

Grant Follow-Up Form

CENTRE COUNTY COMMUNITY FOUNDATION, INC.

Organization Name: _____

Contact Person: _____

Address: _____

City, State, Zip: _____

Phone Number: _____ Fax Number: _____

Email Address: _____

Amount of Grant: _____ Date(s) of Project/Program: _____

Date of Grant: _____

Purpose of Grant:

How the Foundation's Funds Were Used:

Certified by:

Name and Title

Date

Please attach any relevant brochures, publicity, photos and/or audited financial statements.

Please return to

Centre County Community Foundation, Inc.,
P.O. Box 648, State College, PA 16804-0648.

If you have questions, please contact Molly Kunkel, Program Director
(814) 237-6229 or mkunkel@centrecountycf.org