

**OVERVIEW**



Recipient: \_\_\_\_\_

Project Name: \_\_\_\_\_

File number: \_\_\_\_\_

Report for:

- Regular Intake
- Opportunity Project

Attached:

- Narrative Report (page 2)
- Statement of Revenues and Expenditures (i.e. financial reporting)
- High resolution digital photos of the project (USB sticks available at Lotteries Yukon)
- Proof of Lotteries Yukon recognition (copy of poster, ad, website, etc.)
- Proof of meeting any additional conditions specified in Letter of Agreement

**Financial Report/Claim**

This claim must adhere to the Letter of Agreement and Schedule of Approved Expenses (Schedule A). A Statement of Revenues and Expenditures (pages 3 and 4) must be attached for the completed project.

Amount approved from Lotteries Yukon: \$ \_\_\_\_\_

Amount being claimed: \$ \_\_\_\_\_

Amount already received (e.g. advance or disbursement): \$ \_\_\_\_\_

AMOUNT DUE FROM LOTTERIES YUKON: \$ \_\_\_\_\_

**Signatures**

We, the undersigned, declare to the best of our knowledge that the project costs comply with the terms and conditions of the Letter of Agreement, and the information contained in this Projects Fund Final Report is correct. We are authorized to sign on behalf of the Recipient.

Name \_\_\_\_\_ Phone #: \_\_\_\_\_

Signature \_\_\_\_\_ Position: \_\_\_\_\_ Date: \_\_\_\_\_

Name \_\_\_\_\_ Phone #: \_\_\_\_\_

Signature \_\_\_\_\_ Position: \_\_\_\_\_ Date: \_\_\_\_\_

**NARRATIVE REPORT**



Recipient: \_\_\_\_\_

Project Name: \_\_\_\_\_

File number: \_\_\_\_\_

Was the project successful? How did you measure success?

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How did the project meet the Projects Fund objectives? Did it:

- Sustain or increase participation in arts, sport and/or recreation activities in Yukon?
- Enhance outcomes for arts, sport, and/or recreation through partnerships?
- Help Yukoners develop their skills/abilities in arts, sport and/or recreation?
- Reduce barriers to participation in arts, sport and/or recreation across Yukon (e.g. for specific groups)?

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*If more space is necessary, attach additional pages to the Projects Fund Final Report form.*

How many Yukoners attended? How many actively participated?

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How was Lotteries Yukon's contribution to the project recognized?

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Proof of Lotteries Yukon recognition attached.

**Report STATEMENT OF REVENUES AND EXPENDITURES**

Recipient: \_\_\_\_\_

File number: \_\_\_\_\_

Project Name: \_\_\_\_\_



**Revenues:**

Describe all sources of revenues (e.g. earned revenue, fundraising, grants/funding, in-kind) for the entire project:

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**TOTAL ACTUAL REVENUES:** \_\_\_\_\_

**Expenses (Table A):**

Include expenses for the entire project. Add rows if necessary. A Word version of this document is available upon request. Expenses in this table for which funding is approved from Lotteries Yukon must be supported by financial information on expenditures (Table B) on the next page.

| Type of Expense <sup>1</sup> | Projected Cost in Budget (\$) | Funding approved from Lotteries Yukon <sup>1</sup> (\$) | Funding approved/received from other sources (\$) | Actual Amount Spent (\$) | Notes (e.g. sources of funding) |
|------------------------------|-------------------------------|---|---|--------------------------|---------------------------------|
|                              |                               |   |   |                          |                                 |
|                              |                               |   |   |                          |                                 |
|                              |                               |   |   |                          |                                 |
|                              |                               |   |   |                          |                                 |
|                              |                               |   |   |                          |                                 |

**TOTAL ACTUAL EXPENSES:** \_\_\_\_\_

<sup>1</sup> Follow revenues as submitted in application Project Budget Summary Sheet (page 6) and type of expense and amount approved as per Schedule of Approved Expenses (Schedule A).

**STATEMENT OF REVENUES AND EXPENDITURES**

**Expenditures (Table B):**

**Include only expenditures for which Lotteries Yukon funding has been approved.** Lotteries Yukon does not require Recipients to submit photocopies of invoices, receipts, or other financial documents to claim funding. Instead, Recipients must fill in this table and retain relevant financial documents for at least two (2) years. Lotteries Yukon or its agent may audit records directly related to the Project if necessary to satisfy the Yukon Lottery Commission that the objectives and activities of the Project have been carried out and that Lotteries Yukon funding was spent in accordance with the terms and conditions of the Letter of Agreement.

Add rows if necessary. A Word version of this document is available upon request from Lotteries Yukon.

| Applicable Expense in Table A | Invoice / Receipt Number | Supplier's name | Date | Amount | Description | Cheque Number <sup>2</sup> |
|-------------------------------|--------------------------|-----------------|------|--------|-------------|----------------------------|
|                               |                          |                 |      |        |             |                            |
|                               |                          |                 |      |        |             |                            |
|                               |                          |                 |      |        |             |                            |
|                               |                          |                 |      |        |             |                            |
|                               |                          |                 |      |        |             |                            |
|                               |                          |                 |      |        |             |                            |
|                               |                          |                 |      |        |             |                            |
|                               |                          |                 |      |        |             |                            |
|                               |                          |                 |      |        |             |                            |

**TOTAL AMOUNT:** \_\_\_\_\_

<sup>2</sup> For expenses covered by in-kind revenues/donations, you may insert N/A in invoice number and cheque number columns.