

**Pennsylvania Partners in the Arts: Project Stream**

**2017-2018 Final Narrative & Financial Report**

- 1 PPA Partner Organization:
- 2 Organization Name: \_\_\_\_\_
- 3 Subsidiary/Dept. Name: \_\_\_\_\_
- 4 Address, Line 1: \_\_\_\_\_
- 5 Address, Line 2: \_\_\_\_\_
- 6 City, State, Zip+4: \_\_\_\_\_
- 7 Contact Name: \_\_\_\_\_

- 8 Project Discipline:
- 9 Application #: \_\_\_\_\_ 8 Award Amount: \_\_\_\_\_
- 10 Grant Project Description:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**CERTIFICATIONS AND STATEMENT OF ASSURANCES**

You are required under the "Additional Terms and Conditions Governing Grants-in-Aid" to submit these Final Reports within thirty (30) days of the project termination date, or no later than September 30, 2018. If you have any questions about these forms please contact the appropriate PPA Partner Organization for your county.

We certify that this final narrative and financial report and included materials is true and correct to the best of our knowledge and belief.

**Provide two different original signatures and date (in blue ink) on each copy of this report**

\_\_\_\_\_ Date \_\_\_\_\_ Date  
 Chairman, President, or Board Member Project Director

Organization/Subsidiary Name

Application #

**PROJECT FINAL AWARD BUDGET: MATCHING INCOME**

Unless instructed otherwise, your PCA grant award required a dollar-for-dollar match. In the section below, list other sources and amounts of income used to match your PCA award. **Note:** First and second year PPA Project Stream grant recipient are not required to match the PPA Award amount. If there is no matching income, leave lines 1 to 6 blank. Limit your budget to the funded project only. Do not include the budget for your entire organization.

	Amount
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 <b>Subtotal Matching Income</b> (must equal PCA award amount):	=====
8 <b>PCA Award Amount:</b>	_____
9 <b>Subtotal PCA Award + Match</b> (8+9):	=====
10 <b>Grand Total Project Income</b> (of Funded Project Only):	_____

**PROJECT FINAL AWARD BUDGET: EXPENSES**

In the section below, itemize related project expenses equal to the total PCA award plus "match" amount. Your total expenses should be equal to Income Line 9 above. **Note:** You may not use PCA grant money for capital expenses or interest payments. Limit your budget to the funded project only. Do not include the budget for your entire organization.

	Amount
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 <b>Subtotal Project Expenses</b> (Must Equal line 9 above):	=====
10 <b>Grand Total Project Expenses</b> (of Funded Project Only):	_____

**Pennsylvania Partners in the Arts**

***Project Stream Final Narrative***

**List and description of completed activities. (All activities must occur between 09/01/17 and 08/31/18)**

**Maximum 2500 characters**