2015 Grant Project Completion Form

For:	TEAM
	P.O. Box 4699, 115 S. 3 rd Street Steubenville, OH 43952 (740) 266-6899
Project description:	
List of expenditures:	
Expenditure Item	Amount
	\$
	\$
	\$
	\$
- 	\$
	\$
	\$
	\$
	\$
(if more please check and list on back)	
Be sure to attach all receipts, and be	fore & after photos when applicable.
Please provide any recycling amounts genera	ited by this grant.
Date of Project completion:	, 2015 (no later than Dec 31, 2015)
NOTE: This form must be completed and return and no later than February 12, 2016.	within 120 days of the completion date of your project,