



ACBL EDUCATIONAL FOUNDATION

Grant Recipient's Interim Progress Report

Organization: _____

Program/Project name: _____

Program/Grant manager: _____

Address: _____

Phone: _____

Amount of grant: _____ Funding date: _____

Grant amount used to date: _____

Please answer the following questions:

What is the purpose of the grant?

Who are the beneficiaries of this project (*please include the number of clients served*)?

What is the outcome/impact of the grant dollars?

If applicable, were other sources of funds successfully identified for future funding of the program?
If so, please list:

Briefly describe how the grant was spent.

If appropriate, please submit two pictures in high-resolution jpeg formatting, if possible, (either on disc or by e-mail), highlighting how the grant funds were utilized.

These photos should demonstrate the people, products or services which benefited from the project funded.

Photos may be used in future publications or on the website and need to include the names of those who are pictured along with a signed photo release. All photos will become the property of the ACBL Educational Foundation.

Please email this report: Kristen@ACBLEducationalfoundation.org

**or mail to: ACBL Educational Foundation
P.O. Box 154
Glenmont, NY 12077
Attn: Kristen Frederick**