

## SMALL GRANTS PROGRAM FINAL REPORT

**EAST CENTRAL REGIONAL DEVELOPMENT COMMISSION – EAST CENTRAL ARTS COUNCIL**  
**100 PARK STREET SOUTH**  
**MORA, MN 55051 (320) 679-4065** DATE OF REPORT: \_\_\_\_\_

<b>NAME &amp; ADDRESS OF ORGANIZATION/ Project Director:</b>	<b>FISCAL AGENT:</b>
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**PROJECT SUMMARY:**

Please summarize the results of your project including dates, activities, attendance, etc. Describe how your project contributed toward the development of the arts in your community. Describe any problems you may have had and solutions utilized. Tell us about your success! Continue on back of this form or a separate piece of paper.

**BUDGET SUMMARY (in whole numbers):**

	APPROVED FUNDING	FUNDS EXPENDED
	EC RDC FUNDS	(record actual project costs& include receipts)
ARTIST FEES		
OTHER		
TOTAL		
	TOTAL EC RDC FUNDS APPROVED	TOTAL FUNDS EXPENDED

Budget comments (if needed, can go on the back)

**CERTIFICATION:** I certify that the information contained in this report to be true and correct to the best of my knowledge.

\_\_\_\_\_ Project Director \_\_\_\_\_

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Printed Name

Title

Signature

Date