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| **Please note: if the final report becomes overdue, no funds can be released for any subsequent grant programs approved through the** **Department of Communities, Culture, Tourism and Heritage or Arts Nova Scotia until the overdue report has been received.** |

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| **Project title:** |
| **Name of the organization:** |
| **Name of the person filling the report:** |
| **Position:** |
| **Phone number:** |
| **Email address:** |

1. **MAIN ACTIVITIES AND DATES**

Please describe the activities that took place including dates, place and the number of people who attended (you can add some pictures of the activity).

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1. **RESULTS OBTAINED AND EXPECTED EFFECTS**

**Results and benefits:** Explain how your project enabled you to meet your stated objectives in your request. What are the results or benefits of your project?

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1. **TIMELINE**

Was the project completed on schedule and in accordance with the description in question 1 of your application form?

Yes  No

If no, please explain below how the completed project differs from the original project.

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1. **FINANCIAL ASSISTANCE**

Has the financial assistance received through this program been used for the purposes for which it was granted?

Yes  No

If not, please indicate below how the use of the grant differs from the intended purposes.

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1. **ACKNOWLEDGMENT**

In what ways did you acknowledge the financial contribution? (Attach copies of any printed materials on which the logo was included, financial contribution mentioned, …)

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**FINANCIAL REPORT**

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| **REVENUES** | | **EXPENSES** | |
| **Registration fees, entry fees, etc.** | **$** | **Equipement** | **$** |
| **Donations** | **$** | **Professional fees**  *Specify:* | **$** |
| **Other government funding(s) –***Specify:* | **$** | **Marketing** | **$** |
| **Applicant’s contribution** | **$** | **Administration** | **$** |
| **In-kind contribution** | **$** | **Travel** | **$** |
| **Other sources of funding** – Specify : | **$** | **Training** | **$** |
| **Amount received from the Office of Acadian Affairs and Francophonie under the *Acadian and Francophone community projects program*** | **$** | **Other**  *Specify:* | **$** |
| **TOTAL REVENUES** | **$** | **TOTAL EXPENSES** | **$** |
| ***FOR INTERNAL PURPOSES ONLY***  *AMOUNT ALREADY SPENT* | **$** | ***FOR INTERNAL PURPOSES ONLY***  *PAYABLE* | **$** |

I hereby certify that the information provided in this report is accurate

Applicant’s signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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