

# GRANT INFORMATION RECORD

Title of Grant Project \_\_\_\_\_

Grantor Agency \_\_\_\_\_ Grant I.D. Number \_\_\_\_\_

Grant Objectives \_\_\_\_\_

Contract Period: From \_\_\_\_\_ To \_\_\_\_\_

## Fiscal Data:

Personnel \$ \_\_\_\_\_ ( Attach a detail position listing)

Services/Supplies \$ \_\_\_\_\_

Equipment \$ \_\_\_\_\_

Indirect \$ \_\_\_\_\_

Other Charges \$ \_\_\_\_\_

Total Program \$ \_\_\_\_\_

## Funding Source:

Federal \$ \_\_\_\_\_

State \$ \_\_\_\_\_

### County:

Hard Match \$ \_\_\_\_\_

Soft Match \$ \_\_\_\_\_

Total Funding \$ \_\_\_\_\_

Organization Key (Fund number) \_\_\_\_\_

Federal Catalog Number if any part of funds are Federal \_\_\_\_\_

Method of Payment \_\_\_\_\_ Reimbursement \_\_\_\_\_ Advance  
(check one)

If grant is advanced, is there a requirement for interest earnings? Yes / No

County Department \_\_\_\_\_

County Contact \_\_\_\_\_

Date \_\_\_\_\_

Reviewed by Department of Finance

By \_\_\_\_\_

Date \_\_\_\_\_

Reviewed by Department of Personnel

By \_\_\_\_\_

Date \_\_\_\_\_