



CCCA # \_\_\_\_\_ - \_\_\_\_\_

# Caroline County Council of Arts, Inc.

PO Box 292, Denton, MD 21629, (410)479-1009, [ccartscouncil@verizon.net](mailto:ccartscouncil@verizon.net)

Grant application (Page 1 of 2)

NAME OF ORGANIZATION OR INDIVIDUAL APPLYING FOR GRANT	CONTACT PERSON		
ADDRESS	ADDRESS		
PHONE NUMBER	E-MAIL ADDRESS	PHONE NUMBER	E-MAIL ADDRESS
PROJECT NAME	PROJECT DATE(S), TIME AND LOCATION		

Please describe the Project:

---

---

---

---

---

---

---

---

---

---

What facet(s) of the Arts does this project involve? Please circle all relevant areas:

LITERATURE | POETRY | DRAMA | DANCE | PAINTING | PRINTMAKING  
 CINEMA | PHOTOGRAPHY | MUSIC | TEXTILE ARTS | FOLK ARTS | DRAWING  
 SCULPTURE | POTTERY | GRAPHIC ARTS | OTHER (Please Specify): \_\_\_\_\_

How many people will benefit from this project? \_\_\_\_\_ What age groups will benefit? \_\_\_\_\_  
 Will your project be handicapped accessible? \_\_\_\_\_



# Caroline County Council of Arts, Inc.

## Grant Application (Page 2 of 2)

NAME OF ORGANIZATION OR INDIVIDUAL

NAME OF PROJECT

### PROJECTED INCOME AND EXPENSES FOR THIS PROJECT

(Please do not include in-kind donations in these figures)\*

#### Cash Income

#### Cash Expenses

Grant Requested from CCCA \$ \_\_\_\_\_  
(MAY NOT EXCEED 50% OF ARTS RELATED EXPENSES)

Fees \$ \_\_\_\_\_

Organizational Funds \$ \_\_\_\_\_

Salaries (not included in above fees) \$ \_\_\_\_\_

Tickets/Registration/Memberships \$ \_\_\_\_\_

\$ \_\_\_\_\_

Cash Contributions

\$ \_\_\_\_\_

Supplies and Materials

\$ \_\_\_\_\_

Equipment

\$ \_\_\_\_\_

Promotion

\$ \_\_\_\_\_

Travel

\$ \_\_\_\_\_

Rentals

\$ \_\_\_\_\_

Other Expenses (please itemize)

\$ \_\_\_\_\_

Item

\$ \_\_\_\_\_

Item

TOTAL CASH INCOME: \$ \_\_\_\_\_

TOTAL CASH EXPENSES: \$ \_\_\_\_\_

Have other grants been applied for which aren't listed above? Yes \_\_\_\_\_. No \_\_\_\_\_. (please check)

If Yes, please list all other pending grants and amount requested:

Source \$ \_\_\_\_\_ Amount

Source \$ \_\_\_\_\_ Amount

Source \$ \_\_\_\_\_ Amount

Source \$ \_\_\_\_\_ Amount

\*In-kind donations are those services which are contributed to your organization, for which you would normally have to pay.

(Office Use Only)

Application Received:	Grants Committee:	Board Action: Date/Amount
Organization Notified:	Final Report Received:	Paid: Date/Check Number



CCCA # \_\_\_\_\_ - \_\_\_\_\_

# Caroline County Council of Arts, Inc.

PO Box 292, Denton, MD 21629, (410)479-1009, ccartscouncil@verizon.net

## Final Report

NAME OF ORGANIZATION OR INDIVIDUAL

NAME OF PROJECT

### FINAL INCOME AND EXPENSES FOR THIS PROJECT (CCCA doesn't count in-kind donations as income)

#### Cash Income

#### Cash Expenses

Caroline County Council of Arts Grant \$ \_\_\_\_\_  
(MAY NOT EXCEED 50% OF TOTAL ARTS RELATED EXPENSES)

Fees \$ \_\_\_\_\_

Organizational Funds \$ \_\_\_\_\_

Salaries (not included in above fees) \$ \_\_\_\_\_

Tickets/Registration/Memberships \$ \_\_\_\_\_

Supplies and Materials \$ \_\_\_\_\_

Cash Contributions \$ \_\_\_\_\_

Equipment \$ \_\_\_\_\_

All other income (please itemize by source and amount) \$ \_\_\_\_\_

Promotion \$ \_\_\_\_\_

Source \$ \_\_\_\_\_

Travel \$ \_\_\_\_\_

Source \$ \_\_\_\_\_

Rentals \$ \_\_\_\_\_

Source \$ \_\_\_\_\_

Other Expenses (please itemize) \$ \_\_\_\_\_

Source \$ \_\_\_\_\_

Item \$ \_\_\_\_\_

Source \$ \_\_\_\_\_

Item \$ \_\_\_\_\_

TOTAL CASH INCOME: \$ \_\_\_\_\_

TOTAL CASH EXPENSES: \$ \_\_\_\_\_

You must submit this final report form within 30 days after completion of your event. As a reminder: the **Caroline County Council of Arts** requires the following documentation to accompany the final report:

- Proof of payment of the eligible expenses.
  - Copies of promotional literature that acknowledges support by the **CCCA**.
  - Letters to the officials listed on the back of the Granting Policy sheet in which you acknowledge our support
- The **CCCA** reserves the right to withhold payment from grantees that don't comply with these requirements.*