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**2022 St. Martin’s Grant   
Follow Up Report**

**Organization**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   
**Follow Up Report for** **Operational Year**: \_\_\_ /\_\_\_ to \_\_\_ /\_\_\_  
  
**Execution of Grant Programs:**   
In 2022, did Agency serve clients and provide services to the designated target population as proposed in your 2022 Grant Request Form. Yes [ ] No [ ]   
 If “no”, attach an explanation for the change(s) in the execution of the Grant programs

**Expenditure of Grant:**   
Were Grant funds spent in the manner described in the 2022 Grant Request Form: Yes [ ] No [ ]  
 *If “No”, attach an explanation for change in requested Grant expenditure*  
  
**Attestation:**  
“In accord with the best information available to the Organization for the 2022 Operational Year, the information provided to SMEC is true and accurate”  
 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
 Officer of Organization

**Targeted Sustained Outcomes for the 2022 Scope of Grant and Most Recent 12 Months Available:**

* Present measured, quantitative outcomes from Agency Program(s) intended to have lasting improvement in client well-being
* State qualitative impact from Agency Program(s) intended to achieve a sustained improvement in client well-being   
   *Attach requested information about the results achieved by Organization if available.*

**Operational Results for the 2022 Scope of Grant and Operational Year:**

* Total number of individual clients receiving at least one service \_\_\_\_\_\_\_
* Total number of services provided to all clients: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Total number of individual clients who “graduated” having successfully achieved the Organization criteria-of-completion \_\_\_\_\_\_\_\_
* Total number of individual clients who departed/withdrew from the Organization without having achieved the criteria-of-completion\_\_\_\_\_\_\_\_