

United Way NSV – Mid-Year Report

Due Date: December 31, 2025

Organization Name: _____
Program Title: _____
Grant Amount Awarded: _____
Report Completed By: _____
Date Submitted: _____

1. Program Summary & Impact to Date

Provide a brief narrative of progress, key activities, and notable achievements so far.

2. Number Served, Demographics & Key Outcomes

Total individuals served to date: _____

Demographic breakdown (age, race/ethnicity, income, etc.):

Key outcomes achieved so far:

3. Beneficiary Testimonial

Include at least one story, quote, or testimonial from someone directly impacted by your program.

4. Financial Summary

Category	Awarded	Spent to Date	Remaining Balance
Personnel	\$_____	\$_____	\$_____
Program Expenses	\$_____	\$_____	\$_____
Other (list)	\$_____	\$_____	\$_____
Totals	\$_____	\$_____	\$_____

Confirmation: At least 40% of funds have been spent or committed as of this report.

☐ Yes ☐ No

5. Supporting Documentation

Attach all relevant receipts, invoices, or order confirmations related to expenditures.

6. Expense Spreadsheet (Detailed)

Please attach a separate Excel file with the following columns:

Purchased Items	Date	Cost	Notes
Example: Food vouchers	09/10/25	\$1,250	Distributed to 25 households

Submitted By:

Name: _____

Title: _____

Signature: _____

Date: _____