ACA Grants 2019/2020

Final Report

*Due by March 15, 2020*

*Return to:* [*amy.mackinven@ab-conservation.com*](mailto:amy.mackinven@ab-conservation.com)



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| --- | --- |
| Project Title |  |
| Project Manager |  |
| ACA Project Code |  |
| Organization Name |  |
| Organization Type *(check one)* | Academic  Not-for-profit  Other |
| Report Submitted by |  |
| Date |  |

**Project Final Summary**: Briefly describe the goal, objectives, main activities, and results and achievements – maximum 400 words. This paragraph should provide a stand-alone overview of the completed project.

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**Project Background**: Briefly describe your project's background and objectives.

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**Project Status**

Briefly describe work completed to date and outline how you met or are meeting the project objectives identified in our Cooperative Funding Agreement (Schedule A).

Objective (*as listed in proposal):* Current Status of Objective (*please provide details*):

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Briefly describe the current status of the project (i.e., completed as planned, unexpected delays, or changes in project plans). *Please provide details*.

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Briefly describe the main results of the project. Were there any unexpected results from the project?

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**Special Conditions**

Provide details for any special conditions outlined for your project, if any.

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As needed, describe how each of these conditions has been met.

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**Deliverables**

Identify any deliverables outlined in Schedule A for this period and their scheduled completion. Deliverables include participant numbers, events held, reports, publications, length (km) of fencing, area (ha) of restored habitat, etc.

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**Acknowledgement of ACA**: Provide information on how and when you acknowledged ACA as a project funder.

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**Additional Comments**

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**Financial Report Disclosure**

Provide an account of how ACA funds were expended as per your project budget from the Cooperative Funding Agreement.

INTERIM PAYMENT RECEIVED YES  NO  N/A

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| --- | --- | --- | --- |
| Budget Item (Category)  From budget in approved application (Schedule A of signed Project Agreement) | Amount Budgeted ($)  From budget in approved application (Schedule A of signed Project Agreement) – ACA contribution | ACA Funds Used ($)  ACTUAL expenses | Comments |
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| **TOTAL** |  |  |  |

**NOTE: Please append scanned copies of supporting invoices/receipts to your final report.**

List any additional funds generated for this specific project and/or any co-financing listed in the proposal as pending that has since been confirmed.

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**NOTE:** **The final payment will be made upon approval of this report and receipt of an invoice or a completed Request for Payment Form (next page).**

Request for Payment Form

Grant Recipient

ACA Grants 2019/2020

**

Date:

Initial Payment  Interim Payment  Final Payment

**Funding Recipient Information**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Project Title: | |  | | | |
| Name of Recipient: | |  | | Not-for-profit No. or Business No. |  |
| ACA Project Code: | |  | | Payment Amount: |  |
| Phone: |  | | Email: |  | |

**Cheque Remittance Information**

Cheque payable to: (*include* *full address*)

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**NOTE: Payment can be made from an invoice.**

Return to:

Alberta Conservation Association

101 – 9 Chippewa Road

Sherwood Park, AB

T8A 6J7

Attn: **Amy MacKinven, ACA Grants Administrator**

**Toll-Free Telephone: 1.877.722.4323**

Fax: 780.464.0990

Email: [amy.mackinven@ab-conservation.com](mailto:amy.mackinven@ab-conservation.com)