*This report should be completed if you received funding from the City of Oshawa under the* ***Oshawa Community Grant Program****. The report is to be completed within 60 days of the event/initiative. Fund recipients who do not submit a completed form will not be eligible to apply for further funding.*

**Funding Recipient`**

### Name Click or tap here to enter text. Position Click or tap here to enter text.

### Address Click or tap here to enter text.

### City Click or tap here to enter text. Postal Code Click or tap here to enter text.

### Telephone Click or tap here to enter text. Email Click or tap here to enter text.

**Details of Event/Initiative/Project**

1. **Grant Category Applied For:**

Arts, Culture, Heritage & Environmental – Events

Arts, Culture, Heritage & Environmental – Development

Strong Inclusive Communities

Fundraising

1. **Amount Received from the Oshawa Community Grant Program**

Monetary $ Click or tap here to enter text. In-Kind $ Click or tap here to enter text.

1. **Provide a short description of the project and the activities you undertook with the assistance of your funding from the Oshawa Community Grant program:**

Click or tap here to enter text.

1. **Event/Initiative Date** Click or tap here to enter text.
2. **Venue/Location** Click or tap here to enter text.
3. **Number of Attendees** Click or tap here to enter text.
4. **Was there a fee for attendees to participate** **Yes**  **No**
5. **Were there any changes to the event/ initiative that made it different from what was outlined in the application? If so, Describe:**

Click or tap here to enter text.

1. **Were the goals and outcomes achieved as planned? Explain:**

Click or tap here to enter text.

1. **How did this initiative deliver in supporting the** [Oshawa Strategic Plan](https://www.oshawa.ca/en/city-hall/resources/Documents/Oshawa_Strategic_Plan_2020_Website_Final.pdf):

Click or tap here to enter text.

1. **Did the event/ initiative focus outreach and participation from any of the following target populations?**  Check the boxes that apply

☐ Indigenous peoples

☐ Racialized peoples

☐ 2SLGBTQ+

☐ Youth

☐ Seniors

☐ ☐ Unsheltered/Living in poverty

☐ Immigrants/Newcomers

☐ Women

☐ People living with disabilities

1. **Please identify partners you collaborated with to deliver the event/initiative:**

Click or tap here to enter text.

1. **Lessons Learned:** Click or tap here to enter text.
2. **Are there plans to hold this event/initiative next year:** Yes  No
3. **If yes, what are the plans for funding?** Click or tap here to enter text.
4. **If your event/initiative was a fund-raising venture, please confirm details of** **donation:**

Charity Click or tap here to enter text. Amount donated Click or tap here to enter text.

1. **Please provide your comments and/or suggestions on the grant application process:**

Click or tap here to enter text.

**Financial Reporting**

1. **Please provide details of the Income & Expenditure Actuals for the event.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Revenue** | |  |  |
| Oshawa Community Grant | $ |
| Other Grants | $ |
| Donations | $ |
| Participant Fees | $ |
| Income from Operating Budget | $ |
| Other Income | $ |
| **Total Revenue** | $ |
| **Expenses** | | |
| Professional Services | | $ |
| Salaries | | $ |
| Operation/Production Cost | | $ |
| Marketing & Promotion | | $ |
| General Administration | | $ |
| Other Expenses | | $ |
| **Total Expenses** | |  |
| **Surplus/(Deficit)** | | | **$** |

Signature of signing officers (who submitted the original application)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: Name:

Please note:

You may attach any other documents that support this funding report, such as photos, news stories, or participant feedback.

If attaching photos, please indicate if the City of Oshawa has permission to share those photos publicly. Photos may still be submitted for the City’s internal use without this permission.