



1989 JEUX CANADA GAMES FOUNDATION INC.

Summary Report - 2 pages

Note: The purpose of this report is to show how the Foundation grant was used by your organization. Please ensure that this report, and the necessary financial reporting documents are sent to the Foundation Office **by September 30**. Please print or type. Thank you.

Name of organization: _____

Mailing address: _____ PC: _____

Ph: _____ Fax: _____ E-Mail _____

Name/position of person completing this report: _____

Name/position of person who administered the grant: _____

Name of project or type of project: _____

How did the grant benefit your organization? _____

Your recommendations about the project: _____

How was/will the grant be recognized by your organization? _____

If equipment was purchased, were 1989 Jeux Canada Games Foundation Inc. logo stickers affixed? _____

Amount of grant awarded: \$ _____
Total of receipts: \$ _____
Amount of unspent balance \$ _____ (if any phone Tom Kennedy
@ 306-251-1989)

Required attachments:

___ financial statements

___ copies of all receipts

___ cheque for the unspent balance

Other Comments: _____

Return this report by September 30 to:

1989 Jeux Canada Games Foundation Inc.
Box 1989
Saskatoon, Sask. S7K 3S5

If you have any questions, please contact Tom Kennedy, Executive Director, 1989 Jeux Canada Games Foundation Inc. ph: 306-251-1989, fax: 306-665-5740 or e-mail: 1989jcgf@sasktel.net