

## 2019 – 2020 District Grant Final Report

**Final reports are due within 30 days of the project ending, and no later than June 1, 2020.** Please complete this form by filling in the fields below. You must also provide a scanned copy of valid Proof of Payment (PoP) for all expenses listed. Acceptable PoPs include: cancelled checks, bank statements, bonafide itemized receipts. Once you have completed the report, please save it as a pdf document at <http://www.matchinggrants.org/district/> on the Documents tab of the project page before clicking the "Reported" button on the Administration page.

**Rotary Club** Oak Lawn Healthcare \_\_\_\_\_ **District Grant #** P-3268 \_\_\_\_\_

**Project Title** COVID-19 Food Scarcity Relief \_\_\_\_\_

- Briefly describe the project. What was done, when and where did project activities take place, and who were the beneficiaries? List any changes that might have occurred.  
\$500 was donated to Greater Chicago Food Depository to assist with emergency needs affected by COVID-19. 1 in 8 people go hungry in Cook County daily.  
\$500 was donated to Ronald MacDonald House to positively impact families who stay at the home with basic needs and expenses. This helped provide financial relief for those families already struggling with healthcare expenses as a result of a sick child.
- How many Rotarians participated in the project? 3
- What did they do? Please give at least 2 examples.  
They identified the community need, provided the donation and followed up with the organizations on the impacts.
- How many non-Rotarians benefitted from this project? 100
- What are the expected long-term community impacts of the project?  
This is disaster relief enabling people to survive until the pandemic is under control.
- If a cooperating organization was involved, what was its role?
- How did you share the news of your project?  
Social media

### Financial Summary – Be sure that Income equals Expenditures!

8. <u>Income</u>	<u>Amount</u>
District Grant funds received	\$1000 _____
Club contribution	\$0 _____
Other funding (specify)	_____
Total Project Income	\$1000 _____

9. Actual Expenditures Valid Proof of Payment must be saved in pdf on <http://www.matchinggrants.org/district/>

<u>Date</u>	<u>Expense Type</u>	<u>Vendor</u>	<u>Amount</u>
5-9-20__	Donation _____	Greater Chicago Food Depository	\$500 _____
5-9-20__	Donation _____	Ronald MacDonald House	\$500 _____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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Total Project Expenditures

\$1000\_\_\_\_\_

By completing this report, I confirm that to the best of my knowledge my Club has abided by the District Grants Program Details as set forth by Rotary International District 6450 and is in compliance with The Rotary Foundation Grants Terms and Conditions. Any deviation may result in a requirement to return District Funds. I also understand that all photographs submitted in connection with this report will become the property of RI and will not be returned. I warrant that I own all rights in the photographs, including copyright, and hereby grant RI and TRF a royalty free irrevocable license to use the photographs now or at any time in the future, throughout the world in any manner it so chooses and in any medium now known or later developed. This includes the right to modify the photograph(s) as necessary in RI's sole discretion. This also includes, without limitation, use on or in the web sites, magazines, brochures, pamphlets, exhibitions and any other promotional materials of RI and TRF.

**Club President**

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**2<sup>nd</sup> Club Contact**

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