**LOGAN**

**COUNTY**

**EDUCATION**

**FOUNDATION**

**DEDICATED AND BUILDING WIDE FINAL REPORT CHECKLIST**

The Logan County Education Foundation congratulates you on receiving a grant to enhance your students’ classroom experience.

**READ THE FINAL REPORT INSTRUCTIONS DOCUMENT BEFORE COMPLETING.**

Below is a check off list we hope that will be helpful in making sure you provide the Foundation with the needed information. **Items with an \* are required to be filed with your Final Report**

\_\_\_\_\_ \*Dedicated Grant or Building Wide Grant final report form filled out and signed

\_\_\_\_\_ \*Purchase Order Invoice Report from your district treasurer attached to form

\_\_\_\_\_ \*Email pictures (we use these in PowerPoint presentations)

\_\_\_\_\_ \*Copy of Thank You note to the donor

\_\_\_\_\_ Copy of the news release - if you submitted one (see attached Guidelines for News Release)

\_\_\_\_\_ Evidence of reporting to your school board

\_\_\_\_\_ Copy of Letters from student(s) to donor

All the above items are to be scanned and sent to: lcedfd@gmail.com

**DUE NO LATER THAN MAY 23, 2020**

**LOGAN**

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**FOUNDATION**

**FINAL REPORT*:***

**DUE NO LATER THAN MAY 23, 2020**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Building: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Project Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If Dedicated Grant which one? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

WHAT DID YOU DO? *Briefly* explain your project to use for publication

WHY DID YOU DO IT? Meet a need, enhance a concept, etc.

HOW COULD YOU HAVE IMPROVED IT?

HOW DID THE STUDENTS BENEFIT?

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**ATTACH PO INVOICE REPORT OR OTHER DOCUMENTATION *FROM YOUR TREASURER***

Applicant’s Name:

Project title:

**TOTAL EXPENSE $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ GRANT AWARD**: $\_\_\_\_\_\_\_\_\_\_\_\_

**DIFFERENCE**: $\_\_\_\_\_\_\_\_\_\_ *you must refund the LCEF if you have a difference of more than $10.00. If you have less than $10.00, please supplement into your own curriculum*)

**DEDICATED GRANT THANK YOU ADDRESSES**

**AAUW**

Kristen Braig

9055 O’Connors Point

Belle Center, OH 43310

**DODGE FAMILY GRANT**

Lisa A. Dodge

226 North Oak Park Avenue Apt. 1-O

Oak Park, IL 60302-2174

**PHIL & JEAN FORSYTHE GRANT**

Phil Forsythe

620 Dushane Dr.

Bellefontaine, OH 43311

**WALTER & MARIE LAMB GRANT**

Mr. & Mrs. Doug Lamb

3690 Co Rd 10

Bellefontaine, OH 43311

**LCSWMD GRANT**

Angel Payne

1100 S Detroit

Bellefontaine, OH 43311

**LOGAN COUNTY BAR ASSN.**

William Montgomery

112 N Main St

Bellefontaine, OH 43311

**MILROY FOUNDATION**

Justin Dinovo

110 N Main St

Bellefontaine, OH 43311

**RITTER FAMILY GRANT**

Mr. & Mrs. Jerry Ritter

1327 Dakota Rd

Bellefontaine Oh 43311

**CATHY WILEY ENRICHMENT GRANT**

Cathy Wiley

817 Creekview Ct

Bellefontaine OH  43311

**DUE NO LATER THAN MAY 23, 2020**

Your Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Administrator Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_