**SOCIETY OF THE SACRED HEART**

**DUCHESNE FUND FOR MINISTRY FINAL REPORT FORM 2024**

**Title of Project:** Click here to enter text.

**Name of Organization:** Click here to enter text.

**Address:** Click here to enter text.

**Project Director:** Click here to enter text.

**Email:** Click or tap here to enter text.

**Project Accountability**

**How have you achieved the measurable objectives in your application?** Click here to enter text.

**What is the major positive outcome of this project?** Click here to enter text.

**Financial Accountability for use of Duchesne Fund Grant**

|  |  |  |
| --- | --- | --- |
| **Expense Category** | **Actual Expenditure** |  |
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|  | **Total Spent** | **$0.00** |
|  |  |  |
| **Grant Received** |  |  |
| **Balance** |  | **$0.00** |

*Please email or fax 1-2 paragraphs and pictures for use in telling others about your project.*

**Signature of Project Director \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_**

**Signature of Administrator\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_**

***Send completed form to Duchesne Fund for Ministry, c/o Lisa Terneus, 4120 Forest Park Avenue, St. Louis, Missouri 63108 or e-mail to:*** ***lterneus@rscj.org*** ***at the conclusion of the project.***