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|  | **Animal Rescue Fund****Final Report****2017** |
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| **Submit to:****Community Relations Advisor****Animal Care & Control Centre****13550 163 St****Edmonton****AB T5V 0B2** **Telephone: 780-495-0327****Email: tanya.laughren@edmonton.ca** |

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**PART B: Final Report**

Please provide your **Final Report** to the City of Edmonton by **December 15, of the current year**. As the Applicant, you have agreed to be accountable for the money received from the City of Edmonton.

Your report must accurately summarize your list of items or services purchased with grant money. Detail how the community/animal benefitted; the results achieved; how grant use was a success; and report any unused grant money. Contact, **Citizen Services Department** at **780-495-0327,** if you have any questions.

Ensure a list of final expenditures and **photo copies of the receipts** are attached using the **Final Expenditure Summary**.

Failure to submit the **Final Report** and the **Final Expenditure Summary**, and any unused funds may result in the Applicant being ineligible for future grants and may impact other City of Edmonton services, funding, or resources to the Applicant.

Please make cheques payable to the **City of Edmonton**.

**Include answers to the following questions in your Final Report:** *(You can cut and paste this section if that suits you better)*

 **Contact Information**

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| **Legal Rescue Group Name** |  |
| **Charitable Number** |  |
| **Website** |  |
| **Applicant Name** |  |
| **Applicant Phone Number** |  |
| **Applicant/rescue email** |  |
| **Rescue Mailing Address** |  |

1. Provide a brief summary of how you used this grant:

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2. Explain the results you achieved for the pets that received care based on these funds:

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3. Explain how you measured success of the awarded grant:

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4. Explain how the animal(s), rescue and/or community of Edmonton benefited from your use of ARF grant.

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**Final Expenditure Summary**

Please be advised that receipts are now **REQUIRED**. Please attach a photo copy of the receipts associated to the approved grant funding.

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| **Amount of ARF Grant Received** |  |
| **Amount of ARF Grant Used** |  |
| **Amount of ARF Grant Returned** |  |

**Budget (Final)**

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| **Final****Item** **(spay, neuter, trainer)** | **Final Cost for Item** | **Final ($)****In-Kind Donations****(do you get free food from the vet, is trainer offering a discount)** | **Final Equity ($)****(Calculate Mileage at $0.50/hr. and Volunteer labour****@ $15/hr, donations)** |
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| **Total** |  | **Total** |  | **Total****Value** |  | **Total****Value** |  |
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Name of Rescue: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Legal Signing Authority: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position of Authorized Representative : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Legal Signing Authority: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FOIP Disclaimer**

Your personal information is being collected under the Authority of Section 33 (c) of the Freedom of Information and Protection of Privacy Act, and will be used to aid in **maintaining accurate records of agency/group involvement**, to provide contact information for the program, and to administer the Animal Rescue Fund (ARF) Grant Program of the Community Relations Section of the Community Standards Branch with the City of Edmonton. It will be treated in accordance with the privacy protection provisions of Part 2 of the Freedom of Information and protection of Privacy Act. If you have any questions about the collection, contact the Citizen Services Department, the City of Edmonton, Animal Care and Control Centre, 13550 163 St, Edmonton, Alberta T5V 0B2 or 780-495-0327.

We will not share your contact information outside of our organization.