

Grantee Name: \_\_\_\_\_

## FINAL REPORT

### Creative Space – Planning (CRSP–Planning)

Please submit by email or postal mail to your program officer at San Francisco Arts Commission, 401 Van Ness Avenue, Suite 325 San Francisco, CA 94102. **Please note that any invoices for remaining grant funds (Appendix D) must be received as a hard copy with original signature.** E-copy ok for other documents.

*Checklist of required elements:* Please be sure to include all elements in your submitted report. Reports are considered incomplete until all required pieces have been received.

- Final Report Form (this document)
- Grant Plan Progress Report (separate attachment)
- Expense Report (separate attachment)
- Financial Documentation (invoices and proof of payment)
- Project Documentation: Please send at least **one digital image documenting your project** to grants staff. Include any relevant credits. By sending an image, you are granting the Arts Commission permission to use it in future SFAC reporting, archival and promotional information.
- Current Insurance Certificates and/or Insurance Waivers: Remaining funds cannot be disbursed unless we have current General Liability, Workers' Compensation, and Auto insurance certificates and endorsements with the proper information. All certificates must include endorsements naming "The City & County of San Francisco, its officers, agents, and employees" as additional insured and the "San Francisco Arts Commission, Attn: Community Investments, 401 Van Ness Ave, Suite 325, San Francisco, CA 94102" as certificate holder. If you requested a waiver for workers' compensation and auto liability, please contact staff to make sure it is on file.

**General liability coverage cannot be waived.** However, grantees can meet this requirement through the documentation listed below. **You will need to submit the following as soon as possible and no later than two weeks prior to your public event(s):**

- Special event insurance:** Please provide a copy of your certificate and additional insured endorsement that names "The City & County of San Francisco, its officers, agents, and employees" as additional insured and the "San Francisco Arts Commission, Attn: Community Investments, 401 Van Ness Ave, Suite 325, San Francisco, CA 94102" as certificate holder; **or**
- General Liability Insurance Certificate and Endorsement from Host Venue:** The grantee and event must added by endorsement to the venue's General Liability policy and the certificate of insurance and endorsement must name "The City & County of San Francisco, its officers, agents, and employees" as additional insured and the "San Francisco Arts Commission, Attn: Community Investments, 401 Van Ness Ave, Suite 325, San Francisco, CA 94102" as certificate holder

**If your grant project includes service to vulnerable populations (minors and elderly), you must have Abuse & Molestation coverage as part of your General Liability coverage, which can be listed directly on the certificate of insurance. In addition, you must provide proof of this coverage through an attached endorsement that references policy limits for Abuse & Molestation coverage.**

**If you have a remaining balance on your grant** and you are not in default, please include a signed, hard copy of your invoice (Appendix D) to receive a disbursement on your grant:

Appendix D: Signed Invoice (separate attachment)

**I. Project Narrative:**

1. Summarize the outcomes of the project reflecting on the project goals. (200 words max)
2. How did the project go logistically and financially? What lessons did you learn? (250 words max)
3. How will this project this project advance the organization’s mission and future direction? (250 words max)
4. What are your foreseeable next steps? (200 words max)
5. Photo Documentation: Please provide relevant photo credits and captions in the space below. (Add rows as needed.)

<b>Image File Name</b>	<b>Photo Credit</b>	<b>Caption</b>

I certify that, to the best of my knowledge, that the information contained in this final report is true and correct.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_