

**Oshkosh Area Community Foundation  
ARTS GRANTS**

**SIXTY DAY FINAL REPORT & EVALUATION FORM**

NAME OF ORGANIZATION: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_ PHONE: \_\_\_\_\_

NAME OF PROJECT: \_\_\_\_\_

GRANT AMOUNT: \_\_\_\_\_ TOTAL PROJECT COST: \_\_\_\_\_

ESTIMATED NUMBER OF PEOPLE REACHED: \_\_\_\_\_

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Signature of Office Governing Body	Title	Date
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Please answer the following questions clearly and concisely and do not exceed four pages.

1. Is this project likely to become a regular part of your organization's programming? Why or why not?
2. If you were to offer this project again, what would you do differently?
3. What were the best aspects of this project?
4. Will there be a long-term impact? If so, what will that be and to whom?
5. Do you have releases in your files for individuals who appear in photographs submitted with this report?
6. Please list target audiences that benefited from your grant.
7. Fill out the attached project budget. Did your proposed budget meet with this project? Why or Why not?

**Note: please attach all published materials regarding the project including posters, newspaper articles, or releases, programs, advertisements etc.**

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please return this completed report to:**

Oshkosh Area Community Foundation  
230 Ohio Street, Suite 100  
Oshkosh WI 54902

**PROJECT BUDGET**

	Cash	In-kind
A. Anticipated Income		
1. Unearned (contributions)		
(source) _____	_____	_____
_____	_____	_____
_____	_____	_____
2. Earned (admissions, special events, Ticket sales,		
(source) _____	_____	_____
_____	_____	_____
_____	_____	_____
Subtotal Anticipated Income:	_____	_____
 Grant Dollars Received	_____	_____
<b>TOTAL INCOME:</b>	_____	_____
 B. Anticipated Expenses		
1. Personnel (this project only)		
a. Internal:		
Administrative	_____	_____
Artistic	_____	_____
Technical	_____	_____
b. External: (contracted services)		
Administrative	_____	_____
Artistic	_____	_____
Technical	_____	_____
2. Rent		
Hall	_____	_____
Equipment	_____	_____
Royalties	_____	_____
Other	_____	_____
3. Supplies, Materials	_____	_____
4. Publicity/Promotion	_____	_____
5. Type of Transportation	_____	_____
6. Lodging	_____	_____
7. Other/Misc. (please explain)	_____	_____
<b>TOTAL EXPENSES:</b>	_____	_____