| Collection Inventory Program **FINAL REPORT** Tourism, Heritage and Culture Archaeology and Heritage Branch | New Brunswick Nouveau |
|---|---|

| Name of Organization | |
|---|---|

1. Please provide information below regarding the current state of your artifact collection.

| | |
|---|---|
| **Total number of artifacts in collection** | |
| **Total number of artifacts accessioned and catalogued** | |
| **Total number of entries in digital database (i.e. Excel, FileMaker Pro, Collective Access, etc.)** | |

2. Please indicate in the appropriate fields below the collections work completed **during the granting period**.

| | |
|---|---|
| **Number of artifacts manually catalogued and physically numbered** | |
| **Number of artifacts physically inventoried** | |
| **Number of digital records entered (created)[1]** | |

3. If your organization has modified existing records during the granting year, please describe the type of information that was added, updated, or edited (i.e. Description, Narrative, Measurements, Location, etc.) and include the number of records modified.[2]

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[1] *Collective Access* users: FIND > OBJECTS > BASIC SEARCH. Use search term **created: "after March 2023"**

[2] *Collective Access* users: FIND > OBJECTS > BASIC SEARCH. Use search term **modified: "after March 2023"**

4. If applicable, please provide an update on the status of your organization's digitization (object photography) efforts, including the number of images you currently have and an estimate of how many were taken or added to the database within the past year.

5. **Artefacts Canada Upload.** For museums using *Collective Access*, please attach a list of the records uploaded to Artefacts Canada as part of this year's grant requirements.

6. Please add any additional information of steps/process completed during the granting year.

7. Please provide a list of the **collections-related training and/or webinars** that staff and volunteers of your organization participated in during the granting year.

8. **Financial report.** Please provide a summary of the expenses for this project. Total project expenditures must match total project revenues.

| Expenditures | |
|---|---|
| Salaries and benefits | $ |
| Equipment and supplies | $ |
| Travel | $ |
| Other costs (specify): | $ |
| **Total Expenditures:** | $ |
| **Revenues** | |
| Provincial Government (Collection Inventory Program) | $ |
| Applicant organization's financial contribution | $ |
| Other (specify): | $ |
| **Total Revenues:** | $ |

**This completed report must be sent electronically to: archaeology-heritage@gnb.ca no later than March 31st of the granting year. For museums not using *Collective Access*, a copy of your database must be sent either electronically or on a USB key to:**

**Archaeology and Heritage Branch**
Tourism, Heritage and Culture
Marysville Place
P.O. Box 6000
Fredericton, NB   E3B 5H1

I _____ AFFIRM THAT the information in this report is accurate and complete and that the final budget is fairly presented. I understand that the information provided may be subject to evaluation by the government and that it may be accessible under the *Right to Information Act*.

_____
Authorized Signature                                    Position                                    Date