

FINAL FUNDING REPORT

PO Box 23

Johnsburg, NY 12843

Please file this report within two weeks of completion of the activity with the JYC **by mailing to the address above or by leaving with the Secretary to the Supervisor at the Town Hall. It can be emailed to the secretary as well <secretary@johnsburgny.com>**

Date: _____

Activity Funded: _____ JYC Funding amount: _____

Fee collected from kids: _____ Program Dates: _____

Number/age of participants: _____ Number of Drop outs: _____

Number of activity sessions: _____ How many cancelled days: _____

Venue: _____

Mode of Transportation: _____

Opinion of venue: Excellent Good Fair Poor

Please report any injuries: _____

Please list or attach names of youth participants: (Use back if needed)

Please tell us something wonderful about the program:

Submitted by: _____ Date: _____