



2024 Community Recycling Awareness Grant Report

GRANT REMBURSEMENT REQUEST

Submit a hard copy of report and supporting documents by or before 4:00 PM on November 1, 2024.

To receive your grant payment, please provide the information requested in the Grant Summary and the Expense Documentation sections below.

Mail or deliver a hard copy of all required items to the Cuyahoga County Solid Waste District, 4750 East 131 Street, Garfield Heights, OH 44105. *Documents sent by email or fax are not considered a final report.*

Community: _____

Grant Contact Name & Title: _____

Grant Contact Email: _____

Amount You Were Awarded: _____ Reimbursement Amount Requested: _____

of Households in Your Community: _____

Notes, comments or feedback about your grant:

In your final report, provide:

- GRANT REIMBURSEMENT REQUEST: Contact information for your community.
- GRANT SUMMARY: Completed report narrative outlining your grant project.
- One photo or sample of the final education piece or item(s) purchased.
- Photos of the paper shredding event(s) or special recycling event that was funded.
- Photos of the purchased recycling and/or compost containers in-use, clearly showing the container signage.
- EXPENSE DOCUMENTATION: Signed and dated sheet.
- Documentation of expenditures for each item. Examples: A purchase order, invoice, receipt, or billing statement.
- Proof of payment for each item. Examples: A copy of canceled check, an invoice/bill showing a zero balance, receipt, or bank statement.



GRANT SUMMARY

For each project implemented, answer the questions below.

For Recycling Awareness and Education Materials

- Did you receive approval for your project before it was produced? YES NO
- Describe the education piece you produced with grant funds. How was it distributed?

- How many copies or items did you distribute? _____
- A sample or copy of the item you produced is included with this report? YES NO

For Recycling and Composting Containers

- How many recycling or composting containers did you purchase? _____
- Is there signage with the container to instruct residents? YES NO
- Where are they located? Please provide addresses or locations.

- A photo of the container(s) is included with this report, showing the location and signage? YES NO

For Special Recycling or Paper Shredding Events

- Describe the recycling event you held. What were the date(s) and details? Explain the recycling education piece distributed to attendees or posted at the event.

- What was the vehicle count for the event(s)? EVENT #1 _____ EVENT #2 _____
- What was the weight of the material collected (indicate pounds or tons)?
Event #1 _____ POUNDS TONS Event #2 _____ POUNDS TONS

For Other Awareness Projects *(The Solid Waste District may request additional documentation for this project.)*

- Describe your awareness project and the results? Did the project meet its established goals?

- How many residents did your project serve? _____
- Include any supplemental materials or reports arising from your special project that help document the project and the results.



EXPENSE DOCUMENTATION

In the table below, document all grant-related expenditures. Include your total cost even if it is more than your grant award. Please note that you will only be reimbursed based on approved, eligible, and documented expenditures up to your total grant award.

Project Item Description	Vendor Name	Invoice Date	Quantity	Cost
Total Amount Spent on Project				

CRAG Amount Your Community Was Awarded	
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Reimbursement Amount Requested	
<i>Reimbursement request may be lower than your award but cannot exceed the amount you were awarded.</i>	

I verify that the included documents, samples, and photos account for all grant-approved purchases.

Authorized Grantee Signature

Signature

Name & Title (print)

Date

Payment Remittance Address: _____