

DIAMOND IMPROVEMENT GRANT / POST-GRANT REPORT

1.	Date		
2.	Organization		
	A. Registered Cha	aritable Organization	
		Charitable Registration Number	
	B. Incorporated n	ot-for-profit entity	•
	C. Unincorporated	d organization with an affiliation with a req	gistered charity or non-profit organization
		Name of affiliated non-profit organization	and registration number
	Contact Name and Titl	e	
		Name	
		Title	
	Project Name		
	Address		
			•
	Telephone		•
	E-mail		
	Project Completion Da	ite	

	Program Evaluation Did the organization/program funded successfully meet objectives? What impact did the CGC Grant have on thorogenization/program/community?			
	Expenditures			
	How were funds used? Indicate budget vs. actual expenditures.			
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	Special Achievements Outline special achievements of the organization/program as a direct result of the CGC Grant.			
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	Cleveland Guardians Charities Recognition – please send photos of completed project and signage recognition to: njanoso@cleguardians.com			
	recognition to, High 1999 (work graditality 1991)			