



MDA PR GRANT IMPACT REPORT TEMPLATE

Due within 4 weeks of your event's completion. Please complete all sections and email this report along with at least 3 photos to: revans@michigandental.org.

BASIC EVENT INFORMATION

Component or District Name:

Grant Recipient Contact Person:

Name: _____

Email: _____

Phone: _____

Event/Project Title:

Date(s) of Event:

Location(s):

Total Amount Awarded:

\$ _____

1. EVENT SUMMARY (250-500 WORDS)

Please describe your event or initiative. Include:

- The goals of the project
- The target audience served
- A summary of activities conducted
- Any partners or organizations involved

(You may attach a separate page if needed.)

2. KEY METRICS

Metric	Number
Total Attendees/Participants	_____
Estimated Reach (if media or digital outreach was included)	_____
Number of Volunteers Involved	_____
Number of Schools/Organizations Partnered With	_____
Educational Materials Distributed	_____
Other (specify): _____	_____

3. PHOTO SUBMISSION

Please include at least **3 high-resolution photos** (with media release permissions) showing:

- Attendees engaged in the event
- MDA members participating
- Any signage or materials funded through the grant

Attach photos with your emailed report submission.

4. BUDGET RECONCILIATION

Expense Category	Description	Amount Spent
Supplies/Materials	_____	\$ _____
Venues/Rentals	_____	\$ _____
Advertising/Media	_____	\$ _____
Professional Services	_____	\$ _____
Other:	_____	\$ _____
Total Spent:	\$ _____	

If your final expenses differ from the amount awarded, please explain briefly below.

5. REFLECTION & FUTURE OPPORTUNITIES

What were your biggest takeaways or successes?

Did you encounter any challenges?

Did you plan to repeat or build upon this program in the future?

Yes No Possibly

If yes, how? _____

SIGNATURE

I certify that the above information is accurate and that the funds provided were used in accordance with the PR Grant guidelines.

Name: _____

Title: _____

Date: _____

SUBMIT TO:

Rich Evans, MDA Director of Marketing and Communications

Email: revans@michigandental.org