

OSAC VISUAL ARTS PROGRAM GRANT - FOLLOW-UP REPORT

Report must be submitted no more than 30 days after the completion of the project

Arts Council: _____

Contact Name: _____

Mailing Address: _____

Phone: _____ Fax: _____ Email: _____

The grant was for (*check one*):

- | | | | |
|--------------------------|---|--------------------------|--|
| <input type="checkbox"/> | Exhibition Programming | <input type="checkbox"/> | Art Events |
| <input type="checkbox"/> | Artist Development/ Local Adjudication Arts | <input type="checkbox"/> | Artist Presentations, Community Projects & Workshops |

1. Briefly describe what happened in the program. If the program **changed from** the plan submitted in the application, please explain why?

2. Describe the audience and the number attending or participating in the program.

3. Describe what your **Arts Council felt was successful** about this program?

4. Describe what you **think participants/audiences found successful** about this program?

5. If your Arts Council were to do this program again, what would be done differently?

6. Actual Revenue/Expenses

Visual Arts Program Grant Actuals**ACTUAL REVENUE**

•OSAC - received grant amount	\$
(75% of grant to date)	
Pending from OSAC (25% of grant)	\$
•Arts Council	\$
•2nd Partnering Arts Council	\$
•Regional Recreation Assoc.	\$
•Other grants	
(ie. Arts Board Project Grant, TIP, etc.)	
•	\$
•	\$
Self Generated Income:	
•Registrations:	\$
(workshop/ adjudication fees)	
•Admission (door, box office)	\$
•Fundraising	\$
•Donations	
•individual	\$
•corporate	\$
•Product sales	\$
•Inkind (ie. staff hours) - specify	\$
•	
•	
•Other (specify)	\$
•	
Total Actual Revenue:	\$ -
Difference: Surplus/Deficit (+/-)	\$

ACTUAL EXPENSES

•Resource Person expenses:	
• Fees: ___ days @ CARFAC rates=	\$
or \$___/ hr. x ___ hrs. =	
• Travel: @ \$0.30/km x ___ km =	\$
• Accommodation:	\$
• Meals: @ \$30/ day x ___ days =	\$
•Materials (only eligible for children	\$
and low income participants)	
•Project Facilities Expenses	\$
(facility rental specifically for the project)	
•Equipment rental (easels, display boards)	\$
•Production/ Technical Services	\$
(services for lighting, operating digital equipment)	
•Marketing expenses:	
•Printing (invitations, posters, flyers)	\$
•Advertising (newspaper ads)	\$
•Postage/ phone/ fax	\$
•Other (specify)	\$
•	
Total Eligible Expenses:	\$ -
Non-Eligible Expenses:	
•Prizes/ Gifts*	\$
•Reception*	\$
•Other (specify)*	\$
Total Actual Expenses:	\$ -

* ineligible expenses

We have attached copies of any invoices, receipts, contracts and promotional information (such as brochures, flyers, newsletters, advertisements, etc) associated with the delivery of this program.

Yes No

On behalf of the above named organization, the information is an accurate accounting and description of the use of the Visual Arts Program Grant provided by the Organization of Saskatchewan Arts Councils. We declare that all statements on the form are true and that our publicity materials credited the Organization of Saskatchewan Arts Councils, the Saskatchewan Arts Board and Saskatchewan Lotteries.

Signed: _____ **Delegate**
 _____ **Date**

Return the follow-up report to:
 Visual & Media Arts Coordinator
 Organization of Saskatchewan Arts Councils
 1102 – 8th Avenue
 Regina, Saskatchewan S4R 1C9
 Phone: 586-1252 Fax: 586-1550 E-mail: zoe@osac.ca

