



# Bear Claw Community Development Corporation

P.O. Box 992, Whitewood, Saskatchewan S0G 5C0

Ph: 306-696-3160 Fax: 306-696-3146



## FOLLOW UP REPORT

**IMPORTANT: Please COMPLETE ALL SECTIONS OF YOUR FOLLOW-UP REPORT and do not alter the format.**

**All areas of the application must be completed. Attach all receipts, financial documents etc.**

Please disclose all expenditures incurred for your project, program or community event. Use additional paper if necessary. You must report on 100% of your allocation amount

Please print clearly.

### 1. APPLICANT INFORMATION

Name of Organization:					
Address:					Postal Code
Contact Person:					
Phone Number:	(306)	Fax:	(306)		
E-Mail Address:					
Non Profit Corporation No.					

### 2. PROJECT OVERVIEW

Project Title:					
Date of Allocation:					

#### 2.1 DESCRIBE THE PARTICIPANTS OF THE PROJECT, PROGRAM OR COMMUNITY EVENT:

	# of Actual Participants:
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#### 2.2 WERE THE OBJECTIVES/GOALS OF THE PROJECT, PROGRAM OR COMMUNITY EVENT ACHIEVED? DESCRIBE HOW THEY WERE ACHIEVED AND TO WHAT EXTENT, IF NOT EXPLAIN WHY:


#### 2.6 HOW DID YOUR ORGANIZATION ACKNOWLEDGE THE BCCDC CONTRIBUTION FOR FUNDING? PROVIDE photos or other which can be included (i.e. signage, pamphlets, poster, media)


## 3. ACTUAL PROGRAM COSTS

(PLEASE ATTACH YOUR RECEIPTS AND/OR GENERAL LEDGER )

INCOME	PROJECTED (as was described in application)	ACTUAL
1. Cash Donations	\$	\$
2. Fund Raising Activities:	\$	\$
3. Other Grants/Contributions (Please List)	\$	\$
a-	\$	\$
b-	\$	\$
c-	\$	\$

4.	Amount received from the Bear Claw CDC (BCCDC) <i>Please indicate full Allocation including 10% holdback</i>	\$	\$
<b>TOTAL INCOME:</b>			\$ (A)

DIRECT COSTS <i>*List only the portions of each expense that relate to the project or program directly</i>	PROJECTED (as was described in application)	ACTUAL
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
<b>TOTAL PROJECTED/ACTUAL EXPENSES</b> (for each column)	\$	\$ (B)
<b>TOTAL ACTUAL EXPENDITURES</b> (Income Less Expenses A - B = C)		\$ (C)

**4. TERMS AND CONDITIONS**

1. All follow up reports must be completed no later than thirty (30) days after the project, program or community event completion/end date. Incomplete or late follow up reports may result in the remaining 10% of the funding being forfeited and placed back into the allocation fund for redistribution by the BCCDC. Applicants in default may no longer be eligible for BCCDC Allocations.
2. Original documents and receipts pertaining to the approved project, program or community must be kept by the applicant organization for a period of (7) seven years as per financial requirements.
3. Organizations must comply with minimum standards that ensure proper accountability and effective financial reporting.
4. If the funding received was \$10,000 or greater, your organization is required to submit a financial statement (General Ledger) and may be required to provide additional information: i.e. photocopy of actual receipts, payroll records, cancelled cheques, etc. at the request of the Board of Directors.
5. If the funding received was less than \$10,000, please maintain accurate records and actual receipts in the event that you are required to submit them to support the follow-up report.
6. In the event that the final project cost is lower than originally projected, the amount of eligible funding will be adjusted to reflect the lower cost and will be considered an overpayment. The applicant organization will be required to refund the overpayment to the BCCDC. The organization will be required to refund the over payment to the BCCDC upon completion of the project or within 30 days whichever comes first.
7. Adjustments will not be made if the final project, program or community event costs are higher than originally projected.
8. Organizations must have the follow-up reports completed before submitting an application that is identical.
9. Applicants who fail to comply with the terms and conditions associated with their original application for funding including completion of their follow up reports may be ineligible from receiving any further funding from the BCCDC for any other project, program or community event until such time as the full amounts owing have been repaid in full to the BCCDC.
10. All unused funds or funds used for purposes other than what was approved in the original application must be returned to the BCCDC, unless otherwise agreed to by the BCCDC and unless the Board of Directors passes a motion authorizing an extension or expressly permitting a change in the purpose for funding.
11. Deviation from approved allocations must be submitted in writing to the BCCDC and approval must be received from the BCCDC prior to any expenditure of the allocated funds.

**INFORMATION CERTIFICATION**

On behalf of the Applicant Organization, we hereby represent, warrant and certify the following:

- a. That the information contained in this follow up report together with any supporting documentation associated therewith reflects in their entirety the actual costs associated with the related project or program; and
- b. That the information contained in this follow up report is true and correct and is being executed on behalf of the Applicant Organization by its duly authorized signing authorities.

Report must be signed by **BOTH** the authorized representative and the Elected Official.

**WE HEREBY certify that the information contained in this follow-up report is accurate and complete.**

\_\_\_\_\_  
Signature of Authorized Representative

\_\_\_\_\_  
Title/Position

\_\_\_\_\_  
Print Name of Authorized Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Chief/Councilor/Mayor/Reeve (Elected Official)

\_\_\_\_\_  
Title/Position

\_\_\_\_\_  
Print Name of Chief /Councilor/Mayor/Reeve (Elected Official) -

\_\_\_\_\_  
Date

**Office Use Only:**      **Complete** \_\_\_\_\_      **Incomplete** \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**\*\*ALL FOLLOW UP REPORTS SUBMITTED WILL BECOME CONFIDENTIAL PROPERTY OF THE BCCDC\*\***

**PLEASE KEEP A SIGNED COPY FOR YOUR FILE AND  
SUBMIT 1 ORIGINAL SIGNED COPY BY MAIL  
TO OUR OFFICE ADDRESS INDICATED ON THE FRONT PAGE**