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

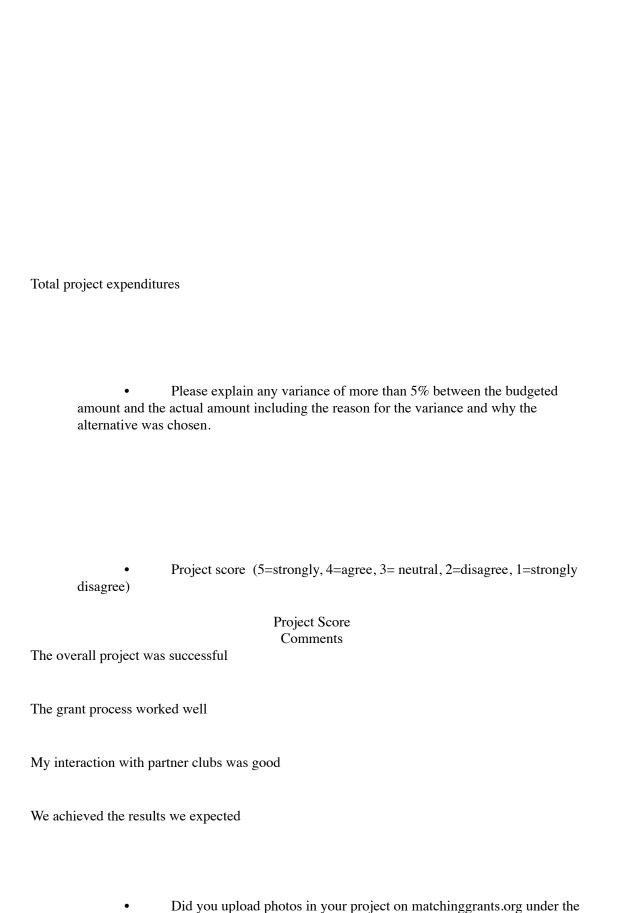
This report must be completed and uploaded on matchinggrants.org within 30 days after completion of the project but no later than 2 years after the date of approval of the project. For scholarships, the report is due 30 days after payment of funds.

District Grant # (from matchinggrants.org) P-3677____

| Rotary Club:Sterling, CO |
|---|
| Project Title:Scholarship |
| Project Description: |
| • Is this a scholarship governor's grant report? Yes _X_ No (If yes, go directly to line 16) |
| 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? |
| How many Rotarians participated in this project? What did they do? Please give at least two examples. |
| |

How many non-Rotarians benefited from this project? _____

| impact of this p | Who are the beneficiaries and what is the expected long-term community roject? | | | |
|----------------------|---|--|--|--|
| • | If a cooperating organization was involved, what was their role? | | | |
| • | Income: | | | |
| Income Source Amount | | | | |
| | Total Project Income | | | |
| | Expenditures: (number receipts starting with 1 and indicate a receipt # enditure) (Do not include travel expenses) ect convert amounts to US dollars Receipt # (s) Budgeted Amount Actual Amount | | | |



Photos tab? (If not, please do so)

| • | What worked well on this project and why? |
|--------|---|
| • | What did not work well and how would you suggest improving it |
| • | How was this project publicized? |
| • | Scholarship Governor's grant only |
| Schum | Name of scholarship awardee _Alisha Saylor & Allie acher |
| School | Current school _Sterlong High |
| NJ0 | • University of college they will be attending |
| Gene | Course of study eral |
| 2021 | Starting dateFall |
| | |

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

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: |
|---|-----------|
| | |
| Print name | |

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