



**2020**

## Community Forestry Management Grantee Final Report & Payment Request



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### **Congratulations on completing a TreeVitalize 2020 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.

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## **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 reviewed the original plan during the application process. If that person is unavailable, please contact Jessica to discuss other options.

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 2020 community forestry management grant terms have been extended to June 1, 2021 with final reports due no later than July 15, 2021. 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](mailto: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](mailto: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

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1. Primary Contact (project manager):
2. Grantee name :
3. Federal employer identification number  
(required):
4. Mailing address:
5. Phone:
6. Email:

## GRANT INFORMATION

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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

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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/inventoried *if applicable* :

Number of trees pruned/inventoried along residential streets

Number of trees pruned/inventoried along commercial streets

Number of trees pruned/inventoried in parks

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

Number of trees pruned/inventoried on other public land

Total number of trees to pruned/inventoried

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.*

## FINAL PROJECT BUDGET

Total grant amount awarded :

Total grant amount requested for reimbursement:



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)
<b>Total Supplies &amp; Materials</b>	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)
<b>Total Equipment Costs</b>		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		
<b>Total Volunteer Services and Labor</b>							

**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)
<b>Total Paid Services and Labor</b>							

	Total Project Cost	Total Non-Cash Match	Total Cash Match	Total Grant Funds
<b>Grand Totals</b>				

# FORESTER APPROVAL & GRANTEE COMMITMENT

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## 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

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## 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