

Micro-Economic Development Fund Statement of Grant Accounting

Organization: _____

Address: _____

City/State/ZIP: _____

††††††††††††††††

Grant Amount: \$ _____ Date Grant Received: _____

MED Project: _____

Location of MED Project: _____

Please attach answers to the following.

1. How was grant expended? You may provide copies of invoices and operating budgets.
2. Did you accomplish the objectives stated in your application? Please explain.

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Certification:

To the Executive Board of the Diocese of Virginia: We certify that this grant as described above has been expended for the indicated purpose.

Signature _____ Date _____

Return completed form to:

Mr. Michael Kerr, Treasurer
The Diocese of Virginia
110 W. Franklin Street
Richmond, VA 23220