CENTENNIAL EDUCATION FOUNDATION GRANT FINAL RECONCILIATION 2023-2024

Name:	_	
School:	<u> </u>	
Grant Title:	<u></u>	
Itemize Below Each Expenditure of Grant Funds	Date	Amount
OI GIAIIL FUIIUS	Date	Amount
Total Spent		· · · · · · · · · · · · · · · · · · ·
Total Amount of Grant		· · · · · · · · · · · · · · · · · · ·
Amount +/- Amount of Grant	,	
Amount Refunded (Please attach refund chec	ck to submission)	
I hereby certify that the above is a true and coassociated with this mini-grant.	orrect accounting of all	expenditures
		·
	S	ignature

Please attach receipts for all above itemized expenditures and submit to <u>Jennifer Schultz</u> at the <u>Administration Office</u> within 90 days of receipt of mini-grant. Email to <u>schuje@centennialsd.org</u>

Keep a copy of this form for your records.