ACA Grants 2020/2021

Final Report

*Due by March 15, 2021*

*Return to:* *amy.mackinven@ab-conservation.com*



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

**Final Project 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.

|  |
| --- |
|  |

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

|  |
| --- |
|  |

**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*):

|  |  |
| --- | --- |
|  |  |

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

|  |
| --- |
|  |

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

|  |
| --- |
|  |

**Special Conditions:** Provide details for any special conditions outlined for your project, if any.

|  |
| --- |
|  |

How has each of these conditions been met?

|  |
| --- |
|  |

**Deliverables:** List any project deliverables outlined in Schedule A and status. Project deliverables include: participant numbers, events held, reports, publications, length (km) of fencing, area (ha) of restored habitat, etc.

|  |
| --- |
|  |

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

|  |
| --- |
|  |

**Additional Comments**

|  |
| --- |
|  |

**Financial Report – Disclosure of how ACA Funds were spent**

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 [ ]

|  |  |  |  |
| --- | --- | --- | --- |
| 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 |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **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.

|  |
| --- |
|  |

**PLEASE 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 2020/2021

**

Date:

[ ]  Initial Payment [ ]  Interim Payment [x]  Final Payment

**Funding Recipient Information**

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

Select Payment Type Below:

[ ]  Electronic Funds Transfer (EFT) (provide VOID Cheque if not already set up)

[ ]  Cheque

**Payment Remittance Information**

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

|  |
| --- |
|  |

**Please 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