 **(Form: 6)**

Report – District Grant Project

|  |  |
| --- | --- |
| Summary - Project of the ClubDistrict Grant No. #  |       |

Please completely fill in the form and submit to District Rotary Foundation Chair

|  |  |  |  |
| --- | --- | --- | --- |
| 1. Project Name: |       | 2. Rotary Club: |       |

|  |  |  |
| --- | --- | --- |
| 3. Report Type: |  | Progress report |

Please provide details of the project on the spending progress as of the reported date.

|  |  |  |
| --- | --- | --- |
|  |  | Project performance report |

Please provide details of the project on the fund spending as of the date of completion

Impact to Community

4. Please provide details of the project: what is the project scope? and who is the beneficiary?

|  |  |  |
| --- | --- | --- |
| 5. How many does non-rotarian get the benefit from this project? |       | How have they been helped? |
|       |

6. How does the project provide knowledge and specific skills to community members for the capacity to help themselves?

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|       |

7. What are the roles of cooperating organization for its involvement, if any?

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|       |

Rotarians Participation

|  |  |  |
| --- | --- | --- |
| 8. How many does Rotarian engage in the project? |       | 9. What are their roles? |
|       |



10. Please provide details of project expenditures (District will keep the receipts of all expenditures):

Financial Report

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Currency       |  | Exchange Rate       |  | = 1 USD |

11. Revenues (Please add items as required)

|  |  |  |
| --- | --- | --- |
| **Source of Revenues:** | **Currency** | **Amount** |
| Support from District Grant |       |       |
| Other Revenues (Please specify): |       |       |
| Other Revenues (Please specify): |       |       |
| Interest Income (if any): |       |       |
|  | Total revenues |       |

12. Expenditures (Please add items as required)

|  |  |  |  |
| --- | --- | --- | --- |
| **Expenditure Description** | **Supplier Name** | **Currency** | **Amount** |
| 1      |       |       |       |
| 2      |       |       |       |
| 3      |       |       |       |
| 4      |       |       |       |
| 5      |       |       |       |
|  | Total Project Expenditures: |  |       |

13. **Bank Statement/Book Bank** – Please attach bank statement/book bank showing all receipt and payment transactions of the project as specified above.

14. By signing to certify this report, I confirmed that the above district Grant had been spent according to the recommendation of Rotary Foundation Committee and all details in this report are true and correct and all expenditures’ receipts shall be kept at least 3 years for auditing if any.

|  |  |  |  |
| --- | --- | --- | --- |
| 15. Certified Signature |       | Date: |       |

|  |  |
| --- | --- |
| 16. Name, Rotary Title and Club Name (in printed letters) |       |

Please attach receipts copy, book bank copy and photo(s) accompanied with this report.