

Rotary Opens Opportunities

District/Governor's/Rotaract Grant Final Report 2020-2021

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. For scholarships, the report is due 30 days after payment of funds.

District Grant # (from matchinggrants.org) P3668

Rotary Club: Jackson Hole Breakfast Rotary Club

Project Title: Public Health Flu Vaccine

Project Description:

1. Is this a scholarship governor's grant report? Yes No (If yes, go directly to line 16)
2. 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? Working with Teton County Public Health our club assisted with the administration of a public flu vaccine clinic serving un-insured and under-insured residents of Teton County. This clinic was held on Saturday 24 Oct 2020 at the Teton County Fairgrounds. Both individuals and families, including children, received the flu vaccine. Teton county has a population of uninsured families that work in the service industry that pose a potential for reinfecting others in the workplace. Funds were used to purchase 150 flu vaccine and did not cover any administrative cost
3. How many Rotarians participated in this project? 8
4. What did they do? Please give at least two examples. Members directed parking, directed individuals to the registration table and sanitized clip boards after registration. Due to HIPA regulations we were not allowed access to personal information or to administer the vaccines.
5. How many non-Rotarians benefited from this project? 150 individuals
6. Who are the beneficiaries and what is the expected long-term community impact of this project? Uninsured and underinsured families and individuals. Prevent the spread of the flu virus among low income population and minimize impact to their income.

7. If a cooperating organization was involved, what was their role? Teton County Public Health Department. They registered and administered the flu vaccine.
8. Income:

Income Source	Amount
District Grant P3668	\$1000.00
Breakfast Rotary Club	\$2000.00
Total Project Income	\$3000.00

9. 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
Teton County Public Health Dept.		\$3000.00	\$3000.00
Total project expenditures			

10. 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.

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

	Project Score	Comments
The overall project was successful		
The grant process worked well		
My interaction with partner clubs was good		
We achieved the results we expected		

12. Did you upload photos in your project on matchinggrants.org under the Photos tab? (If not, please do so) Yes three

13. What worked well on this project and why? We have previously funded flu vaccines in the past years. This year we had a walk-in clinic on one day.

14. What did not work well and how would you suggest improving it? Worked as planned and all vaccines were administered.

15. How was this project publicized? Local newspaper add

16. Scholarship Governor's grant only

- a. Name of scholarship awardee _____
- b. Current school _____
- c. University of college they will be attending _____
- d. Course of study _____
- e. Starting date _____

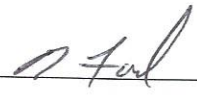
Project Inventory

Please list all items provided in this grant that are over \$500 in value and are not expendable.

Item Purchased	Date of Purchase	Cost	Initial Destination/ Location	Comments
150 vaccines	various	\$3000.00	Public Health	

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: 3-3-2021
 Print name Neil Ford

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