York County Veterans Outreach Report on Funding Required Within 6 Months of Receipt of Funds

This form is to be completed within 6 months or less of receiving grant funding from the York County Veterans Outreach and must be submitted before any additional funding requests.

Our Mission: York County Veterans Outreach assists veterans and their families, to identify and access resources, services, and programs to meet their short- and long-term goals.

Our Grant Program: is designed to provide financial support to initiatives and organizations deemed capable of generating broad and substantial benefit to York County veterans and their families.

Submitting Report Back Form: This form and any supporting documents must be submitted via email cstorm.ycvo@gmail.com or mail to:

York County Veterans Outreach Attn: Cassandra Storm PO BOX 3627 York, PA 17402

Questions? Email <u>cstorm.ycvo@gmail.com</u> or call 717-978-3049

ALL GRANT FUNDS ARE TO BE UTILIZED FOR YORK COUNTY VETERANS AND/OR THEIR FAMILIES.

1. Today's Date:		
2.) Name of Entity:		
3.) Your Name:		
4.) Email:		
5.) Phone:		_
6.) Dollar Amount Received	from YCVO:	
7.) Date Funding Was Receiv	ved:	
8.) Has all the funding been	utilized?	
Circle: Yes	No	

9.) How long did the funding last? _____

10.) How many individual York County veterans were served with the YCVO Grant Funding?

11.) Were any family members of York County veterans served with YCVO Grant Funding? *Place a Check in your answer below:*

_____Yes, we served/also served family members.

_____ No, we only served veterans.

12.) Were funds from the YCVO Grant used for anyone who is not a York County veteran and/or family member?

Place a Check in your answer below:

____Yes.

_____ No, funds were only used for York County veterans and/or their families.

12a.) If you answered, "Yes", please explain.

13.) Were all York County veterans served with the YCVO Grant Funding verified with the York County Department of Veterans Affairs?

Circle: Yes No

13a.) If you answered, "No" please elaborate how you confirmed their credentials and any other pertinent information.

14.) If legally permitted (in-regards-to HIPPA and other Privacy Laws) and requested by the YCVO Board at the time of your Grant Disbursement, please provide a list of the names of York County veterans served with the YCVO Grant Funding.

15.) Were there any changes to how the YCVO Grant Funding was utilized that differed from the original intention listed in the YCVO Grant Application? *Place a Check in your answer below:*

_____Yes, the programing/situation changed after we received our funds.

_____ No, everything went as planned.

15a.) If you answered, "Yes" please explain.

16.) Since receiving the YCVO Grant, has your program become self-sustaining financially? *Place a Check in your answer below:*

_____ Yes, we are now capable of funding our own programing.

_____ No. we are still dependent on grant funding.

16a.) If you answered, "No" do you plan to return to the YCVO with an additional grant funding request?

Circle: Yes No

17.) If you intend to reapply for additional YCVO funding, please detail your needs and future plans for possible grant requests.

18.) **Privacy:** Submission of grant reporting will not be considered confidential in nature. If information within the reporting needs to be kept private, please indicate on the application what documents and/or information need to remain private.

19.) Is there anything else you wish to share with the York County Veterans Outreach Board of Directors?

Finalizing Report Back From

Keep a Copy of this Form for Your Records

Additional documents, photographs and more can be emailed to <u>cstorm.ycvo@gmail.com</u> or mailed to:

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