**Please submit this completed form with your application and again when the project is complete**. All final grant reports must include financial statements showing grant distribution. Expand and contract the numbers as appropriate. This may require two pages. For any questions please contact our Grant Coordinator, Mayra Caswell mayra@communityhealthfoundation.org

**Grantees’ Planned Outputs:**

1.

2.

3.

**Expected Outcomes, which we will measure during grant period:**

1.

2.

3.

**Expected Outcomes which we expect to measure during and following grant period:**

1.

2.

3.

**Valuable Outcomes which may not be measurable during or after the grant period:**

1.

2.

3.

**Other factors which influence outcomes over which we have no control:**

1.

2.

3.