



Local Initiatives Grant Final Report

Date of Report

Project Name

Library

Contact Name

Phone #

Email

Fax

Was this a joint application with another member library? Yes No

Partner Library

Contact name

Phone #

Was your grant application for?

Programming Training Equipment/Furnishings Collections

Date(s) of program/event

Please report on the activities undertaken, including an evaluation of how the grant has supported your library in the delivery of services and programs. Please comment on the link between your project and the goals of the IslandLink Library Federation (outlined in the IslandLink Library Federation Agreement):

Please attach additional pages as necessary and any supporting information: brochures, posters, media promotion, etc.

Please provide a financial report:

Expenses:

Venue rental

Equipment/Furnishings

Catering

Presenter Fees

Presenter Travel

Materials/Supplies

Advertising/Promotion

Acquisitions

Other:

Total Expenses

Revenue:

Participant Fees

Member Library Contribution

Other Grants/Funding

Revenue Subtotal

IslandLink Funding

Total Revenue

Attach receipts for all purchases made for the Local Initiatives Grant Project.