



**Advancement
Foundation**
CATHOLIC DIOCESE
OF FORT WORTH

Office Use Only

Parish # _____

Date Received _____

Annual Diocesan Appeal Grant Report

Parish Name _____

Amount Awarded _____

Approved Grant Purpose _____

Do you anticipate using all grant funds this fiscal year? Circle: Yes No If no, please explain why not.

The purpose of this grant report is to

- be transparent with donors to the Annual Diocesan Appeal donors
- determine which grantees will be featured in the Sept/Oct North Texas Catholic
- learn how to improve the Annual Diocesan Appeal grant program

In the space provided on the next page, please tell us about the impact of this grant in your parish.

Required: Photos of grant impact that can be used in marketing and promotional materials. Please attach or email photos to grants@adv-fdn.org

Grant reports must be received before applications for future years will be considered.

This report must be signed by the Pastor or Parochial Administrator submitted no later than 5 p.m. March 15, 2026.

Pastor/Principal/Head of Non-Profit

Date

Parish Operating Grant Report Narrative

In this space, please describe how the grant funds have been and intend to be spent.

Suggestions:

- Include the number of people impacted with this grant. For example, number of altar servers grew from 3 to 18 young men.
- Include specific stories of individuals impacted by the grant
- Exact cost for each part of your total request is welcome, but stories are preferred.