# Louisiana Decentralized Arts Funding Program

## **DAF FY 2017- PROJECT ASSISTANCE**

Funding Period - October 1, 2016 to September 30, 2017

FINAL REPORTS MUST BE SUBMITTED NO LATER THAN THIRTY (30) DAYS AFTER COMPLETION OF SERVICES OR **OCTOBER 30, 2017**, WHICHEVER COMES FIRST.

DAF FY 2017 forms are available online at <a href="www.bayouarts.org">www.bayouarts.org</a>
For assistance with your Final Report, contact Erica Anderson, Bayou Regional Arts Council, Executive Director at 985-856-3326 or <a href="mailto:erica@bayouarts.org">erica@bayouarts.org</a>, prior to deadline.

This Decentralized Arts Funding Program was funded by the Louisiana Division of the Arts, Office of Cultural Development, Department of Culture, Recreation and Tourism Office of the Lt. Governor, State of Louisiana and administered in Region 3 by the Bayou Regional Arts Council.

Submit Final Report to: Bayou Regional Arts Council 7910 Park Avenue Houma, LA 70364



1a. Grant Awarded DAF FY	2017			
1b. Grant Expended				
2. Organizational Budget				
3. Organization				
Address				
City	State	LOUISIAN	A Zip	
Parish	Phone		FAX	
Website				
4. Contact Person and Title				
Email If different than above:				
Address				
City		State	LOUISIANA	Zip
Phone		FA	X	

5. Sub-Applicant		
(if applicable)		
6. Project Title		

**7. PROJECT ACTIVITY DETAILS:** (Copy this page if additional space is needed)

DATE	TYPE OF ACTIVITY	LOCATION w/ADDRESS	WHO	# INDIVIDUALS

### 8. IMPACT

TOTAL ATTENDANCE:	TOTAL ARTISTS/ARTISTIC FEES:			
Number of Persons Ages 18 and Under:	Total Number of Artists Involved:			
Number of Adults/General Public:		Total Number of Artists Paid:  Total Amount Paid to Artists:		
Total Attendance:	0			
TOTAL EMPLOYED: Total Number of Full-time Staff Employed:				
Total Number of Part-time Staff Employed				
Total Number of Contracted Staff:	•			
Total Number of Volunteers:				
Total Number of Volunteers.				
9. NARRATIVE QUESTIONS: Please check the appropriate boxes and answer the follow				
<b>A.</b> Did the completed project differ from th If yes, how?	e grant agre	ement and/or application? Yes N	0	
B. Did you experience any problems in adm If yes, explain.  Yes  C. What was the commu				

- **D.** On a scale of 1 to 5, how would you rate the artistic merit of the project? 1 is the lowest and 5 is the highest.
- **E.** How was the project promoted to the public? Check all that apply:

Direct Mail Flyers Neighborhood Posters Internet

Television Ad Newspaper Ad Radio PSA Meeting or Formal Presentation Street Banners Billboard Word of Mouth Other:

yes, how wi	n on continuing the ll the project be sus	nis project in the stained or change	e future? Yes ed?	No		
. How were	elected officials (s	tate/local/schoo	l) notified of yo	our project? D	id they attend o	or respond?
. What else	could the Bayou F	Regional Arts Co	ouncil do for yo	ou?		

10. YEAR-END ORGANIZATIONAL BUDGET: Note: Most recently completed year-end financial statements

and annual audits may be substituted for this page. Audits are required for organizations receiving more than \$25,000 in combined local, state, and federal funds. Round numbers to the nearest dollar amount. Include both grant funds and additional cash.

	Fiscal Yea	ır Ends:
	INCOME	
	Admissions, Memberships, Subscriptions	
	Contracted Services	
	Corporate Support	
	Foundation Support	
	Fundraising	
	Federal Government: Identify source	
	Local Government: Identify source	
	State Government: Identify source	
	DECENTRALIZED ARTS FUNDING GRANT	
	TOTAL INCOME:	\$ 0.00
Round 1	numbers to the nearest dollar amount. Include both grant funds and ac  PROJECT EXPENDITURES ONLY	lditional cash.
	(A) Personnel – Administrative	
	(B) Personnel – Artistic	
	(C) Personnel – Technical	
	(D) Fiscal Agent Fees	
	(E) Outside Professional Services – Artistic	
	(F) Outside Professional Services – Other	
	(G) Utilities	
	(H) Space Rental	
	(I) Travel/Per Diems	
	(J) Marketing (promotion, publicity, print)	
	(K) Equipment Rental	
	(L) Supplies and Materials	
	(M) Postage/Shipping Costs	
	(N) Insurance	
	(O) Other: List Below	
	• • •	

TOTAL PROJECT EXPENDITURES:	\$ 0.00
TOTAL PROJECT REVENUE	
<b>Decentralized Arts Funding Grant</b>	
Other Cash Support: List Below	
TOTAL PROJECT REVENUE:	\$ 0.00
TOTAL IN-KIND SUPPORT (Optional)	

## 12. GRANT EXPENDITURE SUMMARY: ONLY LIST SPENT GRANT FUNDS. Each letter must

correspond to the line item listed in EXPENSES on the previous page.\_

A	F	K	
В	G	L	
C	Н	M	
D	I	N	
E	J	0	

### **GRANT EXPENDITURE DOCUMENTATION:**

EXPENDITU RE CATEGORY (corresponding letter, see above)	DATE (in reference to documentation)	PROVIDER DOCUMENT/ PAYMENT DOCUMENTATION (invoice/receipt and check #)	AMOUNT (total check or payment)	PAYEE (name of person or company payment is made to)	AMOUNT PAID FROM GRANT (portion of total amount paid with grant funds)

TOTALS		\$ 0.00	\$ 0.00

### **CHECKLIST:**

Complete Final Report Form

**Grant Expenditure Documentation** 

Additional evaluation reports, if available

Samples of printed materials including proper credit and appropriate logos. Statements and logos are **required** on all printed promotional material associated with the project including, but not limited to, all mailings, programs, posters, flyers, programs, etc. A copy of a public service announcement containing the statement may also be submitted.

Copies of newspaper reviews or similar reports of activities under this grant

Images of grant sponsored activities [Photographs (digital preferred, print); video; CD, etc.]

#### **ASSURANCES:**

We, the undersigned, hereby certify that to the best of our knowledge all facts, figures and representations in this final report are true and correct; that all art programs or services were completed in accordance with terms and conditions set forth in the grant agreement and the FY2017 Decentralized Arts Funding Program Guidelines.

<b>Authorizing Official (President</b>	or Chair)	<b>Project Director</b>	
Signature		Signature	
Typed Name/Title		Typed Name/Title	
Date		Date	