

Municipal, Agricultural and Community Grant 2024 Year End/Project Completion Report

Organization Information			
Organization Name		Contact Name and Position	
Current Mailing Address			Town/City/Prov
Postal Code	Phone Number	Fax Number	
Email Address		Website www.	

Select the type of funding received: 1. Sustaining/Continuing Support 2. One Time Project
 3. Event Funding Support 4. Public Venue Access

If one time project/event funding was received, please complete questions 1 – 4.
 If sustaining/continuing support funding was received, please complete questions 5 – 7.

If more space is required to answer the following questions please attach a separate sheet.

One Time Project/Event Funding (including one-time public venue access)	
1. Evaluate the outcome of the project/event including financial outcomes. <i>Please provide financial results signed by the organization treasurer.</i>	
2. Identify how the project/event met its goals and objectives.	
3. Was the Town's grant contribution recognized at the organization's event or activity? <i>Please provide a description.</i>	
4. Were there any surplus funds? If yes please provide the amount. <i>(surplus funds may be required to be returned to the Town and/or deducted from any future grant considerations)</i>	



Municipal, Agricultural and Community Grant 2024 Year End/Project Completion Report

Sustaining/Continuing Support Funding (including repeat access to public venues eg. Room rentals for monthly meetings)

5. How was the funding provided utilized?

6. How did the funding contribute to the overall goals and objectives of the organization?

7. Was the funding acknowledged on all promotional material? *Please provide a sample of promotional material.*

Contact Signature

Date of Signature

The personal information contained on this form is collected under the authority of Section 365 of the *Municipal Act, SO 2001*, and will be used only for the purpose of administrating the Agricultural and Community Grant program. Questions about this collection should be forwarded to the Town of Caledon Freedom of Information Coordinator at 6311 Old Church Rd, Caledon, ON L7C 1J6, 905-584-2272.

For assistance with the completion report process please contact the Town of Caledon, Municipal Grants by email at Municipalgrants@caledon.ca.



6311 Old Church Road
Caledon, ON L7C 1J6
www.caledon.ca
T. 905.584.2272 | 1.888.225.3366 | F. 905.584.4325