



**ALAMEDA COUNTY ARTS COMMISSION**

1401 Lakeside Drive, Suite 603, Oakland, CA 94612

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Rachel Osajima, Executive Director | direct phone 510-271-5162

**2015 ARTSFUND Grants Program  
Grant Period: July 1, 2015 – June 30, 2017**

**FINAL REPORT FORM [DUE BY JULY 30, 2017]**

(Please type)

Organization Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Contact Person \_\_\_\_\_ Title \_\_\_\_\_

Phone \_\_\_\_\_ Email Address \_\_\_\_\_

Website \_\_\_\_\_

2015 ARTSFUND Grant Award Amount \$ \_\_\_\_\_

Please complete all sections of this form and **return it with supporting documents** to Alameda County Arts Commission by the **final deadline of July 30, 2017**. Please use the space provided. Supporting documents should include samples of promotional items, programs and/or brochures, and may include photographs, digital images and other relevant materials documenting your activities. **Please make sure the report is signed, and keep a copy for your files.** A digital version of this form is available on the Arts Commission website at [www.acgov.org/arts](http://www.acgov.org/arts) then click on Programs and ARTSFUND.

1. Provide a brief description of approved grant-funded general operating and/or programming (include brief summary of activities, dates & sites). Briefly describe any changes in your general operating and/or program(s) since the application was submitted. (**answer in the space provided below.**)

ORGANIZATION NAME \_\_\_\_\_

## 2015 ARTSFUND Grants Program – Final Report

2. Was your organization able to achieve the goals it originally intended for this grant? If all the goals were not achieved, please explain why.

3. Approximately how many people were directly reached by this program (not including organization /program personnel)?  
(enter number) \_\_\_\_\_

4. OPTIONAL: Please feel free to convey any other information about your organization and/or the ARTSFUND Grant Program.

CERTIFICATION (this must be signed by someone legally authorized to represent your organization):

I certify that we have fulfilled the terms and conditions of this grant as stated in the ARTSFUND Terms and Conditions of Award and that the information included in this final report is correct and accurate.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PRINTED NAME

\_\_\_\_\_  
TITLE