



Diocesan Home Mission Program  
Catholic Diocese of Richmond  
**2024 Final Report for Grant Awards**

-Please print or type-

Home Mission Parish Name: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Pastor: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Project: \_\_\_\_\_

Summary of Home Mission Grant use (Be as specific as possible):

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Grant Amount Received:     \$ \_\_\_\_\_

Grant Spent:                     \$ \_\_\_\_\_

Excess Funds Returned:     \$ \_\_\_\_\_

Supporting Documents Attached:

(i.e.. Receipts, canceled checks, paid invoices and other supporting documents)

**Report Due: 30 days after the expenditure of funds, or prior to next grant submission.**

Name: *(printed)* \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please send this completed form to Deacon Bob Young - via e-mail: [byoung@richmonddiocese.org](mailto:byoung@richmonddiocese.org)

Or via U.S. mail to:  
Catholic Diocese of Richmond  
7800 Carousel Lane.  
Richmond, VA 23294