

EXHIBIT C
FULTON COUNTY ARTS COUNCIL

141 PRYOR ST, SW; ATLANTA, GA 30303

Phone: (404) 612-5780

Fax: (404) 730-5798

Website: www.fultonarts.org

2009/10 CONTRACTS FOR SERVICES - FINAL REPORT INSTRUCTIONS

Deadline: Please submit the report no later than 5:00 p.m. on **July 30, 2010**.

For Assistance: Please contact Contracts for Services staff at (404) 612-5780.

Organizing the Report: Please provide the documentation in the order requested. If the report is disorganized and difficult to verify, it will be returned to the organization without processing. Please type or use word processing software; handwritten reports cannot be accepted. The Final Report is available as a Microsoft Word® document for downloading at www.fultonarts.org

PROJECT Support Contractors: The Final Report may not be submitted prior to the project completion date. You are encouraged to submit your Report as soon as possible after your project is complete.

GENERAL Support Contractors: The Final Report may not be submitted earlier than June 30, 2010.

Matching CASH Funds: All Arts Council awards require matching funds as outlined in the Contract. The Final Report expenses and revenues and matching funds requirements:

❖ Awards must be matched on a minimum **1:1** basis with at least **50% of the match must be cash**.

❖ **In-Kind Expenses and Revenues**

- a. List all in-kind support. In-kind may not be counted as part of the cash match.
- b. The total of in-kind expenses should equal in-kind revenues.

Attachments: Please submit the appropriate documentation as listed in Section I of the Final Report.

FCAC Credit Line— Failure to include the full FCAC logo and credit line in any and all printed or broadcast material(s) may affect the final payment. The appropriate credit line is listed in the contract.

Updated 2/16/10



2009/10 CONTRACTS FOR SERVICES FINAL REPORT FORM

Contract Number: FCAC use only
Amount:

Check any other FCAC awards received during the 2009/10 contract cycle:
[] Technical Assistance (TA)
[] Special Projects
[] Neighborhood Arts
[] Other

A CONTRACTOR ORGANIZATION INFORMATION
[] Check here for name and address correction(s)

Organization Name:
Admin Office Address:
Mailing Address:
Contact Person:
Contact Title:
Website:
Org Phone:
Fax Number:
Admin Office Fulton County District
Day Phone:
Alt Phone:
Email:

B CERTIFICATION

The undersigned has read the contract between Fulton County and the contractor and assures compliance with those terms. Contractor certifies that it has utilized Fulton County awarded dollars consistent with the stated requirements specified in the original contract. In addition, the organization and its agent who executes this document certify the information contained in this report to be true and correct to the best of his/her knowledge.

Date:

Authorizing Official Signature

Print Name:

Title:

C **DEMOGRAPHICS:** Please note that all questions in this section need to have an answer.

Geographic/Audience Information—Check all that apply

- a. County Districts Served: 3 4 5 6 7
 b. Audience Served—Check the geographic area(s) served by the organization during the contract cycle:

<input type="checkbox"/> City of Alpharetta	<input type="checkbox"/> City of Fairburn	<input type="checkbox"/> City of Palmetto
<input type="checkbox"/> City of Atlanta	<input type="checkbox"/> City of Hapeville	<input type="checkbox"/> City of Roswell
<input type="checkbox"/> City of Chattahoochee Hill Country	<input type="checkbox"/> City of Johns Creek	<input type="checkbox"/> City of Sandy Springs
<input type="checkbox"/> City of College Park	<input type="checkbox"/> City of Milton	<input type="checkbox"/> City of Union City
<input type="checkbox"/> City of East Point	<input type="checkbox"/> City of Mountain Park	<input type="checkbox"/> Unincorporated South Fulton

C. Total Number of Persons Served Directly (this number should equal the TOTAL listed in the breakdown below): _____

d. If carried on TV or Radio, estimate number reached: _____ (do not include this figure in b)

ETHNIC/RACIAL Breakdown of People Served – please use whole numbers, NOT percentages

	African/ American	Asian/ American	Hispanic/ Latino	Native American	Caucasian	Total
Youth (aged 0-18)						
	+	+	+	+		=
Adults (ages 19-64)						
	+	+	+	+		=
Seniors (ages 65+)						
	+	+	+	+		=
TOTAL						
	+	+	+	+		=

MUST equal item C above – check your math!

GENDER Breakdown of People Served – please use whole numbers, NOT percentages

	MALE	FEMALE	TOTAL
Youth (aged 0-18)			
	+		
Adults (ages 19-64)			
	+		
Seniors (ages 65+)			
	+		
TOTAL			
	+		

MUST equal item C above – check your math!

ARTISTS ENGAGED – please use whole numbers, NOT percentages

	African/ American	Asian/ American	Hispanic/ Latino	Native American	Caucasian	Total
Fulton County Artists Engaged						
	+	+	+	+		=
Non-Fulton County Artists Engaged						
	+	+	+	+		=

Of the total number of persons served directly listed above (ITEM C), indicate:

Number of people with disabilities	
Number of tourists	

E

1. **Contracted Services Award Usage:** *Please indicate how the organization's programs/services funded by the FCAC award benefited Fulton County. How did the organization measure participation including tourist participation? (Add additional pages if needed.)*

2. **Marketing/Public Relations:** *Please list the specific ways that the organization notified the public of events that are open to the general public (free and ticketed events). For example, if you advertise in print or on broadcast media, please list the specific publications or broadcast outlets. If the organization advertises through flyers, please describe the locations or types of places where flyers are placed. If tickets were distributed through partnering organizations, please list. (Add additional pages if needed.)*

3. Artistic/Cultural Programming Summary (2 page maximum, attach after this page if needed)

Number of activities _____

- *Describe the programs/activities offered during the contract cycle.*
- **Detail any actual changes to the arts programming experienced from those presented in your contract's Scope of Services and an explanation for the changes.**
 - *Explain any challenges and/or obstacles the organization encountered in completing the Scope of Services.*
 - *Address any significant differences between the figures (budget and attendance) initially projected and the final numbers.*
 - *Include details about any programs/activities offered during the cycle that specifically targeted women/girls or men/boys.*

4. Summary of Outreach and Inreach Programs* (attach an additional sheet if necessary)

A. Did you offer free or discounted programs?

Yes No

If yes, please explain (be sure to include amount of any discounts) :

In which District(s) did your programs take place? _____

B. Did you offer outreach or inreach programs for youth (ages 0-18)?

Yes No

If yes, please explain:

In which District(s) did your programs take place? _____

C. Did you offer outreach or inreach programs for seniors (ages 65+)?

Yes No

If yes, please explain:

In which District(s) did your programs take place? _____

D. Did you offer programs specifically designed to serve men/boys or women/girls?

Yes No

If yes, please explain:

In which District(s) will your programs take place? _____

E. Did you diversify your audience, reach new audiences, and/or underserved communities through your outreach and inreach programs?

Yes No

If yes, please explain and be sure to indicate how you consider these communities "underserved" :

In which District(s) did your programs take place? _____

*Outreach programs are those programs that provide services to populations that have been identified as underserved at locations outside of your facility (e.g., at schools, community centers, free public events, etc.) Inreach programs have the same intent as outreach programs only they bring those underserved audiences to your facility.

G. Did you offer programs funded by this FCAC award that met the following Fulton County Board of Commissioners focus areas and goals:

Yes No

<p style="text-align: center;">FOCUS AREAS & GOALS</p>	<p>List any programs <i>funded by this FCAC award</i> that met the focus areas & goals. Include a brief description if necessary and indicate the District(s) in which the programs took place.</p>
<p><u>A. Health & Human Services:</u> goals are to (1) coordinate health and social services in collaboration with the justice system and community partners and (2) provide prevention programs to needy and at-risk populations that enhance quality of life</p>	
<p><u>B. Children & Youth Services:</u> goals are to (1) coordinate children and youth services in collaboration with the juvenile justice system, schools, libraries, and community partners and (2) provide programs that support the development of families, children, and youth.</p>	
<p><u>C. Juvenile Justice:</u> goal is to (1) provide services that support diversion programs, restoration boards, and involvement of families.</p>	
<p><u>D. Criminal Justice:</u> goal is to (1) coordinate criminal justice through a unified, collaborative approach with courts, public safety, and community partners.</p>	

CASH FINANCIAL INFORMATION: Please provide a breakdown of the organization's budget using the following categories (DO NOT CHANGE CATEGORIES). If the organization received Project support, use figures for the project only. **Show actual CASH expenses, as though final reimbursement has been made.** Do not include capital expenditures or payments of loan principal. All expenses must occur between July 1, 2009 and June 30, 2010.

F

ATTACH A DETAILED BUDGET BREAKDOWN FOR ALL THE FIGURES PROVIDED
(both Projected and Actual.)

In completing **Actual** Cash Expenses and **Actual** Cash Income for any given year, it is considered highly unusual for those figures to be exactly the same (generally there will be a slight deficit or surplus). Be aware that in the event of an audit, the organization will be expected to present documentation to support these figures.

EXPENSES	PROJECTED* Cash Expenses	ACTUAL Cash Expenses
1. Personnel-Administrative	_____	_____
2. Personnel-Artistic	_____	_____
3. Personnel-Technical/Production	_____	_____
4. Outside Fees and Services-Artistic	_____	_____
5. Outside Fees and Services-Other	_____	_____
6. Marketing	_____	_____
7. Other Operating Expenses	_____	_____
8. TOTAL CASH EXPENSES (lines 1 to 7)	_____	_____
	PROJECTED* Cash Income	ACTUAL Cash Income
9. Earned Income	_____	_____
10. Corporate Support	_____	_____
11. Foundation Support	_____	_____
12. Other Private Support	_____	_____
13. Government Support (federal, state, city)	_____	_____
14. County Government Support (from other Fulton County departments)	_____	_____
15. Applicant Cash	_____	_____
16. SUBTOTAL CASH INCOME (sum of lines 9 to 15)	_____	_____
17. FCAC Award Amount	_____	_____
18. TOTAL CASH INCOME (sum of lines 16 and 17)	_____	_____

* **PROJECTED Cash Expenses and Income** figures are the budget figures submitted in your 2009/2010 *Revised Contract Summary and Budget Form*. If you did not revise your budget because you received your full request amount, please use the figures included in your 2009/2010 application.

G

OTHER FINANCIAL INFORMATION

1. FCAC FUNDS: Please detail how FCAC funds were spent for this period. **Show expenses as though final disbursement has been made.**

Description	Actual FCAC Funds Disbursement
a.	
b.	
c.	
d.	
e.	
f.	
g.	
h.	
i.	

Add additional sheets if necessary

2. FINANCIAL STATEMENTS: Please submit a copy the appropriate financial information based on your organization's budget size:

Operating Budget Size	Financial Documentation
Under \$25,000.00	<u>Board approved income/expense statement for the most recently completed fiscal year, certified as truthful/accurate and signed by the Board Chair or Treasurer.</u> If an audit has been completed, you may submit that in lieu of the income/expense statement.
\$25,000 - \$200,000	<u>Most recent annual audit* (completed within the last 12 months).</u> If audit has not been completed, please submit an explanation along with the board approved income/expense statement for the most recently completed fiscal year, certified as truthful/accurate and signed by the Board Chair or Treasurer.
Over \$200,000	<u>Most recent annual audit* (completed within the last 12 months).</u>

*** NOTE:** Be sure to include the Management Letter and Notes with audit.

Check here if the most recent annual audit (completed within the last 12 months) was submitted with the 2010/2011 application package. If the most recent audit was submitted with the 2010/2011 application package, please attach a note to the Final Report indicating it is on file. Please contact our office if you have any questions.

H

REQUIRED ATTACHMENTS: Enclose only enough materials to sufficiently document contract compliance. Materials will not be returned.

1. **IN-KIND INFORMATION:** Please detail any in-kind goods or services the organization received during the contract cycle. Include source and value. Use same format as Section F.
2. **FINANCIAL DOCUMENTATION:**
 - **FCAC Contract Expenses:** Ensure that the FCAC funds disbursements are accurate. The organization does not have to submit these records (receipts, invoices, etc) with the final report but must maintain and provide reasonable access to copies of receipts, invoices and cancelled checks that show how FCAC funds were disbursed. Arrange this information to match the categories of expenses reported on the Final Report form.
3. **WRITTEN CORRESPONDENCE TO ALL FULTON COUNTY COMMISSIONERS.** Submit copies of Correspondence to the Board of Commissioners if they were not included with the Progress Report. Reference the contract for more information on this requirement.
4. **ACTIVITIES LIST:** Please list all of your organization's arts activities, programs, events and/or performances that were open to the public between July 1, 2009 and June 30, 2010. Include title, date and location/venue of the event(s).
5. **PROGRAM DOCUMENTATION:** Announcements, news releases, flyers, posters, and other materials specific to the activities or project; publicity or printed materials documenting the FCAC logo and credit line.

BE SURE TO SIGN THE FRONT PAGE OF THIS FINAL REPORT BEFORE SUBMITTING TO THE FCAC.

FINAL REPORT CHECKLIST

To avoid any delays in reviewing and processing your Final Report, please make sure you have:

- Signed the front page of the Final Report (Section B – Certification.)
- Completed *all* of the demographic information and correctly totaled all of the numbers.**
- Detailed any changes to the original Scope of Services, budget, or audience projection in the narrative.
- Indicated any gender-specific programming in the narrative.
- Completed the summary of outreach/inreach programs including those programs that met the Fulton County Board of Commissioners focus areas and goals.
- Entered all of the information for the budget (projected *and* actual cash income/expenses), correctly totaled all of the numbers, and **attached a complete budget breakdown for all of the figures provided (PROJECTED and ACTUAL.)**
- Enclosed the appropriate financial documentation or indicated if it is on file.**
- Enclosed all of the *REQUIRED ATTACHMENTS* (see above.)**

Assemble your Final Report and mail to:

Fulton County Arts Council
ATTN: Contracts for Services
141 Pryor Street, Suite 2030
Atlanta, GA 30303