



City of Scappoose • 33568 E Columbia Avenue
 Scappoose, Oregon 97056
 Staff Contact: Isaac Butman
ibutman@scappoose.gov
 503-543-7146 x250

Scappoose CEP Interim Project Report

Applicant/Organization Name:

Project Title:

Interim Project Reporting Contact

Name:

Phone: **Title:**

Email:

Street Address: <input type="text"/>	Mailing Address (if different): <input type="text"/>
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Year Funded

Estimated Date of Completion

Name of organizations that partner or collaborate on this project.

Estimate how many people in the community have benefited from this project to date.

1) Please describe how the CEP Grant has been used to date; attach photos, promotional information, brochures, project reports, or other supportive materials.

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2) How is this project benefitting the people of Scappoose? Please explain if more funding will be necessary to complete this project. Describe how this project is furthering and enhancing the values of Scappoose as expressed through the Scappoose Vision Statement and Council Goals.

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3) Is there anything else you would like us to know about the success or future of this project?

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Interim Project Budget Reporting

CEP Allocation:

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Project Cost To-Date:

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Do you anticipate seeking future CEP funding for this project?

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Actual Project Budget to-date: <i>including money from other sources used for this project.</i>				
Line Item	CEP Funds	Organization Funds	Other Funds	Total
Totals:				

4) Please list the total dollar amount of in-kind donations received for this project and describe these donations briefly.

5) Please list the total number of volunteer hours used in the completion of this project, and describe the work done in these hours briefly.