given to the entire project.

Other contributors included the City of Gillette (\$5,000)
Campbell County Health (\$10,000)
Campbell County Government (\$5,000 plus \$7,500 in-kind)
Campbell County School District (In-kind only)

Total expenditure for the vaccine was \$32,000.00

2. How many Rotarians participated in this project? Approximately 45. _____
3. What did they do? Please give at least two examples.

The Rotary Board and the total club voted to assist with the project by contributing funds. Individual members signed up to go to the schools to assist with the vaccinations, but the decision was made by Campbell County Health that we were not to have a presence at the schools.

4. How many non-Rotarians benefited from this project? 2761 students were vaccinated.
5. Who are the beneficiaries and what is the expected long-term community impact of this project?
Prevention of influenza within the schools and the community has a positive impact on the health and well being of all it's members. Unfortunately, this is an on-going concern and must be replicated every year.
6. If a cooperating organization was involved, what was their role? Funding.
7. Income:

Income Source	Amount
District Grant	\$3,500.00
Gillette Energy Rotary	\$5,500.00
Total Project Income	\$9,000.00

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)	Budgeted Amount	Actual Amount
Copy of the check for \$9,000.00			
Total project expenditures			\$9,000.00

9. Please explain any variance of more than 5% between the budgeted amount and the actual amount including the reason for the variance and why the alternative was chosen.

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

	Project Score	Comments
The overall project was successful	2	Rotary members were not allowed to help at the schools.
The grant process worked well	5	
My interaction with partner clubs was good	NA	
We achieved the results we expected	5	2761 students vaccinated

11. Did you upload photos in your project on matchinggrants.org under the Photos tab? (If not, please do so) No

12. What worked well on this project and why?

The over-all projects accomplished the goal that was set forth by Campbell County Health.

13. What did not work well and how would you suggest improving it? If we were ever to do this project again, we would insist on taking an active part, instead of just providing funding.

14. How was this project publicized? Only through Campbell County Health.

Project Inventory

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

Item Purchased	Date of Purchase	Cost	Destination/ Location	Comments

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:
__2/20/2020__

Print name __Dr. Verlyn Velle_____

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