

167 Polk Street, Suite 300 Watertown, NY 13601 (315) 788-5631 www.UnitedWay-NNY.org

## **COMMUNITY IMPACT GRANT – MID YEAR REPORT**

Organization Name:	
Funded Program:	
Amount Awarded:	
Summarize activity metrics from your grant application	and progress to date.
Provide a brief narrative on how the funds were utilized remaining funds (if applicable).	d, any deviations from the budget, and plans for
Describe any challenges in implementing the program.	
Describe how your organization partners with United V	Vay of Northern New York.
Additional Comments:	
<u>Certification</u> The information provided in this mid-year report is true	e, accurate, and complete to the best of my knowledge.
Name of Primary Contact:	Title:
Email:	Phone: