



PINAWA FOUNDATION
Box 100, Pinawa MB R0E 1L0
www.pinawafoundation.org
E-mail: info@pinawafoundation.org

Date Received: _____

Application #: _____

POST GRANT REPORT

Name of Organization: _____
Name of Contact Person: _____
Mailing Address: _____
Email /Telephone/Fax: _____
Signature: _____

Amount of Grant: _____
Brief Description of Project: _____

How was the money spent to benefit the community?

Did the project meet all of your expectations?

Could the results have been improved on and how?

When completed, mail this form with any required attachments to:
PINAWA FOUNDATION
P.O. Box 100, Pinawa, MB R0E 1L0