



HANCOCK FAMILY FOUNDATION

QUARTERLY REPORT

*The Hancock Family Foundation is monitoring the effectiveness of our grants by collecting information on the projects that are selected. We expect to receive quarterly reports updating the progress of the program or project funded. Please fill out any applicable areas of this form. Please also attach any other reports or documents with specific data that is important to the evaluation process. Thank you.*

**Grantee Information:**

Grantee Organization Name: \_\_\_\_\_

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

City, State, Zip Code: \_\_\_\_\_

**Grant Information:**

Program/Project Name: \_\_\_\_\_

Total funded amount: \_\_\_\_\_

Grant Period: From: \_\_\_\_\_ To: \_\_\_\_\_

Quarter Covered by Report: From: \_\_\_\_\_ To: \_\_\_\_\_

Final Report: Yes: \_\_\_\_\_ No: \_\_\_\_\_

**Describe progress toward listed goals:**

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**Funding balance:** \_\_\_\_\_

**How does actual funding compare to budget?**

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

**Remarks:**

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

**Certification:**

*I certify, to the best of my knowledge and belief, that the information provided is correct and complete, and that all disbursements have been made in accordance with original purpose of the grant.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

**Please mail to:**  
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