

**Dear Recipient:**

Congratulations! Your organization was selected to receive a grant from the South Central Indiana REMC Community Fund — branded nationally as Operation RoundUp.



Participating SCI REMC members' bills are rounded up each month to the nearest dollar, and the additional change is considered a charitable donation to the SCI REMC Community Fund. This program allows SCI REMC members the opportunity to make a powerful impact on their communities for just pennies a month!

SCI REMC members are not required to participate, so it is vital to the continued success of the SCI REMC Community Fund to encourage members by promoting your success and managing statistical information. To do this, we need a completed final report from each organization receiving funds.

**Items to include in your report:**

- Final report form
- Pictures and/or video of the project/program in action
- “Before” pictures and/or video (if available)
- Summary of the progress/results using the goals listed in the original grant application
- Description of any significant challenges experienced related to the funded grant project/program

Final reports should be turned in within 30 days of receiving the grant. (They are due no later than six months after grant funds are received.) Failure to remit a final report will result in future applications being removed from consideration.

Thank you for your interest in SCI REMC's Community Fund. Please contact us if there are any questions or concerns 800-264-7362, or email [OperationRoundUp@sciremc.com](mailto:OperationRoundUp@sciremc.com).

Sincerely,

SCI REMC Operation RoundUp Trustee





**RECIPIENT ORGANIZATION FINAL REPORT**

Legal Name of Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Date of Report: \_\_\_\_\_

Website: \_\_\_\_\_

Contact person: \_\_\_\_\_

Phone at Work: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

Email address: \_\_\_\_\_

Project Name: \_\_\_\_\_ Amount Granted: \_\_\_\_\_

Start date of program/project: \_\_\_\_\_ End date: \_\_\_\_\_

How many individuals were served by the project/program in the following Indiana counties?

Clay: \_\_\_\_\_ Brown: \_\_\_\_\_ Johnson: \_\_\_\_\_ Morgan: \_\_\_\_\_ Monroe: \_\_\_\_\_ Owen: \_\_\_\_\_ Putnam: \_\_\_\_\_ Other: \_\_\_\_\_

**Please include the following supporting documents with this form:**

- Pictures and/or video of the project/program in action
- “Before” pictures and/or video (if available)
- Summary of the progress/results using the goals listed in the original grant application
- Description of any significant challenges experienced related to the funded grant project/program

*I represent that I am authorized by the named organization to submit this final report on its behalf and to make the assertions in this certification and to bind the organization accordingly. I understand that the SCI REMC COMMUNITY FUND has the right to fully audit the use of this donation at any time. I also understand that SCI REMC COMMUNITY FUND and SCI REMC COOPERATIVE may use this, if approved, for publicity and promotional purposes.*

**Signature**

**Printed Name**

**Date**

Completed reports may be emailed to [OperationRoundUp@sciremc.com](mailto:OperationRoundUp@sciremc.com) or mailed/dropped off:

SCI REMC  
Operation RoundUp  
300 Morton Ave.  
Martinsville, IN 46151