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WAILUKU, MAUI, HAWAII 96793
PHONE: (808)270-7710 FAX: (808)270-7995

FINAL REPORT

Contract/Grant Number:

Organization Name:

Program/Project/Event Title:

Contact Name/Title:

Phone Number:

Email:

Submitted by:

Signature: _____

Date:

The Final Report is a cumulative report of your grant performance period. Please make sure your numbers reflect totals for your entire program/project/event.

Report Narrative:

- A. Program/Project/Event description from your original proposal
- B. Report on your Goals, Objectives, and Action Steps, with actual outcomes & results
- C. Provide your Dashboard of Performance Measures
- D. Discuss the results of your marketing/public outreach efforts
- E. Provide two anecdotal stories on how this grant funding assisted our community
- F. Describe how this program/project/event could be improved
- G. Include 5 digital photos on a USB flash drive with the Final Report that best depicts your program/project/event
- H. Attach a Report of Actual Expenses and Income for Completed Project form

Report Narrative: If any responses below exceed the text box provided, please use the "Attach Here" button to attach a electronic file from your computer to this form. (e.g word doc). Must label document according so that it can be easily identified. File size must be 25 MB or smaller.

A. Program/Project/Event description from your original proposal

B. Report on your Goals, Objectives, and Action Steps, with actual outcomes & results

C. Provide your Dashboard of Performance Measures

OBJECTIVE : PERFORMANCE MEASURE	2019 ACTUALS	2020 ACTUALS	2021 ACTUALS
<i>Launch a publicity campaign to attract attendees: Total number of registrations</i>	1124	1500	

D. Discuss the results of your marketing/public outreach efforts

E. Provide two anecdotal stories on how this grant funding assisted our community
Story #1

Story # 2

F. Describe how this program/project/event could be improved

G. Include 5 digital photos on a USB flash drive with the Final Report that best depicts your program/project/event

H. Attach a Report of Actual Expenses and Income for Completed Project form

[Click here for template in excel format](#) or use fillable form below.

County of Maui
Office of Economic Development

REPORT OF ACTUAL EXPENSES AND INCOME FOR COMPLETED PROJECT

Grant Organization: _____

Grant Project/Event: _____

Grant Number: _____

INCOME DESCRIPTION	COUNTY	OTHER CASH	IN KIND	TOTAL
TOTAL INCOME				
EXPENSE DESCRIPTION	COUNTY	OTHER CASH	IN KIND	TOTAL
ADMINISTRATION				
OPERATIONS				
MARKETING				
OTHER				
TOTAL EXPENSE				

I hereby certify that all financial statements represented in this Final Report to the **County of Maui** relating to Grant Agreement G: _____ , are accurate and that funds allocated through the **County of Maui, Office of Economic Development** under this Agreement have been expended in accordance with the provisions set forth in this Agreement.

SIGNATURE: _____

PRINT NAME: _____