

MARTHA HOLDEN JENNINGS FOUNDATION FINANCIAL REPORT FORM

At the **CONCLUSION** of your project, the Foundation requires a final **FINANCIAL** report based on **ACTUAL EXPENDITURES NOT PURCHASE ORDERS**. Copies of invoices or checks are not necessary. If you have any questions, please call our Business Office at 216.932.7337.

Martha Holden Jennings Grant Number _____ Grant Amount _____

School District or Organization _____

Grants-To-Educator's name if applicable _____

Address _____

City

State/Zip Code

Purpose _____

MARTHA HOLDEN JENNINGS FOUNDATION GRANT \$ _____

GRANT DISBURSEMENTS (itemized by category, for example: supplies, fees, etc.)

TOTAL GRANT DISBURSEMENTS _____

**BALANCE (Refunds required for
balances of \$20 and over.)** \$ _____

Signature

Telephone

Date

When this form has been completed, please mail to:

Martha Holden Jennings Foundation
Business Office
20620 North Park Blvd., Suite 215
Cleveland, OH 44118