

District Grant Final Report D5495 v.10.27.19

for District Grants completed in Rotary year 2019-20

Due April 30, 2020.

1.) Please type all answers. 2.) Sign, scan and upload this completed document to the project website: www.matchinggrants.org 3.) Scan and upload a separate pdf file of **receipts** that are marked "**PAID.**"

Do NOT upload 'bills due' or invoices. Do NOT upload check copies or bank statements.

Project Number: P-2928

Rotary Club: Rotary Club of Tempe Downtown

Project title: Educational Life Skill Development

Project Description. What was done in 110 words or less?

Music therapy scholarships for teens and adults with developmental disabilities learning life skills and eventually contribute to their community in Tempe. Performance for their peers in October 2019.

When (dates) and where (city and state) did the project take place?

Scholarships ongoing in 2019-2020; October 2019 Tempe Center for the Arts performance

Who were the beneficiaries?

25 Tempe Residents with developmental disabilities

How many Rotarians participated in this project?

15

What did the Rotarians do? Give at least two examples.

Several Rotarians attended the October 2019 event. Rotarians volunteered to help with gathering resources and supplies for the event; The entire Rotary Club supported the event.

How many non-Rotarians benefited from this project?

25

If a cooperating organization was used, what was it's role?

Higher Octave Healing provided the services for the persons with developmental disabilities; Music as Therapy provided some of the funding and support for the event and ongoing services; the Tempe Diablos also supported with additional scholarship funding and sponsoring the event.

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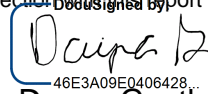
Financial Report: *(Use second page, if needed. District must receive receipts of **all** expenditures.)*

1. Income	Amount
1. District Grant funds received from the District	1000
2. Club funds	1000
3. Other funding (specify)	
4. Other funding (specify)	
Total Project Income	2000

2. Expenditures (please be specific and add lines as needed)	
1. Scholarships for music therapy services	2000
2.	
3.	
4.	
5.	
6.	
Total Project Expenditures	2000

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 of the information contained herein is true and accurate. **Paid receipts for all grant-funded expenditures have been uploaded to the project website.** I also understand that all photographs submitted in connection with this report will become the property of RI and will not be returned.

Club President Signature:



Date: 5/27/2020

Club President printed name: Dayna Gustke

For questions or assistance, contact Jim Bissonett: jim@jbsolutions.com. or 480-299-4441