

# FINAL REPORT FORM

## GRANT FOR DISTANCE LEARNING OF ART & CULTURE



### Applicant's Information

Organization Name: \_\_\_\_\_

Fiscal Sponsor (if different): \_\_\_\_\_

Project Director: \_\_\_\_\_

Postal Address: \_\_\_\_\_

City: \_\_\_\_\_ Oregon Zip code: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

### Grant Project Description:

Number of individuals attended this program: \_\_\_\_\_

Grant Amount Awarded: \$ \_\_\_\_\_

(The grant can only be used for out-of-pocket expenses.)

Total Out-of-pocket expenses: \$ \_\_\_\_\_

Total Project Cost (including values of volunteer time and/or in-kind donations) :

\$ \_\_\_\_\_

### **Columbia County Cultural Coalition**

PO Box 824, St. Helens, OR 97051 Email: [grant@columbiacultural.org](mailto:grant@columbiacultural.org) Website: [www.columbiacultural.org](http://www.columbiacultural.org)

Funded by Oregon Cultural Trust. We are a 501 c3 nonprofit.

Please fill out the table below.

**Project Cost Summary:**

<b>Expense Items</b>	<b>Amount</b>	<b>Notes</b>
<b>Total</b>		

*Examples:*

<b><i>Expense Items</i></b>	<b><i>Amount</i></b>	<b><i>Notes</i></b>
<i>Artist fee</i>	<i>\$450</i>	<i>3 of 60 min classes, \$150/ class</i>
<i>Zoom subscription</i>	<i>\$30</i>	<i>2 months, \$15/ month</i>
<i>Facebook ads</i>	<i>\$100</i>	
<i>Managing the workshops</i>	<i>\$0</i>	<i>Volunteer time</i>
<i>Total</i>	<i>\$580</i>	

Please give us some photos of your project that CCCC can use for publicity.

After this final report is reviewed and approved by the board, the check will be issued to your organization or fiscal sponsor. Please don't hesitate to contact us if you have any question or comment.

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