



Painted Hand Community Development Corporation

Suite 2-21 Bradbrooke Ave., North, Yorkton, Sask. S3N 3R1

Ph: (306) 782-1525

Fax: (306) 782-1523

FOLLOW-UP REPORT

IMPORTANT: Please **COMPLETE ALL SECTIONS OF YOUR FOLLOW-UP REPORT** and do not alter the format. **All areas of the application must be completed.** Please disclose all expenditures incurred for your project, program or community event. Use additional paper if necessary.

Provide all receipts, financial documents etc. Please print clearly.

| ORGANIZATION INFORMATION | | | |
|---|--|------------------------------------|-------------|
| Name of Organization: | | | |
| Address: | | | Postal Code |
| Contact Person: | | | |
| Phone Number: | | Fax: | |
| ALLOCATION | | | |
| Program Title: | | | |
| Date of Allocation: | | | |
| 1. DESCRIBE THE PARTICIPANTS OF THE PROJECT, PROGRAM OR COMMUNITY EVENT: | | | |
| # of Participants anticipated: | | # of Actual Participants: | |
| Male | | Over 19 years of age | |
| Female | | Seniors (65 years of age and over) | |
| Under 6 years of age | | # of families | |
| 13 TO 19 years of age | | Other: | |
| 2. INDICATE THE GEOGRAPHICAL AREA THE PROJECT, PROGRAM OR COMMUNITY EVENT SERVED: | | | |
| | | | |
| 3. WERE OBJECTIVES / GOALS ACHIEVED AND TO WHAT EXTENT? | | | |
| | | | |

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|--|
| 4. WHAT TANGIBLE SERVICES DID THE PROJECT, PROGRAM OR COMMUNITY EVENT PROVIDE TO THE PARTICIPANTS? |
| |
| 5. INDICATE WHAT CO-ORDINATION, IF ANY, OCCURRED WITH OTHER FUNDING SERVICES: |
| |

ACTUAL PROGRAM COSTS *(please include your receipts or any financial supporting information)*

| INCOME | PROJECTED (In application) | ACTUAL |
|--|-------------------------------|--------|
| 1. Cash Donations: | \$ | \$ |
| 2. Fund Raising Activities: | \$ | \$ |
| 3. Other Grants/Contributions (Please list) | \$ | \$ |
| a. | \$ | \$ |
| b. | \$ | \$ |
| c. | \$ | \$ |
| d. | \$ | \$ |
| 4. Amount received from Painted Hand Community Development Corporation (PHCDC) | | \$ |
| TOTAL INCOME: | | \$ |

| DIRECT COSTS – **RECEIPT VALIDATION** | PROJECTED (In application) | ACTUAL |
|---|-------------------------------|--------|
| 5. Independent Contractor Fees or Salaries (*specialty trades that are essential to project or program*) | \$ | \$ |
| 6. Honorariums | \$ | \$ |
| 7. Building Materials | \$ | \$ |
| 8. Supplies and Other Program Materials | \$ | \$ |
| 9. Rent (portion related to project or program only) | \$ | \$ |

| | | |
|---|----|----|
| 10. Utilities (portion related to project or program only) | \$ | \$ |
| 11. Minor Equipment less than \$1,000.00 (portion related to project or program only) | \$ | \$ |
| 12. Major Equipment more than \$1,000.00 (portion related to project or program only) | \$ | \$ |
| 13. Transportation | \$ | \$ |
| 14. Other direct project or program related costs (please specify) | \$ | \$ |
| a. | \$ | \$ |
| b. | \$ | \$ |
| c. | \$ | \$ |
| d. | \$ | \$ |
| TOTAL PROJECTED/ACTUAL EXPENDITURE | \$ | \$ |
| TOTAL ACTUAL EXPENDITURES (Income Less Expenses) | | \$ |

TERMS AND CONDITIONS

1. All follow-up reports must be completed no later than sixty (60) days after project or program completion/end date. Any follow-up reports not completed within sixty (60) days after the project or program completion date may result in the remaining 20% of the funding being forfeited and placed back into the allocation fund for redistribution by the PHCDC.
2. In the event that the final project cost is lower than originally projected, the amount of eligible funding will be adjusted to reflect the lower cost and will be considered an overpayment. The applicant organization will be required to refund the overpayment to the PHCDC upon demand.
3. Unused funds or funds used for purposes other than what was approved in the original application must be returned to the PHCDC, unless otherwise agreed to by the PHCDC.
4. No adjustments will be made if the final project costs are higher than originally projected.
5. The applicant organization must keep all original documentation relating to their approved project or program for a period of seven (7) years.
6. Deviation from approved allocations must be submitted in writing to the PHCDC and approval must be received from the PHCDC prior to any expenditure of the allocated funds.
7. Organizations must have the follow-up reports completed before submitting an application that is identical in project name and/or overview.
8. Organizations must comply with minimum standards that ensure proper accountability and effective financial reporting.
9. Applicants who fail to comply with the terms and conditions associated with their original application for funding including completion of their follow-up reports may be ineligible from receiving any further funding from the PHCDC for any other project or program until such time as the full amounts owing have been repaid in full to the PHCDC.

INFORMATION CERTIFICATION

On behalf of the Applicant Organization, we hereby represent, warrant and certify the following:

- (a) that the information contained in this follow-up report together with any supporting documentation associated therewith reflects in their entirety the actual costs associated with the related project or program; and
- (b) that the information contained in this follow-up report is true and correct and is being executed on behalf of the Applicant Organization by its duly authorized signing authorities.

WE HEREBY certify that the information contained in this follow-up report is accurate and complete. Report must be signed by 2 authorized representatives on behalf of the Applicant Organization.

Signature of Authorized Representative

Position

Print Name

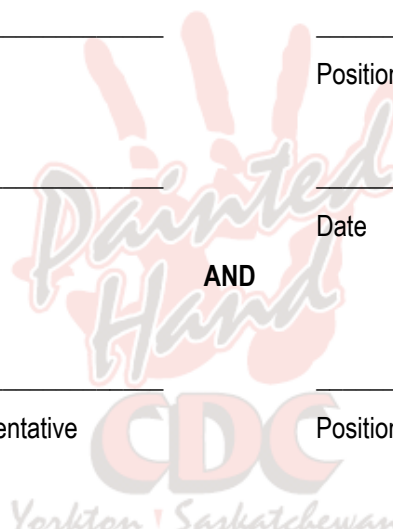
Date

Signature of additional Authorized Representative

Position

Print Name

Date



The follow-up report is to be **completed and submitted within 60 DAYS AFTER PROJECT OR PROGRAM COMPLETION.**

Please mail the follow-up report to:

PAINTED HAND COMMUNITY DEVELOPMENT CORPORATION

Suite 2 – 21 Bradbrooke Ave. North

Yorkton, Sask.

S3N 3R1