## Washington County Together We Serve Grant Report

Organization [			Date
Mailing Address			
Contact Person		Title	
Phone Number		E-mail	
Project Name			
Date of Project Completion		Funding Received	

Expenses	Amount Requested	Amount Awarded	Amount Expended
PPE/Sanitization			
Tele-work or delivery			
Food or essential services			
Increased services			
Temporary employee(s)			
Overtime			
Other			
Total			

Describe the impact the project had on your organization and the population you serve:

## Please attach copies of all receipts and supporting documentation for all Together We Serve funding expenditures

I certify to the best of my knowledge and belief, that the billed costs and expenses are in accordance with the approved event or project. The expenses herein contained meet the intent of the Washington County Together We Serve Funding requirements.

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Signature	Date	
Printed Name	Title	

Send completed report to : Washington County Office of Grant Management, 100 W. Washington St. Hagerstown, MD 21740 or E-mail to: sbuchanan@washco-md.net