

Community Benefit Activity Report

- The program or service must address a community need.
- The program's purpose is to benefit the community rather than the organization.

Submitting Department: _____ **Date:** _____

Project: _____ **Coordinator:** _____

Persons Served _____ **Activity Location:** _____

- **Describe Program:** _____

- **List any grants, contributions or other funds donated for this program:**

- **List any community partners involved in the program:** _____

- **Contact person name, phone number and email address:** _____

- **Additional Comments:** _____

