Exhibit Renewal and Museum Activities FINAL REPORT Tourism, Heritage and Culture Archaeology and Heritage Branch



1. Organization information:

Museum Services

		1					
Name of	organization						
Contact person				Telephone (org.)			
Email (org.)							
2.	Project title:						
3.	Project sched	dule:					
Start			End				
4.	4. Brief description of your project:						
5.	If your project changed from your application, provide a detailed explanation. This could include a revised timeline, new or updated themes and messaging, adjusted costs for materials or fees, etc Project scope changes must have prior approval						
	from the prog	gram officer. ————————————————————————————————————					

	6.	Provide examples of how your project generated interest and involvement from the community:
	7.	If applicable, has this project increased attendance at your museum?
	8.	What have you learned from the evaluation of your project? Please refer to the evaluation measures outlined in your application and summarize their results.
	9.	How did this project increase the capacity and knowledge of your organization? Please explain how this knowledge will be transferred within the organization and to future board members, staff, and volunteers. Were any new policies or procedures drafted or revised?
	10	. How was government assistance acknowledged? Attach supporting documents:
1		

11. Financial statements (Please submit the project's financial report and complete the table below). **Keep all original receipts in case we ask to see them**.

EXPENDITURES:						
Salaries and benefits						
Maximum set at 20% of the grant provided		Please detail for Exhibit Renewal &				
Contribution from the applicant		Museum Activities Support projects				
Professional and consulting fees	1					
Fabrication contracts						
Equipment and supplies						
Travel and transportation expenses						
Space and equipment rental						
Administration (Maximum set at 5% of the total proje						
Other (specify):						
Total expenditures:						
REVENUES:						
Provincial Government (grant received)						
Applicant organization's financial contribution						
Applicant organization's in-kind contribution						
Other (specify):						
Total revenues:						
BALANCE:		\$0.00				
Please include copies of any media coverage your project has received, as well as photos of the completed project. Please send a signed copy of your final report with attachments electronically by email to archaeology-heritage@gnb.ca and keep a copy for your records. 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				