



Municipal Grants Final Report

Organizations that received funding in 2024 must submit a final report by **January 31, 2025**.

- Grant applications will not be accepted from organizations that did not submit a final report by the annual deadline.
- Term funding will not be issued if final reports are not received by the annual deadline.

Handwritten reports and faxes will not be accepted. **All sections must be completed** (if any additional space is required, please attach separate pages).

<input type="checkbox"/> Grants to Organization, Year _____ of _____ <input type="checkbox"/> Operating or <input type="checkbox"/> Capital	
<input type="checkbox"/> Funding Agreement	
Year Funded:	Grant Amount Received:
Name of Organization:	
Contact Person Name:	Contact Position:
Telephone No (daytime):	Email:

No. of active members or program participants & Type (152 gymnast participants, 234 children & 172 adults etc.):											
Target Age Group (check all that apply): <ul style="list-style-type: none"> <input type="checkbox"/> Children/Youth <input type="checkbox"/> Families <input type="checkbox"/> Adults <input type="checkbox"/> Seniors <input type="checkbox"/> Other: _____ 	Target Population Served: <table style="width: 100%; border: none;"> <tr> <td style="width: 80%;">City of Leduc</td> <td style="text-align: right;">_____ %</td> </tr> <tr> <td>Leduc County Rural</td> <td style="text-align: right;">_____ %</td> </tr> <tr> <td>Other Municipalities</td> <td style="text-align: right;">_____ %</td> </tr> <tr> <td colspan="2">(please specify):</td> </tr> <tr> <td colspan="2">_____</td> </tr> </table>	City of Leduc	_____ %	Leduc County Rural	_____ %	Other Municipalities	_____ %	(please specify):		_____	
City of Leduc	_____ %										
Leduc County Rural	_____ %										
Other Municipalities	_____ %										
(please specify):											

1. General Funding Allocation Information

- A. Please provide a general statement about the purpose of the program/service/project that this funding was intended for and how it has enhanced or impacted: A great life; A caring community; or A thriving region (e.g. Promote healthy active individuals, the program/service/project will help develop independence and strengthen coping skills, connection to our city's history, identity, and culture).

B. Please list in the table below:

(A - Input) Name(s) of the different programs/services/projects provided through the 2024 funding provided.

(B - Output) The number of programs/services/projects provided, through the 2024 Grants to Organization funding provided.

Input	Output
<i>e.g. Teen Acrylic Painting Workshop</i>	6

2. Success In Program (Outcome Indicators) Reporting

How did your organization track the success of the program/service/project that was funded through the 2024 Grants to Organizations?

A. Please list in the table below:

(A – Quantitative) – e.g., increased/decreased number of participants

(B – Tracking Tool) – e.g., registration list/attendance list

(C – Qualitative) – e.g., 80% were satisfied

(D – Tracking Tool) – e.g., satisfaction survey

Quantitative	Tool
<i>e.g. Increase number of attendance in each acrylic painting workshop from 10 to 20 teens</i>	<i>Registration/attendance list</i>
Qualitative	Tool
<i>e.g. 80% of participants were satisfied</i>	<i>Satisfaction survey</i>

3. Program/Service/Project Impacts

The impacts of these programs are usually related to attitudes, knowledge, behaviors, and values (e.g. improved eating habits for teenagers ages 13-15 years, promote healthy active individuals, community cultural awareness, etc.).

- A.** As a result of the program/service/project activities implemented, describe what changed in the lives of individuals, families, organizations, or the community (e.g. the program helped develop independence and strengthen coping skills)?

B. What changes to the program/service/project were seen by accessing this funding?

C. Briefly describe any challenges that your organization encountered over the year.

4. Other Considerations

- A.** Did you receive any financial or in-kind support from the City of Leduc, other than Grants to Organization, through the duration of this grant funding (e.g. use of Co-op Field House, Public Services soil donation, etc.)?

If yes, please list and describe below:

- B.** Did your organization's overall revenues exceed expenditures (surplus) at the end of 2024?

If yes, please clearly outline your plans associated with the surplus (e.g. Transfer to reserve (include detail/policy for reserve), carry forward for specific program/service/project, etc.).

- C.** Did your organization transfer funds to a reserve in 2024?

If yes, please clearly outline your plans associated with the reserve(s). Please include details or policy for the reserve.

5. Sustainability

A. Has your organization ever accessed Grant Connect?

B. List all board development workshops or education opportunities that your Board attended this past year.

C. Does your organization currently have a 5-year strategy? If yes, please attach.

If no, how are you planning for your future?

D. Please list below any significant community partnerships/collaborations that aided your organization in completing its' mandate over the past year.

Are there any organizations in Leduc that you are looking to collaborate/partner with that we can facilitate in connecting.

MANDATORY FINANCIAL DOCUMENTATION

Attach (Most current):

- Income Statement
- Balance Sheet
- GTO Final Report Budget Template (see excel template)

Refer to Final Reporting Process Overview for detailed information regarding mandatory financial documentation.

All Financial Statements require independent review and signatures by two (2) Board Members other than the Treasurer.

Final Reporting Declaration

1. Does not have any outstanding payments to the City of Leduc including but not limited to the Leduc Recreation Centre.
2. Acknowledges that a Travel, Hosting or General Grants to Organizations from the City of Leduc cannot be awarded within the same calendar year.
3. Contains a full, current, and accurate account for all matters stated herein.
4. As a charity or society, they remain active, and status is not currently revoked or suspended by Canada Revenue Agency. If status changes the Organization must contact City of Leduc Administration.
5. Has been prepared for and on behalf of the Organization by the undersigned.
6. We declare that the approved monies were used for the purpose stated in the application. If all the grant funds were not used, the grant money will be returned or reallocated for the next fiscal year. A Reallocation Form will need to be completed.
7. **As stated in the Application Commitments of the grant, we hereby confirm that our final report contains a full, current, and accurate account for all matters stated herein.**

Signature of Chairperson or President

Signature of Vice-Chair or Vice-President

Name

Name

Date

Date