

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

## FY 2024 Cultural Participation Final Report

Coalition Name							
Primary Contact Name							
Primary Contact Email							
Primary Contact Phone							
REVENUE	EXPENSES						
FY2024 Grant Award \$	FY2024 Grant Distributed \$						
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						
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:							

<sup>\*</sup>Independent Sector Value of Volunteer Time: \$33.49 /hour



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## FY2024 Subgrant

Grant Recipient Name						
Grant Recipient Address						
City			OR	Zip		
Grant Recipient Phone				·		
Grant Recipient Email						
State House District**	1	State Senate District**		Congressio	nal 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>Your benchmarks can be found in your cultural plan.</li> </ul>						

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