



# SASK LOTTERIES COMMUNITY GRANT PROGRAM

## **FOLLOW-UP REPORT – 2024**

All future grant requests may be denied, if the Follow-Up Report is late or incomplete.

**DUE DATE:** This Follow-Up Report must be submitted within one (1) month of the completion of the program or by March 31, 2025 – whichever occurs first. If the Follow-Up Report is not received by the due date, the approval will be rescinded, and funding is forfeited.

**CONTACT:** If you require assistance, please contact Community Investments at (306) 777-7507 or <u>communityinvestments@regina.ca</u>.

**SUBMIT:** Follow-Up Reports along with the required attachments may be submitted via email to <u>communityinvestments@regina.ca</u> or hand delivered or mailed to:

### **Community Investments**

Parks, Recreation & Cultural Services Department 6th Floor, City Hall PO Box 1790 Regina, SK S4P 3C8

**FUNDING**: The final portion of the funds are released after the Follow-Up Report has been reviewed and approved. If all the approved funding is not required, the surplus funds must be returned to the City of Regina at the completion of the program.

## **GUIDELINES:**

### Financial verification:

Accurate and complete financial verification of expenditures is required. You must provide a complete, easy to follow summary of how and where the funding was spent.

a) Provide **original receipts or copies of receipts** which will verify every expenditure made from grant funds; or an audited financial statement prepared by a registered Certified Management Accountant, Chartered Accountant or Certified General Accountant (CMA, CA, CGA). The audited financial statement must clearly and separately identify the grant funds expended. If your organization's audit will not be complete before March 31, 2025, you must submit receipts.

- b) Wages paid to staff must be verified with copies of cancelled cheques, signed contracts, T4s or Record of Earnings.
- c) Invoices alone are NOT acceptable verification of expenses; an invoice accompanied by a copy of the cancelled cheque is acceptable.
- d) Internal forms such as cheque request forms and general ledger printouts are not acceptable as verification of expenses.

## Eligible Expenses

- a) Expenditures must occur between April 1, 2024 and February 28, 2025.
- b) Only expenditures directly related to the program and approved as submitted in the application will be accepted.
- c) Eligible employment expenditures must be no more than 35 hours a week and no more than 90 days in a grant period (or 455 hours in a grant period); payments must be documented as instructor wages or as a lump sum payment for a contract for services.
- d) Eligible participant transportation expenditures may include taxi, bus or van rental costs for travel where it is essential to the success of the program. If the organization owns a vehicle, a transportation log identifying dates, to/from locations, and distances must be provided along with gas receipts to verify the costs.

## Ineligible Expenses:

The following expenditures are **NOT** eligible under this grant program:

- a) Construction, renovation, retrofit and repairs to buildings/facilities (this includes fixing doors, shingling roofs, installing flooring, moving/hauling dirt, etc.);
- b) Property taxes;
- c) Insurance;
- d) Alcoholic beverages;
- e) Per Diems / Day Money;
- Food or food related costs (this includes catering supplies, coffee pots, coffee, BBQs, food used for crafts, etc.);
- g) Membership fees in other lottery funded organizations;
- h) Prizes, cash, gifts, awards, honorariums, trophies, plaques and badges;
- i) Donations;
- j) Subsidization of wages for full-time employees;
- k) Uniforms or personal items such as sweatbands, hats, t-shirts, costumes, and athletic equipment which will be used by only one individual;
- I) Private vehicles and related expenses;
- m) Maintenance and operation costs of facilities;
- n) Entertainment (movies, arcades, fairs, shows, etc.) and activities where the participant is only a spectator rather than an active participant;
- o) General administrative or operational expenses.





## SASK LOTTERIES COMMUNITY GRANT PROGRAM FOLLOW-UP REPORT - 2024

Complete all sections of this form in the space provided.

- 6. Total Approved Sask Lotteries Funding:
- 7. Receipts For each expense you must provide proof of payment, please see financial verification guidelines. The expenditures must occur between April 1, 2024 and February 28, 2025 and should match the budget submitted with the original application. The number of receipts attached should also match the list below. Note: Please attach receipts in order (as listed below):

| Receipt<br># | Detailed Description of Grant Expenditures | Amount |
|--------------|--|--------|
| 1            |  | \$     |
| 2            |  | \$     |
| 3            |  | \$     |
| 4            |  | \$     |
| 5            |  | \$     |
| 6            |  | \$     |
| 7            |  | \$     |
| 8            |  | \$     |
| 9            |  | \$     |
| 10           |  | \$     |
| 11           |  | \$     |
| 12           |  | \$     |
| 13           |  | \$     |
| 14           |  | \$     |
| 15           |  | \$     |
|              | TOTAL EXPENDITURES FROM GRANT FUNDING      | \$     |

8. Provide a detailed description of the program including the actual activities that took place. Indicate if the program was successful in achieving the outcomes (impacts, benefits, results) that you identified on your application (question #25 on your application):

9. What do you consider to be the most significant outcome of this program? Please note that this information may be used in Saskatchewan Lotteries promotional material.

10. **Performance Measures -** Please provide as much information as possible on the following menu of performance measures.

| Total <b>program</b> expenditures  | \$ |
|--|----|
| Total <b>program</b> revenue   | \$ |
| Total amount of funding received from other organizations (outside of Saskatchewan Lotteries) for this program (grants, sponsorships, and donations, etc.) | \$ |
| Total # of volunteers involved in the planning and execution of the program  |    |
| Total # of volunteers' hours dedicated to the planning and execution of the program  |    |
| Total # of program hours delivered   |    |
| Total # of program locations utilized  |    |
| Total attendance (# of people that participated in the program)  |    |
| Age range of participants  |    |
| Total # of service providers that were engaged in the program (staff, instructors, artists, etc.)  |    |
| Total # of exposures of the Saskatchewan Lotteries logo (# of brochures and posters distributed, # of website views, etc.)                                 |    |

11. Are there any other key performance indicators (outputs) that you used to determine if the program was a success (include those you listed in answer to Questions #26 on your application)? If so, please list them here:

12. Which of these categories does your program fit into? (choose all that apply)

|             | • •        | <br>•    | •               | •••    |
|-------------|------------|----------|-----------------|--------|
| Sport Sport | Recreation | Culture: | Cultural celeb  | ration |
|             |            |          | performing ar   | ts     |
|             |            |          | 🗌 heritage      |        |
|             |            |          | 🗌 arts & crafts |        |
|             |            |          | literary        |        |
|             |            |          | cultural aware  | eness  |
|             |            |          | 🗌 music         |        |

### Sask Lotteries Community Grant Program

13. Which of the following under-represented populations were included/ involved in this program?

| Indigenous<br>People      | Economically<br>disadvantaged | Persons with a<br>disability | Seniors |
|---------------------------|-------------------------------|------------------------------|---------|
| Single parent<br>families | Women                         | Youth at risk                |         |

14. How were participants involved in the planning, operation, and evaluation of this program?

- 15. Attach a few sample program evaluation forms completed by program participants and/or testimonials from program participants regarding the benefits of the program Attach a maximum of 5 pages.
- 16. How did you publicly acknowledge Sask Lotteries as a source of funds for this program?

| Banners | Bulletin Boards | Newsletter | Newspaper |
|---------|-----------------|------------|-----------|
| Posters | Radio           | Speeches   | Website   |

17. Attach a copy of printed promotional materials illustrating the recognition provided to Sask Lotteries. *The Follow-Up Report is not considered complete without this.* 

#### Freedom of Information and Protection of Privacy

The City of Regina is committed to protecting the privacy and confidentiality of personal information. All personal information that is collected by the City is done so in accordance *with The Local Authority Freedom of Information and Protection of Privacy Act.* The information collected in this follow-up report will be used to administer the Community Investment Grants Program. A copy of this report will be provided to Sask Sport Inc. De-identified, aggregate information will be used by City of Regina for program planning and evaluation. This follow-up report may be distributed to the adjudicators of the Community Investment Grants Program.

#### Representations

In making this application, we the undersigned Board Members/Executive Director hereby represent to the City and declare that to the best of our knowledge and belief, the information provided in this application and the related attached supporting documents are truthful and accurate and the application is made on behalf of the above-named organization and with the Board of Director's full knowledge and consent.

| Board Member Name (print)                          | Signature | Position | Date |  |
|--|-----------|----------|------|--|
| Board Member or<br>Executive Director Name (print) | Signature | Position | Date |  |

| For office use only:<br>City of Regina<br>Return Follow-Up Report to Coordinator, Community Investments |
|---|
| Comments:   |
|   |
|   |
|   |
|   |
| Report approved. Release final payment: Yes No  |
| Signature of Coordinator, Community Investments   |