

KUDZU

Matching Grant Recipient Final Report

1. Organization/Business Name:

2. Project Contact Person, phone number and email:

3. Summary of Project: Include Date project was completed and size of area treated.

4. Accounting of Expenditures: Amounts should be at least double of the awarded amount to show proof of the match. Receipts should be **dated and itemized**.
 - 1) Attach receipts for items purchased.
 - 2) Attach receipts for professional labor required for project.
 - 3) Attach description of “in-kind” work.
In-kind work may be billed at \$20 an hour or less.
 - 4) Attach receipts for matching funds.
 - 5) Attach Photos of Finished Project.

Signature of Head of Organization: _____

Date: _____

Email completed form to polk.nc.kudzu@gmail.com

OR: mail to: Polk County Appearance Commission

P O Box 308

Columbus, NC 28722

ATTN: Kudzu Grants Committee

If form is mailed, notify us by email that this has been mailed

For PCAC only: Date Received: _____ By: _____