

**COMMUNITY, FACILITY, RECREATION AND TOURISM GRANT
REPORTING COMPLETION PACKAGE**

Grant received:	Development	Community Event	Equipment
Leadership	Gravel	Project	Capital
Operating	Small Funding	Major Community/Tourism Event Grant	

Grant amount received:

GRANT RECIPIENT INFORMATION	
Name of Society or Community Group: _____	
Mailing Address:	
Street: _____	
City: _____	Postal Code: _____
Telephone: _____	Email: _____
Website: _____	Facebook: _____
Project/Activities Contact Person:	
Name: _____	Title within Organization: _____
Telephone: _____	Email: _____
Date project/activities were completed (from your original grant application): _____	
Please submit the following documents in person or via email to afinnegan@westlockcounty.com:	
<input type="checkbox"/> Samples of marketing, outreach and promotional materials (including acknowledgements). <input type="checkbox"/> Copies of press coverage (reviews, articles), if applicable. <input type="checkbox"/> Photos related to your project or activities, if applicable. <input type="checkbox"/> Any other relevant information, event agendas, evaluations, etc., if applicable.	

OFFICE USE ONLY
Did the applicant acknowledge support from Westlock County in all promotional materials, advertising and programs related to the project/activities being funded?
Was the funding used specifically for the purposes outlined in the application, unless otherwise authorized?
Was Westlock County Council or Staff invited to attend performances/events/activities related to the grant, if applicable?
Was a complete final report received within 180 days of activities/project completion?
Other comments:

Section 2: Project / Activities Report

Please provide a brief synopsis of your completed project / activities. Include attendance/participation numbers and any other relevant information and statistics:

What was the purpose of your project / activities and the goals that you set out to achieve? Please provide an evaluation of the extent to which your goals were met and the impact(s) on the organization:

Number of people served by the project/activities: audience _____ participants _____

Did you have any community partnerships involved with your project / activities? Please explain and include their roles:

Please explain how you provided acknowledgement of funding provided by Westlock County:

If your actual revenues and expenses resulted in a surplus of more than \$100, please provide a statement indicating how you plan to use it (this usage may need to be approved by Westlock County Council):

Section 3: Financials

Please enter the amounts from your original grant application in the BUDGETED columns, and your actual amounts in the ACTUAL columns. Please attach a separate sheet if more space is required.

GRANT REVENUE SOURCES	BUDGETED	ACTUAL
Westlock County Grant	\$ _____	\$ _____
Other Grant Specify: _____	\$ _____	\$ _____
Other Grant Specify: _____	\$ _____	\$ _____
Cash Donations / Sponsorships	\$ _____	\$ _____
Cash or Staff allocations from your organization	\$ _____	\$ _____
Ticket sales / admission: _____	\$ _____	\$ _____
Other Specify: _____	\$ _____	\$ _____
Other Specify: _____	\$ _____	\$ _____
Other Specify: _____	\$ _____	\$ _____
In-Kind (materials) Specify: _____	\$ _____	\$ _____
In-Kind (volunteer time) Specify: _____	\$ _____	\$ _____
Total Revenues	\$ _____	\$ _____

GRANT EXPENSES Place an asterisk (*) next to the items that were purchased under this grant funding.		
ITEM	BUDGETED	ACTUAL
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
In-Kind (materials): _____	\$ _____	\$ _____
In-Kind (volunteer time): _____	\$ _____	\$ _____
Total Expenditures	\$ _____	\$ _____

Would your event/activities have been able to happen without grant funding ? Yes No Maybe

Section 4: Declaration

I do solemnly declare that, to the best of my knowledge, all information contained in and attached to this report is complete and true in every respect.

Name: _____

Title within Organization: _____

Signature*: _____

*Typing your name above is equivalent to a signed declaration.

Date: _____