**Bethany Lutheran Church Foundation** *Revised July 2024*

**Grant Reporting Form**

Please submit no later than Sept 1

(Type or print clearly)

Name of Applicant or Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grant manager or person submitting form:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Taxpayer Identification Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street

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City State Zip

Amount of grant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Describe how the grant money was used for the purposes outlined in your application (please include applicable metrics that show how the grant money positively affected your organization (e.g. how many individuals were served using the grant funds)):

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Send to:

Julie Friedemann – [Foundation@bethany-denver.org](mailto:Foundation@bethany-denver.org) OR

Bethany Lutheran Church Foundation

Attn: Julie Friedemann

4500 E. Hampden Ave.

Cherry Hills Village, CO 80113