

culturaltrust.org 775 Summer Street NE, Suite 200 Salem, Oregon 97301 503-986-0088

FY17 Cultural Participation Final Report							
Coalition Name							
Primary Contact Name							
Primary Contact Email							
Primary Contact Phone							
REVENUE	EXPENSES						
FY17 Grant Award \$	FY17 GrantDistributed\$						
Carryover from Previous Year (not to exceed 10% of total received)	# of Grants Awarded						
Earned Income (other sources/amounts of funding)	Administrative Costs (not to exceed 15% of grant received)						
In-kind Contributions (volunteer hours*, other donated revenue, etc)	In-kind Expenses (value of volunteer hours*, other donated expenses, etc.)						
TOTAL REVENUE	TOTAL EXPENSES						
Comments (use this section to describe the values/activities above):							
I hereby certify that all of the facts, figures, and representations made in this final report, including all the attachments, are true and correct to the best of my knowledge, and this final report is made with the approval of my county coalition representatives.							
Signature	Date						

Printed Name and Title:



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## FY17 Subgrant

Grant Recipient Name							
Grant Recipient Address							
City	II.		OR	Zip			
Grant Recipient Phone			1				
Grant Recipient Email							
State House District**	e House District**  State Senate District**		*	Congressional District**			
Grant Amount Awarded	\$						
Total Project Budget	\$						
Other Project Funds	\$						
Individuals Benefiting	#						
Amount & source of other project funds (individuals, businesses, foundations, in-kind contributions, etc.):							
Grant Project Description:							
<ul> <li>Coalition Cultural Benchmarks</li> <li>To select multiple benchmarks, hold down the CTRL key then click each one you want. If you are using and Apple computer hold down the APPLE key.</li> <li>Click here for a full list of Benchmark definitions</li> </ul>							

<sup>\*\*</sup>Click here to find your Legislator: https://www.oregonlegislature.gov/findyourlegislator/leg-districts.html