



Business Development Fund Grant Program

Final Report

Personal Information

Grantee Name:

Email address:

Phone:

Project Information

Project Name:

Project Start Date:

Project End Date:

Purpose of Grant Funding (one to two sentences):

Total Final Project Costs:

Results

Did your project involve collaboration with other community partners or organizations? If so, please describe.



Please describe how the project benefited your business and the direct or indirect impacts to economic development in Cook County (i.e. business creation and or expansion, job creation and/or retention, increase to local tax base, unmet services provided to visitors and residents, redevelopment, etc.)

Please describe any changes to the project scope, budget or timeline you encountered. Be sure to note any challenges or unanticipated results, either positive or negative.



Certifications

The undersigned designated agent of this grant warrants: (1) that the above information is true and correct; (2) that the practices and expenses incurred were in accordance with the specifications and program requirements.

Signature of Grantee

Date

Submission

*Please submit completed final report form to director@cookcountymneda.org

Please include with your final report submission:

- Please attach any relevant documents. This may include outcomes, photos, flyers, stories of impact to demonstrate results of this project.