



# **Community Grant Program**

## **Reporting Completion Package**

***Funded by Westlock County in order to build strong communities  
and enhance their economic vitality and quality of life.***

## ***Reporting at Completion***

**Remit a written Report and be sure to include the following sections:**

Recipients of funds must file a Project Completion Package with financial accounting statement of expenditures, before and after photos, receipts and list of in-kind contributors with Westlock County upon project completion or no later than **one year from the date of the grant cheque.**

### Section A. PERFORMANCE MEASUREMENT (Gravel, Project, Capital & Operational Grants)

1. Describe in measurable terms whether or not your organization achieved the desired outcome.
2. Describe or explain any significant expense variances from your approved budget plan to the actual completed project or operational year.
3. Did these funds help your organization make progress toward its goals?

### Section B. PUBLIC AWARENESS OF THE GRANT RECEIVED (Gravel, Project, Capital & Operational Grants)

1. Describe how you informed your community that this project or operational year was supplemented with funds from Westlock County.  
Attach/Insert before and after photos

### Section C. FINANCIAL REPORTING (Gravel, Project & Capital Grants)

1. Complete the financial reporting template and submit a copy that is signed by two legally authorized representatives. Note: One of the authorized signatures must be from the Treasurer or equivalent position.

**Section C: Financial Reporting For Gravel, Projects and Capital Grants ONLY**

Name of Organization: \_\_\_\_\_

Project Name: \_\_\_\_\_

Project Start Date: \_\_\_\_\_ Project Finish Date: \_\_\_\_\_

<b>Revenue</b>	<b>Approved Budget</b>	<b>Actual</b>	<b>Variance</b>
Amount Requested from this Program			
Provincial Government Funding			
Federal Government Funding			
Non – Government Funding			
Your Organization’s Cash Contribution			
Donated Resources			
<b>Total Funding</b>			

<b>Expenses</b>	<b>Approved Budget</b>	<b>Actual</b>	<b>Variance</b>
Labour			
Equipment			
Supplies and Materials			
Contracted Services			
Other (specify)			
1.			
2.			
3.			
4.			
5.			
Total Paid Expenses			
Donated Labour			
Donated Equipment			
Donated Materials and Supplies			
<b>Total Donated Resources</b>			
<b>Total Expenses including Donated Resources</b>			

**Section D: Operational Grant**  
**Attach: Fiscal year-end financial statement**

I certify that the financial reporting is true and accurate (include two authorized signatures)

\_\_\_\_\_  
Signature of Treasurer

\_\_\_\_\_  
Signature of Authorized Officer

\_\_\_\_\_  
Name of Authorized Officer

\_\_\_\_\_  
Name of Authorized Officer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

### ***Declaration at Project Completion***

To Westlock County Community Grant Program:

I, \_\_\_\_\_ of \_\_\_\_\_  
President Name Complete Address

In the Town of \_\_\_\_\_, in the Province of Alberta

Do solemnly declare:

That I am \_\_\_\_\_ of \_\_\_\_\_  
Title Legal Name of Organization

1. That grant funds of \$ \_\_\_\_\_ was received by the above named organization from the Westlock County Community Grant Program;
2. That the grant funds were used solely for the purpose for which the grant is made or if the original purpose is varied with the consent of the Community Grant Program, only for the purpose as varied
3. That any unexpended grant funds not used for the purpose for which a grant is made have been returned to Westlock County for the Community Grant Program;
4. That the statement of grant expenditure is an accurate representation of grant funds spent.

I make this solemn declaration conscientiously believing it to be true, and knowing that it is the same force and effect as if made under oath.

\_\_\_\_\_  
Signature of Authorized Representative

\_\_\_\_\_  
Date