

2024 Special Project Grant Report

GRANT REMBURSEMENT REQUEST

Submit a <u>hard copy</u> of the 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.

<u>Mail or deliver a hard copy</u> 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 or Organization:	
Grant Contact Name & Title:	
Grant Contact Email:	
Amount You Were Awarded:	Reimbursement Amount Requested:

In your final report, please attach and check off the following items:

- GRANT REIMBURSEMENT REQUEST: Contact information for the Special Project Grant.
- 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 recycling, organics or special collection event(s) funded.
- □ Photos of the purchased recycling and/or organics 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.
- W-9 Form.

GRANT SUMMARY

In an attachment, please answer each of the following questions. Number your responses accordingly. All answers must be typed. Handwritten responses will not be accepted.

- 1. Briefly describe the project implemented with the grant. Please include details such as your implementation timeline, staffing, outreach and education, training, specific individuals, and groups involved in the project.
- 2. What is the approximate number of people served by your recycling, organics, or collection program?
- 3. Describe the outcome(s) of your project. Include specific and measurable results regarding type and amount of materials recycled or composted. (i.e., number of bags recycled, pounds of organics composted, etc.).
- 4. Describe how your organization plans to keep this program going after the grant period is over.



- 5. How has your grant project benefited your organization and increased awareness and participation in recycling, composting, or diversion?
- 6. How did you acknowledge within your grant funding was from the Cuyahoga County Solid Waste District? (i.e., signage, newsletter, email, etc.). Attach a copy or photo of the acknowledgement to this report.
- 7. What are your comments or suggestions regarding this grant process?

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				

Special Project Grant Your Community Was Awarded

Reimbursement Amount Requested	
Reimbursement request may be lower than your award but cannot exceed the amount you were awarded.	

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: