

<b>FINANCIAL CASH REPORT</b>		2. This report is being presented to <p style="text-align: center;">Arctic Slope Community Foundation</p>	
1. RECIPIENT ORGANIZATION  Name:  Number and Street:  City, State and ZIP Code:		3. ASCF Grant Number	4. Grant Award Amount
		5. Grant Award Date	
		6. Tax Identification Number	
<b>PERIOD COVERED BY THIS REPORT</b>			
FROM (month, day, year)		TO (month, day, year)	
<i>Prior submitted Report( cumulative)</i>		<i>Current report</i>	
<b>Total receipts</b> <i>(total amount received from ASCF since award date)</i>		<b>Total cash from prior period</b>	
<b>Gross disbursements</b> <i>(copies of receipts must be submitted)</i>		<b>Amount Given this quarter</b>	
<b>Total cash available</b> <i>(Sum of lines a and c)</i>		<b>Gross disbursements</b> <b><i>(attach copy of receipts)</i></b>	
<b>Adjustments of prior periods</b> <i>(explain reason under comments below)</i>		<b>Adjustments of prior periods</b> <i>(explain reason under comments below)</i>	
<b>Cash on hand end of period</b>		<b>Cash on hand end of period</b>	

<b>CERIFICATION</b> By signing this, I certify to the best of my knowledge and belief that this report is true in all respects and that all expenditures have been made for the purpose and conditions of the grant or agreement.	AUTHORIZED CERTIFYING OFFICIAL	SIGNATURE	DATE REPORT SUBMITTED
		_____ TYPED OR PRINTED NAME AND TITLE	TELEPHONE (Area Code, Number, Extension)  ( ) -

Comments: