

**Sandusky County Park District  
Local Park Capital Improvement Grant Program  
Grant Recipient – Final Report**

In accordance with a request from the State of Ohio Auditor's Office, please complete this form and return it to the Park District Office at the conclusion of your project. Please complete a separate form for each project.

**Political Subdivision** \_\_\_\_\_

**Governing Body** \_\_\_\_\_  
(City Council, Mayor, Trustees, etc.)

**Contact Person** \_\_\_\_\_ **Title** \_\_\_\_\_

**Address** \_\_\_\_\_  
Street City Zip

**Telephone** (419) \_\_\_\_\_ (Work) (419) \_\_\_\_\_ (Home)

**E-mail Address** \_\_\_\_\_

**Project Title** \_\_\_\_\_

**Starting Date** \_\_\_\_\_ **Completion Date** \_\_\_\_\_

**Project Costs:**

**Labor** \_\_\_\_\_

**Materials/Equipment** \_\_\_\_\_

**Contract Services** \_\_\_\_\_

**Other** \_\_\_\_\_

**Total Project Expenses** \_\_\_\_\_

**Grant Amount Awarded** \_\_\_\_\_

**Balance** (Please explain if other than \$0.00) \_\_\_\_\_

**Attach copies of all paid invoices and corresponding canceled checks and deliver to:**

**Attn: Christina Warden,  
Administrative Supervisor-HR Coordinator  
Sandusky County Park District  
1329 Tiffin Street  
Fremont, Ohio 43420**