SUNRIVER - LA PINE ROTARY CLUB FOUNDATION

P.O. Box 4761
Sunriver, OR 97707
www.sunriver-lapinerotary.org

POST FUNDING REPORT

Organization:
Contact: **Phone:**
Address:
Purpose:
Amount funded: $ **Date funds received:**

(If needed, please use reverse or provide additional sheets)

1. Please share how your organization used the Foundation's funding and the progress you're making to achieve your goals.

2. Have these funds helped: 1) stimulate new private funding, 2) increase collaboration with other organizations, 3) increase volunteer involvement?

3. Please share with us a story describing the effect that this funding has had on your organization or community.

Name (printed):_____ Title: _____

Signature: _____ Date: _____