

## DISTRICT SIMPLIFIED GRANT REPORT

To be completed by Rotarians. Return this form to Pete and Helen Maxwell, 1305 Bounty Way, I	aguna Beach, CA 92651
Rotary Club: Rotary Club of Fullerton - Main	
Project Title: Rotary Dental Clinic	
Progress Report x Final Report	
Project Description	
<ol> <li>Briefly describe the project. What was done, when and where did proje and who were the beneficiaries?</li> </ol>	ect activities take place
Children in grades 3-8 received dental care from several dentists and dent the Ayuda Dental Clinic program. This year we had only one dental clinic be Dental Clinic raised their cost from \$1,500 to \$2,000. We held the clinic at Elementary School in the Fullerton School District. We had a good turn of dentists provided fillings, cleaning, tooth extractions, fissure sealants and	pecause the Ayuda /alencia Park ut of103 patients and th
How many Rotarians participated in the project?     5	
3. What did they do? Please give at least two examples.  One dentist is a Rotarian. Others delivered food and drink for the 60 plus volulunch to the volunteers.	nteers. One served
<ul> <li>4. How many non-Rotarians benefited from this project?</li> <li>5. What are the expected long-term community impacts of the project?</li> <li>The recipients will have healthier teeth, better general health, and be better places. They will have fewer urgent care problems in the future.</li> </ul>	repared to study
6. If a cooperating organization was involved, what was its role? The Fullerton School District provided the rooms, facilities, utilities and the confullerton Collaborative assisted with organization, photos, publicity and son Publicity included Facebook pages of the Fullerton Collaborative and the Ay Clinic.	ne paper goods.
Financial Report - Be sure that Income equals Expenditures!	
7. Income  1. District Simplified Grant funds approved by the District	Amount \$4.500
2. Club contribution	\$1,500 \$980.26
3. Other funding (specify)	ψ000.Z0
Total Project Income	\$2,480.26
8. Expenditures - please be specific and add lines as needed - receipts must be atta	ached
1. Ayuda Dental Clinic	\$2,000.00
2. Food and drink for volunteers	480.26
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Total Project Expenditures	\$2,480.26

9. By signing this report, I confirm that to the best of my knowledge these District Simplified Grant funds were spent only for eligible items in accordance with Trustee-approved guidelines, and that all of the information contained herein is true and accurate. Receipts for all grant-funded expenditures have been provided to the district. I also understand that all photographs submitted in connection with this report will become the property of RI and will not be returned. I warrant that I own all rights in the photographs, including copyright, and hereby grant RI and TRF a royalty free irrevocable license to use the photographs now or at any time in the

future, throughout the world in any manner it so chooses and in any medium now known or later developed. This includes the right to modify the photograph(s) as necessary in RI's sole discretion. This also includes, without limitation, use on or in the web sites, magazines, brochures, pamphlets, exhibitions and any other promotional materials of RI and TRF.		
Certifying Signature	Minard Dunean	_ Date: <u>6-/-/3</u>
Print name, Rotary title, and club	seasi Marka Jeles Mes Orde	- Transport