**Community Initiatives and Affected Areas Program**

**2022 Final Reporting Form**

**Applicant Profile**

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| --- | --- |
| **Organization Name:** |  |
| **Project Name:** |  |

**Primary Contact information**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name:** |  | **Title:** |  |
| **Address:** |  | | |
| **Phone Number:** |  | **E-mail:** |  |

**Please describe your project**

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**What was the outcome of your project? (Did it meet your anticipated outcome?)**

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**How did your project benefit your organization? How did it benefit the community?**

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**Program Budget**

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| --- | --- | --- |
| **Revenues:** | **Source:** | **Amount:** |
| CBT Funding: | CBT CIP/AAP (amount awarded) |  |
| Other Funding: |  |  |
| Other Funding: |  |  |
| In-Kind Contributions: |  |  |
| Cash Contributions (from your organization): |  |  |
| Other: |  |  |
| **Expenditures:** | **Description:** | **Amount:** |
| Administrative Costs: |  |  |
| Contractor Costs: |  |  |
| Publications: |  |  |
| Equipment Purchases/Rentals: |  |  |
| Construction Related Costs: |  |  |
| Other: |  |  |
| Other: |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| **Total Revenues:** | | 0.00 |
| **Total Expenditures:** | | 0.00 |
| **Funds Returned (if Applicable):** | |  |

**Attachments:**

Photos of project (if applicable)

Project Receipts