

DO NOT INCLUDE A LETTER OF REQUEST FOR A NEW APPLICATION WITH THIS FORM!

TYPE OR PRINT FULL NAME OF PREPARER (IF DIFFERENT FROM ABOVE)

CITY, STATE/PROVINCE

TYPE OR PRINT FULL NAME OF GRANT ADMINISTRATOR

Please complete the following pages, answering all questions, and return the report to our office. Limit your answers to the spaces provided. Make sure the grant application number is included on any additional attachments.

To the best of my knowledge, I hereby certify that the information provided in this report is accurate.

FINAL EVALUATION PROGRESS REPORT

The Koch Foundation requires an evaluation of all funded programs within one year of receiving a grant. If funds are not spent within one year, then regular progress reports must be provided until such time as

funds are expended (Copy evaluation form, if needed).

GRANT APPLICATION NUMBER

LEGAL NAME OF GRANTEE ORGANIZATION

POSTAL MAILING ADDRESS / STREET ADDRESS

COUNTRY, ZIP/POSTAL CODE

Date

T foundation inc. 4421 NW 39th Avenue, Building 1, Suite 1

Gainesville, Florida 32606 USA

Select an option below

Date

A. <u>Results of Grantee's Program</u>:

1. How many people were served?

2. What was the time and place of principal activities?

3. Describe how the evangelization objectives were met.

4. How will the program continue after Koch Foundation funding?

B. Grant Expenditure Report:

1. Provide an account of how Koch Foundation Grant funds were spent.

2. In the table below enter the total amount received from the Koch Foundation Grant, the amount spent on each project expense category, and the total amount spent. If Koch Foundation Grant funds remain, an explanation will be required. Fields not relevant to your project may be left blank. All figures must be in US Dollars.