

MASTERTON ARTS FUND PROJECT COMPLETION FORM

This Project Completion Report should be completed returned within two months after the project completion date, either by:

| | | | | | |
|--------------------|---|-----------------------|--------------------------------|---------------------|--|
| POSTING TO: | Masterton District Council Arts Fund PO Box 444, Masterton 5840 | DELIVERING TO: | 161 Queen Street, Masterton | EMAILING TO: | deannae@mstn.govt.nz |
|--------------------|---|-----------------------|--------------------------------|---------------------|--|

If you have any questions about this Masterton Arts Fund Project Completion Form, contact Deanna Elwin, Grants Administrator by or email deannae@mstn.govt.nz or telephoning (06) 370 6272

Please complete the following sections of the Project Completion Form:

A. GENERAL DETAILS

| | |
|---------------------------------|--|
| Name of applicant/organisation: | |
| Postal Address: | |
| Email: | |

B. PROJECT DETAILS AND ACCOUNTABILITY DECLARATION

| | |
|----------------------|----|
| Project name: | |
| Location of Project: | |
| Date(s) of Project: | |
| Grant Received: | \$ |
| Signature: | |
| Date: | |

C. DETAILS OF PROJECT INCOME AND EXPENDITURE

Please show the costs for the project, including your own contribution [if applicable]:

| Project Income | Amount <i>(excluding GST)</i> |
|---------------------------|-------------------------------|
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| Total Income: | \$ |
| | |
| Project Expenditure | Amount <i>(excluding GST)</i> |
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| Total Expenditure: | \$ |

Please use a separate sheet if needed

D. HIGHLIGHTS

Provide a brief description of the highlights of the project

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E. BENEFIT TO THE COMMUNITY

Provide a brief description of how the project was of benefit or made a difference to the arts sector/economy of our community

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Please use a separate sheet if needed