



2018 Community Forestry Management Grant Final Report & Payment Request

Congratulations on completing the TreeVitalize 2018 community forestry management grant.

Urban and community forestry is an important aspect of any healthy and vibrant community and we appreciate your dedication to the trees in your community.

The following information will assist in closing out your grant and completing the payment process. If you have any questions, please contact the Program Director for additional information - 717.599.8650.

Instructions for Community Forestry Management Grantees

Final report checklist :

Contact a Penn State Extension Urban Forester or PA DCNR Service Forester to review the completed project. This should be the same person who approved the original planting plan during the application process. If that person is unavailable, please contact Jessica to discuss other options.

Complete the attached Final Payment Request Form.

Complete the final project budget form indicating *actual* expenditures for the entire project including the cash/non-cash match. Please be sure that all grant funds have been used, all matched funds show a minimum 1:1 (dollar for dollar) match, and include evidence of all volunteer services. The final project budget should match, within 10%, the approved project budget submitted in the original application.

Attach all related receipts and paid invoices including payments made with grant funds.

Attach any documentation of non-cash services (volunteer sign-in sheets, or employee pay records).

Please include examples of project announcements such as media articles, website postings, social media postings, and of course, photos!

Submitting the final report :

All final reports, and accompanying documents, must be received no later than 45 days after the completion of the project.

All 2018 tree planting grant terms end on December 31, 2018 unless an extension has been previously approved. Final reports must be submitted via email in pdf format; handwritten, Word document, or other variations will not be accepted. If you experience technical difficulties at any point, please contact the Program Director. Email address for final report submission : grants@treepennsylvania.org

Technical Assistance for Tree Planting Grants and Final Reports

Grant management and budget questions, contact:

Jessica Cavey, Program Director
(phone) : 717/599.8650 / (email) : grants@treepennsylvania.org

Tree Planting Project questions, contact :

Penn State University Extension Urban Forester appropriate to your location.
DCNR/BOF Service Forester appropriate to your location.

TreeVitalize grants are administered through the PA Urban and Community Forestry Council with funding from the PA Department of Conservation and Natural Resources.

GRANTEE INFORMATION

1. Primary Contact (project manager):

2. Grantee name :

3. Federal employer identification number
(required):

4. Mailing address:

5. Phone:

6. Email:

GRANT INFORMATION

7. Grant number :

8. Grant award amount :

9. Total Match Amount :

10. Total project cost :

Please add additional budget information on page 5

11. Total number of participating volunteers :

COMMUNITY FORESTRY MANAGEMENT PROJECT INFORMATION

13. Please briefly describe the funded project any changes to the plan or timeline, as well as other important aspects of the project. Please provide the approximate date(s) of any pruning or inventory activities.

14. Please provide information on the number of trees pruned if applicable :

Number of trees pruned along residential streets

Number of trees pruned along commercial streets

Number of trees pruned in parks

Number of trees pruned on privately owned land (non-residential,e.g.: museum, cemetery, etc.)

Number of trees pruned on other public land

Total number of trees to pruned

15. Describe how these trees will be maintained during the next 3-years (watering, light pruning, monitoring, etc.) and the responsible party for each task (municipal staff, volunteers, etc.).

16. Please provide information concerning volunteer involvement, including assistance with the pruning or inventory if applicable and in-kind donations, with this project. In addition, please attach any sign-in sheets and/or receipts for in-kind donations.

17. Please provide the names, titles and organizations of the municipal/organizational staff, community members, and/or volunteers who attended a Tree Tenders training in relation to this project. If applicable.

Total grant amount awarded :

Total match provided (non-cash + cash) :

Total Project Cost :

Category 1: Project specific supplies & materials

ACTUAL EXPENSES				SOURCE OF FUNDING		
Item	Unit Cost	Quantity	Total Cost	Non- Cash Match (i.e. supplies donated)	Cash Match (i.e. purchased with applicant funds)	Grant Funds (i.e. purchased with grant funds)
Total Supplies & Materials	X	X				

Category 2: Equipment Costs

ACTUAL EXPENSES				SOURCE OF FUNDING		
Equipment Type	Hours Utilized	Hourly Rate	Total Cost	Non-Cash Match (i.e. use of equipment donated or covered in-house)	Cash Match (i.e. paid with applicant funds)	Grant Funds (i.e. paid from grant funds)
Total Equipment Costs		X				

Category 3: Volunteer Services and Labor

ACTUAL EXPENSES					NON-CASH MATCH ONLY		
Type Volunteer (i.e. Tree Tenders, Girl Scouts, Rotary Club, community members, etc.)	Number of People	Hours Worked	Hourly Rate current volunteer rate :\$24.14	Total Contributed	Non-Cash Match		
Total Volunteer Services and Labor							

Category 4: Paid Services and Labor

ACTUAL EXPENSES					SOURCE OF FUNDING		
Service Name and Type Service	Number of People	Hours Worked	Hourly Rate	Total Cost	Non- Cash Match	Cash Match (i.e. paid with grantee funds)	Grant Funds (i.e. paid from grant funds)
Total Paid Services and Labor							

	Total Project Cost	Total Non-Cash Match	Total Cash Match	Total Grant Funds
Grand Totals				

FORESTER APPROVAL & GRANTEE COMMITMENT

Forester Approval

I have conducted a final site visit of the grant-funded project location and provide my approval.

Forester Name and affiliation (DCNR or PSU Extension) :

Phone

Email

Signature

Date

Grantee Commitment

I commit to caring for and monitoring the trees funded through this TreeVitalize grant.

Grantee representative

Official Name & Title:

(Elected official or staff person responsible for municipal tree care)

Phone

Email

Signature

Date