

ARTS INITIATIVE FINAL REPORT

Final Reports in this format may be printed, filled out, and mailed to the coordinator; however, all requested supplemental material must also be sent such as copies of programs, brochures, posters, flyers, newspaper articles, etc. They may be scanned and emailed or mailed in the traditional fashion.

REMEMBER THAT ELIGIBILITY FOR CONSIDERATION FOR FUTURE FUNDING DEPENDS ON SATISFACTORY COMPLETION OF THIS YEAR'S AGREEMENT, INCLUDING THE FINAL REPORT.

**Final Reports
not received within two months of the due date are
not eligible for funding the following year.**

Please email Final Report to: anne@LARAC.org

or mail to:
ARTS INITIATIVE
c/o LARAC
7 Lapham Place
Glens Falls, NY 12801

3. *Fill in the cells that apply to your program. If you need more room, attach a separate page.*

Event	If a performance,-- # of people attending	If a workshop-- # of people participating	Estimate # of children & teens at event	Estimate # of adults at event	Estimate # of senior citizens at event	# of professional performers/artists	# of nonprofessional performing or presenting the event	# of other presenters (i.e., instructors, speakers, etc.)

4. *What benefit do you feel this event provided to the community?*

5. *How would the program have changed had you not received ARTS INITIATIVE funding?*

6. Attach proof that the program was presented and that you gave public credit for funding. *Include copies of press releases, programs, promotional materials, newspaper articles, and flyers*
Without these attachments, your final report will be considered incomplete.

FINANCIAL INFORMATION

List any in-kind contributions donated to the project.
 (i.e., non-money items that were donated by individuals or businesses.)

Source of donation	Item donated	Estimated Dollar Value

PROJECT FINANCES Round off to the nearest dollar.

(STATE FIGURES ONLY FOR THE ACTIVITY FOR WHICH FUNDING WAS RECEIVED.)

EXPENSES

PERSONNEL

Administrative \$ _____

Artistic _____

Technical _____

OUTSIDE PROFESSIONAL SERVICES

Printing _____

Other _____

EQUIPMENT RENTAL/PURCHASES

SPACE RENTAL

TRAVEL/TRANSPORTATION

ADVERTISING/PUBLICITY

REMAINING OPERATING EXPENSES

Supplies _____
 Costumes _____
 Sets, lights _____
 Postage _____
 Insurance _____
 Phone _____
 Misc. _____

TOTAL EXPENSES (C) \$ _____

INCOME

EARNED INCOME

Tickets, Admissions \$ _____

Subscriptions _____

Tuition, Workshops _____

Concessions, sales _____

Fundraising _____

Other _____

UNEARNED INCOME

Contributions

Individual \$ _____

Corporate _____

Government _____

Grants (do not include
 Arts Initiative here) _____

Memberships _____

Other _____

TOTAL INCOME (A) \$ _____

ARTS INITIATIVE GRANT (B) \$ _____

TOTAL (A + B) \$ _____

TOTAL EXPENSE (C) \$ _____

SURPLUS OR DEFICIT AFTER GRANT \$ _____

If a surplus, explain why: _____

I hereby certify that _____ has performed the services and/or
Name of Organization
 activities, as stated in the Agreement with LARAC.

Signature Title Date

Mail report to: Anne Smoczynski, Arts Initiative, c/o LARAC, 7 Lapham Place, Glens Falls, NY 12801
 or email as an attachment to anne@larac.org: however information from #8 must be sent by mail or fax.