



In accordance with Section 4.10 of the Recreational and Cultural Grants-in-Aid policy, all grant recipients are required to submit an Annual Report by January 31st of each year. This procedure has been implemented in an effort to ensure more accountability to tax payers and other organizations receiving Grant-in-Aid (GIA) funding. By doing so the Peace River Regional District will be following best practices employed by other municipalities and regional districts. This information will also assist the Rural Directors in making fair and equitable decisions on future Grant-in-Aid funding applications for all organizations. The report should include the following details:

- Progress made on all funded projects, activities, initiatives or events;
- Information on how grant funding was spent;
- Summary of capital costs and/or operational costs (include a copy of invoice to support the expense paid for insurance, if applicable); and
- Photos must be provided showing projects, including capital projects, completed with Grants-In-Aid funds.

Grant recipients should note that failure to provide this information could result in the following:

- Organizations being required to repay grant funds; and
- Not being considered for future grant funding.

Organization Name: _____

Mailing Address: _____

Year GIA funds received: _____

Project Summary

1. Please list below the reason(s) your organization received GIA funds (this may include capital projects, activities, events or general operating costs).

2. Describe what was accomplished or completed on your capital projects, activities, and events for which you received GIA funds.

3. Please provide in detail what was not completed and why?

4. When do you expect to complete all outstanding projects, activities or events?



5. If your organization used GIA funds to support operational costs, please list the expenses below.

6. If GIA funds were used to support insurance expenses, please indicate below what type of insurance (liability, directors insurance, property, building, etc.). **Please attach insurance statement/policy that outlines the type of insurance and a breakdown of the cost.**

Summary of Financial Information

Please complete the following table.

Total GIA Contribution	_____
Less Total Operational costs paid for by GIA	_____
Less Total Capital costs paid for by GIA	_____
Total GIA funds unused	_____

If there is unused GIA funds please explain why and how your organization intends utilize them.

Signatories

We, the undersigned BOARD MEMBERS, certify on behalf of the organization that all of the information stated is correct.

Board Member (Treasurer)

Name (print): _____

Position: _____

Phone Number: _____

E-mail: _____

Date: _____

Signature: _____

Board Member

Name (print): _____

Position: _____

Phone Number: _____

E-mail: _____

Date: _____

Signature: _____

THIS REPORT WAS PREPARED BY:

Name (print): _____

Phone Number: _____

Signature: _____

E-mail: _____

Date: _____

Retain a copy of this report for your records.