



SASK LOTTERIES COMMUNITY GRANT PROGRAM

FOLLOW-UP REPORT – 2023

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, 2024 – 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 If the Follow-Up Report is not received by the due date, the approval will be rescinded, and funding is forfeited.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 communityinvestments@regina.ca.

SUBMIT: Follow-Up Reports along with the required attachments may be submitted via email to communityinvestments@regina.ca 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, 2024, 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, 2023 and February 29, 2024.
- 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;
- f) 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, plagues 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.





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Complete all sections of this form in the space provided.

1.	Organizatio	ın:					
2.	Contact Pe	rson:					
	Mailing Add	dress: Postal Code:	Postal Code:				
	Telephone	No:					
	E-mail:						
3.	Program Na	ame:					
4.	Program Da	ates:					
5.	Program Lo	ocation(s):					
6. 7.	Total Approved Sask Lotteries Funding: Receipts – For each expense you must provide proof of payment, please see financial verification guidelines. The expenditures must occur between April 1, 2023 and February 29, 2024 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 #	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 \$

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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.

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perform	Performance Measures - Please provide as much information as possible on the following menu of performance measures.						
Total p	rogram expenditures	\$					
Total p	rogram revenue	\$					
Saskat	mount of funding received from other organizations (outside of chewan Lotteries) for this program (grants, sponsorships, and ons, etc.)	\$					
Total # prograr	of volunteers involved in the planning and execution of the m						
Total # the pro	of volunteers' hours dedicated to the planning and execution of gram						
Total #	of program hours delivered						
Total #	of program locations utilized						
Total a	ttendance (# of people that participated in the program)						
Age rar	nge of participants						
	of service providers that were engaged in the program (staff, tors, artists, etc.)						
T							
brochu	of exposures of the Saskatchewan Lotteries logo (# of res and posters distributed, # of website views, etc.)						
. Are the							

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13.	Whic	Which of the following under-represented populations were included/ involved in this program?						
		Indigenous People		Economically disadvantaged		Persons with a disability		Seniors
		Single parent families		Women		Youth at risk		
14.	How	were participants i	nvolve	d in the planning, c	perati	on, and evaluation	of this	program?
15.						npleted by program		pants and/or ttach a maximum of 5
	page		am pai	no.pamo rogaramg		one or the progre		
16.	6. How did you publicly acknowledge Sask Lotteries as a source of funds for this program?							
10.	П	Banners		Bulletin Boards	П	Newsletter		Newspaper
		Posters		Radio		Speeches		Website
						•		
17.						rating the recognition If complete withou		rided to Sask

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	Signature	Position	Date		
Executive Director Name (print)					
For office use only: City of Regina Return Follow-Up Report to Coordinator, Community Investments					
Comments:					
Report approved. Release final payme	ent: Yes 🗌 📑	No 🗌			
Signature of Coordinator, Community Investments					