

**Youth Philanthropy Contest 2018-19**

**Six Month Report**

Please complete the information below and return your completed report by email to info@facfoundation.org or the Fremont Area Community Foundation, Attn: Youth Philanthropy Contest, 1005 E. 23rd Street, Suite #2, Fremont, NE 68025 by **May 15, 2019**.

***\*\*\*If you have already completed your project, you may skip this form and go directly to the Final Report.***

Name of individual or group responsible for completing this project:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sponsor Name (if part of a group):

Contest Mentor Organization:

Primary Person Representing this Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please provide a brief summary of your project’s progress. Please attach a separate piece of paper if necessary.

1. What have you completed so far?
2. What do you have left to do for your project to be complete?
3. When do you anticipate your project will be fully completed?
4. Please list the expenses you have had so far:

ITEM COST

TOTAL EXPENSES TO-DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_