

Formula Grant Notice of Project Completion  
(Page 1)

Project name: \_\_\_\_\_  
Subrecipient: \_\_\_\_\_ Project number: \_\_\_\_\_  
Address \_\_\_\_\_ Phone number: \_\_\_\_\_  
Award amount: \$ \_\_\_\_\_ Project period: \_\_\_\_\_  
Federal Funds Spent: \$ \_\_\_\_\_

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All project activities were completed.     Yes             No. If "no", explain why

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Are all records backed up?     Yes     No  
Are all expenditures and records available in event of state or federal audit?     Yes     No

**Location of Records**

(According to State Records Retention Schedule for State Government Agencies, all records will be retained for three years, either after the end of the project period or after final audit is resolved, and equipment records will be retained three years after non-expendable equipment is properly disposed.)

Was equipment acquired under this Project?     Yes     No

Notice: If equipment was purchased, in whole or in part, greater than \$300 with federal funds, please complete Page 2 for each item purchased.

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Are the project disbursements balanced between expenditure ledgers and documents?     Yes     No  
Are all expenditures listed in their respective categories?     Yes     No  
Were the Final Financial and Final Progress Reports submitted to IDJC?     Yes     No  
Did you adhere to all project conditions?     Yes     No  
If any equipment was purchased with federal funds are they recorded on the *Property Inventory Reports* and submitted to IDJC?     Yes     No

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Project Director's Signature \_\_\_\_\_ Date \_\_\_\_\_

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Financial Officer's Signature \_\_\_\_\_ Date \_\_\_\_\_

# Formula Grant Notice of Project Completion

(Page 2)

Complete this page if you purchased equipment, in whole or in part, greater than \$300.00 with federal funds.  
Complete a separate Page 2 for each item of equipment purchased.

Project name: \_\_\_\_\_  
Subrecipient: \_\_\_\_\_ Project number: \_\_\_\_\_  
Address \_\_\_\_\_ Phone number: \_\_\_\_\_  
Award amount: \$ \_\_\_\_\_ Project period: \_\_\_\_\_  
Federal Funds Spent: \$ \_\_\_\_\_

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Description of property: \_\_\_\_\_  
Serial number or other ID number: \_\_\_\_\_  
Equipment purchased from: \_\_\_\_\_ Owner of Property: \_\_\_\_\_  
Purchase date: \_\_\_\_\_ Purchase price \$ \_\_\_\_\_  
Percentage of federal funds used to purchase equipment: \_\_\_\_\_  
Location of equipment: \_\_\_\_\_  
Equipment purchased as:  New  Used  
Current condition of equipment: \_\_\_\_\_  
If applicable Disposal date: \_\_\_\_\_ Sale price \$ \_\_\_\_\_

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Property Management Notes:

Other recipient and subrecipient procedures for maintaining equipment (including replacement), whether acquired in whole or in part with project funds, will, at a minimum, meet the following requirements.

Property records must be maintained which include:

1. Description of the property
2. Serial number or other identification number
3. Source of the property
4. Identification of title holder
5. Acquisition date
6. Cost of the property
7. Percentage of Federal participation in the cost of the property
8. Location of the property
9. Use and condition of the property
10. Disposition data, including the date of disposal and sale price

A physical inventory of the property must be taken and the results reconciled with the property records at least once every 2 years.

A control system must exist to ensure adequate safeguards to prevent:

1. Loss
2. Damage
3. Theft of property

Any loss, damage, or theft shall be promptly and properly investigated by the recipient and subrecipient, as appropriate.

Adequate maintenance procedures must exist to keep the property in good condition.

If the recipient or subrecipient is authorized or required to sell the property, proper sales procedures must be established to ensure the highest possible return.

# Formula Grant Project Summary Report

Project name: \_\_\_\_\_  
Subrecipient: \_\_\_\_\_ Project number: \_\_\_\_\_  
Address \_\_\_\_\_ Phone number: \_\_\_\_\_  
Award amount: \$ \_\_\_\_\_ Project period: \_\_\_\_\_  
Federal Funds Spent: \$ \_\_\_\_\_

Number of volunteers for the project \_\_\_\_\_ Total hours \_\_\_\_\_

1. Is this project continuing?  Yes  No

2. How is it being funded? (Client fees, grants, donation, etc.)

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3. What was the assessed need for your program, and to what extent did you meet the need(s)?

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4. What were the strengths, accomplishments, and successful features of your program?

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5. Did you try anything innovative? If so, please explain.

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6. Identify challenges that you encountered with implementing your program and explain and steps that were taken to overcome those problems.

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7. Other comments. (Attach additional sheets if necessary.)

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\_\_\_\_\_  
Project Director's signature

\_\_\_\_\_  
Date

# Formula Grant Final Financial Report

Note: Complete and submit this report before filing for reimbursements per Formula Grant Manual.

Project name: \_\_\_\_\_  
Subrecipient: \_\_\_\_\_ Project number: \_\_\_\_\_  
Address \_\_\_\_\_ Phone number: \_\_\_\_\_  
Award amount: \$ \_\_\_\_\_ Project period: \_\_\_\_\_  
Federal Funds Spent: \$ \_\_\_\_\_

<u>Budget category</u>	<u>Budgeted</u>	<u>Total spent to date</u>
Personnel	\$ _____	\$ _____
Consultant	\$ _____	\$ _____
Travel	\$ _____	\$ _____
Other	\$ _____	\$ _____
Equipment	\$ _____	\$ _____
Totals	\$ _____	\$ _____

\_\_\_\_\_  
Project Director's signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Financial Officer's signature \_\_\_\_\_ Date \_\_\_\_\_

CERTIFICATION: I hereby certify that this report represents actual receipts and expenditures of funds for the period covered and the total project to date, all made in accordance with the approved budget for the above named project.