

QuickFunds PROFESSIONAL DEVELOPMENT

Final Report

Grant period July 1 to June 30 – Final Report due no later than July 31st

Name _____

Address _____ P.O. Box _____

City _____

State _____ Zip _____ Phone _____

County _____ Cell _____

E-mail _____

new address new e-mail new phone

SSN _____ Grant Number _____ Grant Amount _____
(required for payment)

NARRATIVE

Attach additional sheets as necessary.

- 1) Compare the actual accomplishments of the project to those proposed in the application.
- 2) Explain the impact of this grant to applicant/community/region and the challenges encountered.

ATTACHMENTS

Please submit copies of programs, publicity, or other relevant materials.

FINANCIAL

Actual Expenses: Please submit legible receipts for fees, lodging,, and airfare and retain copies for three years. Indicate portion of expense allocated to ICA Grant funds.

EXPENSES	ICA Grant	Cash Match	TOTAL
FEES (registration, materials, etc.) (list)			
TRAVEL			
Airfare/Car Renal/Mileage (private vehicle \$.55/mile)			
Meals (not to exceed \$30/day)			
Lodging			
OTHER EXPENSES (attach itemization)			
TOTAL			

(Required 1:1 cash match)

Authorizing Signature: "I certify that I have complied with the guidelines, that I have met the requirements, and that all of the information contained in this report is true and correct to the best of my knowledge."

Signature _____ Date _____

Mail this form to Idaho Commission on the Arts, PO Box 83720, Boise, Idaho 83720-0008

FOR ICA OFFICE USE ONLY Program Director Review _____

Agency Approval _____