



THE
COMMON GOOD
COMMUNITY FOUNDATION
ENRICHING PLUMAS COUNTY THROUGH GIVING

FUNDING RECONCILIATION FORM

Name of Organization: _____

Name of Funded Project: _____

Contact Person & Phone #: _____

Funding Date & Total Amount Funded: _____

PLEASE ATTACH THE FOLLOWING TO THIS FORM:

1. A narrative describing what goals and outcomes were achieved through this project and specifically how residents and communities within Plumas County benefited.
2. A two column spreadsheet outlining the project's original budget projections vs. actual expenditures. **Copies of receipts must be attached.**

Please complete this form once all project funds have been expended or not later than one year from the date of funding.

For assistance with this form, please email commongoodplumas@gmail.com

Completed forms and attachments may be mailed to:

The Common Good Community Foundation
364 Johnsville Rd.
Blairsden, CA 96103

Or emailed to commongoodplumas@gmail.com

Authorized Signature: _____ Date: _____

Printed Name: _____ Title: _____

364 Johnsville Road
Blairsden, CA. 96103
(530)836-0136