

Association's Name:

Applicant's Name:

Association's Address: Association's City:

Things that went well:

How did project meet objectives?

North Kingstown Arts Council Project Proposal Final Funding Report

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FOR COUNC Date Received:	CIL USE ONLY
Project Number:	
NKAC Liaison:	

Date of Approval:

Phone:

AT CD		D . (F .	
Name of Project:		Date of Event:	

email:

Project Summary

State:

Applicant Information:

Zip:

mprovement Recommendations:		
Marketing Effectiveness:		
Are you planning future events?	If yes, estimated date:	# of Attendees: bmit proposal two months before event)
1. Actual Project Expense Summary: Artist Fees: \$	2. Funding Summary: A. Additional Funding (Other than NK Arts Council Sponsors:\$	LISE ONLY
Project Location Rental: \$ Rehearsal Location Rental: \$ Production Equipment/Rentals: \$	Grants: \$ \$ \$ \$	1. Council Contributions:
Traffic Control/Security: \$ Pre-event Publicity Costs: \$	Subtotal A: \$ B. Additional Income from Donations: \$	2. Proceeds to Council:
Misc. Expenses: \$ Other: \$	C. Income from Ticket Sales: \$ D. Funds due from NK Arts \$	3. Actual Council
Project Expense Subtotal: \$	Total PROJECT Revenue (Totals of A thru D): \$	·





Project Itemization

Continued from Page 1

FOR COUNCIL USE ONLY	Project Number:	
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Name of Project: I		Date of Event:	Date of Event:	
Itemized Fees:	Detail / Description	Fee / Cost		
1.		\$		
2.		\$		
3		\$		
4		\$		
5		\$		
6.		\$		
7		\$		
8.		\$		
9.		\$		
10.		\$		
		Total: \$		

North Kingstown Arts Council Event Agreement Reminders

- 1. All Ticket Sales or other donations collected on behalf of the Arts Council have be returned to the N.K. Town Hall to Recreation Department Secretary within 48 Hours after the event with a North Kingstown Arts Council Donations Receipt signed and witnessed.
- 2. We (I) have provided a recent digital photo for promotional purposes by North Kingstown Arts Council.