



City of Toledo
City Enhancement & In-Kind Services

Award Recipient Final Report Form
Deadline: May 31, 2021

Organization Information

Organization Name: _____
Contact Person: _____
Address: _____
Phone: _____

Report:

Amount Received: _____ Date: _____

Describe how the contribution funds were used (e.g. supplies purchased, applied to overall administration, use additional pages if needed):

Did the expenditures match the application request? Yes No

If not, please explain:

Please submit the final report to:
Attention: City Manager Craig Martin
City of Toledo
Po Box 220
Toledo, OR 97391

OFFICE USE ONLY:	
Date received: _____	City Manager review: _____