

Maureen McGuigan Deputy Director Department of Arts and Culture Electric City Trolley Museum 300 Cliff Street Scranton, PA 18503 Office: 570-963-6590, Ext. 102 Fax: 570-963-6447 mcguiganm@lackawannacounty.org

## 2015 Lackawanna County Arts and Culture Community Project Grant Final Report Form

Every grant recipient must complete a final report within 30 days after the grant project has taken place. If you have any questions regarding the final report, please contact Maureen McGuigan, Deputy Director of Arts and Culture at 570-963-6590 ext.102 or mcguiganm@lackawannacounty.org.

Please submit a final narrative of no more than three pages on your personal or organizational letterhead that answers the following questions:

- Name of organization or individual receiving grant.
- Address, telephone number, e-mail address, website if applicable.
- Award Amount.
- Project start and end date.
- How the grant money was spent.
- Total attendance at event.
- Who the event was geared toward.
- If possible, the composition of the audience in terms of sex, ethnicity, and geography (were they from the community or outside?)
- Who the community partner(s) were and what was gained by the partnership.
- Were there any changes in the grant execution from the original proposal?
- How you believe this project connected to the audience and the community.
- Any unexpected challenges.
- If you would like, please feel free to share any highlights or anecdotes that you found particularly meaningful.

## 2015 Community Project Grant Final Budget Report

(Indicate income and expenses associated ONLY with this project) **INCOME:** Use the space to the right of each line item to provide and explanation of the line

Second year applicants must show a 25% cash match of the amount requested

(if necessary) You may also complete the budget section on separate sheet of paper or excel sheet if you prefer.

- Lackawanna County Arts and Culture Grant
- Corporate Support
- Foundation or Grant Support
- Government Support
- Individual Support
- \$\_\_\_\_\_ Admissions
- Concessions or Merchandise
- \$\_\_\_\_\_ Other (please explain)

\$ \_\_\_\_\_ Total Income

**EXPENSES:** Use the space to the right of each line item to provide and explanation of the line (if necessary)

- \$\_\_\_\_\_ Artist Fees
- Administrative Fees
- \$\_\_\_\_\_ Technical
- \$\_\_\_\_\_ Space Rental
- \$\_\_\_\_\_ Travel
- \$\_\_\_\_\_ Advertising/Marketing
- \$\_\_\_\_\_ Other (please specify)
- \$ \_\_\_\_\_ Total Expenses

**IN-KIND CONTRIBUTIONS** (do not include your computation for expense and income)

Services: \_\_\_\_\_

Goods/Materials:

Space Rental:

## Social Media for your Project or Event :

Do you have a web site Yes	No	Do you use social media Yes No	
If you use social media in regards to your Project or Event please complete			
Facebook Yes _	No	if yes, number of Likes	
Twitter Yes _	No	if yes, number of Followers	
Instagram Yes _	No	if yes, number of Followers	
Pinterest Yes _	No	if yes, number of Followers	
How often do you post on social media			
Dailey Yes _	No	approximate number of times	
Weekly Yes _	No	approximate number of times	
Monthly Yes _	No	approximate number of times	
Pinterest Yes How often do you post of Dailey Yes Weekly Yes	No <i>n social m</i> No No	if yes, number of Followers edia approximate number of times approximate number of times	

## Please also submit with your narrative and budget:

- ONE (1) copy of Promotional information, i.e., flyers, brochures, press releases, etc. pertaining to the funded project.
- If promotional materials are not available you MUST attach copies of receipts as proof of purchase toward project expenses.
- Any other documents, samples or photos you would like to include.

Final Report prepared by: _	
Title:	

I, \_\_\_\_\_\_, hereby certify that: (1) the above information is correct; (2) the funds were used only for the purpose described above; and (3) the municipality complied in all respects with the program requirements for this grant and acknowledges that the failure to have done so may necessitate the repayment of all grant funds.

Signature	Title
Organization	Date