Operational Funding

INCLUDE **ONLY** ACTIVITIES PRODUCED OR PRESENTED BY YOUR ORGANIZATION AS OUTLINED IN THE GUIDELINES.

Final Report Attachments

Listing of Completed Arts Activities

|  |  |  |  |
| --- | --- | --- | --- |
| Organization Name: |  | Reporting Period: |  |

**\* Your reporting period can correspond to your most recent board-approved financial statements.**

**e.g. If your FISCAL year-end is December 31, your activities will have occurred between January 1 and December 31 of that year.**

**OR** l**ist completed activities corresponding to your last CSO application. Your TOTALS must match your *Statistical Report* (*Arts Activities* section) page in your Final Report in GATE**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Date From**  **(dd/mm/yy)** | **Date To**  **(dd/mm/yy)** | **Name of Self-Produced Public Performance, Event, Tour, Workshop, Class or Exhibition:** | **Venue:** | **City/Town:** | **Artists Hired**  **(Performers, Instructors, Exhibitors):** | **Fees Paid to Artists:** | **Paid Attendance:** | **Unpaid Attendance:** | **Event/Activity Revenue:** |
|  |  | * **Public Performances and/or Literary Readings presented by your organization** * **Exhibitions organized and/or curated by your organization** * **Film/Video/Media screenings programmed by your organization**   ***NOTE: If your arts activity was affected by Covid-19 restrictions, please insert ANY other activity that you have carried out in your previous fiscal year (e.g. AGM meetings, virtual workshops, rehearsals).*** |  |  | * **Number of artists your organization paid artist fees and/or salaries for this activity** * **Include performers, exhibitors, or artists who were paid distribution fees** |  | **TOTAL paid attendance (estimate if necessary)** | **TOTAL unpaid attendance (estimate if necessary)** |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  | **Total** |  |  |  |  |  |