2019 SHARE TANK FINAL STEWARDSHIP REPORT



Print clearly or type. Answer all questions and use the space provided.

NONPROFIT CONTACT INFORMATION				
Nonprofit Organization				
Contact Person				
Address (required)		ZIP		
Email Address (required)		All email addresses are maintained as private; not for public use		
Phone (required)				

SUPPORT RECEIVED FOR PROJECT				
Amount Awarded from Share Tank	\$			
Match Amount from cash, donations or in-kind support (if applicable)	\$			
Total number of volunteer hours (if applicable)				
FINAL PROJECT RESULTS				
Provide a detailed description of the final impact results of the project and how it was accomplished.				

FINAL PROJECT RESULTS (continued)				
I certify that the information listed above is true to the best of my knowledge.				
Nonprofit Representative Signature	Board Chair (or Board Member) Signature			
Date	 Date			