Note: The following is provided for reference to assist with preparing your report in advance. Please submit your report online at: https://form.jotform.com/71308050731951



GRANTEE FINAL INVOICE & REPORT FORM

Grants Administration Division

To navigate through the pages of the Final Invoice & Report Form, please use the "Next" and "Back" buttons at the bottom of each page. Avoid using your web browser's back arrow, as this might reset the form.

<u>Important</u>: We recommend you complete this invoice and reporting form in one sitting. Therefore, we suggest that you prepare your answers in advance prior to starting your report.

Grantee Name

Step #1: Download, fill out, sign, and save a copy of the DCA Invoice Form accessed through this link. Copy the exact "Services to be Provided" language from your grant contract into the blank space in the center of the form.

Once your Invoice Form is completed and saved, click on the "Browse Files" button below to locate and upload your completed Invoice Form.

Community Re-Introduction Event Reporting

Most DCA grant contracts in 2021-22 included a one-time, non-matching federal grant supplement to support a community re-introduction activity or event. Review the "Services to be Provided" language in your grant contract and indicate below whether your contracted services included a community re-introduction event for 2021-22.

Do your grant contracted services include a Community Re-Introduction activity, supported by a one-time, non-matching Federal grant supplement? *

OYes, the Services to be Provided in my grant contract includes a Community Re-Introduction Event.

No, the Services to be Provided in my grant contract does not include a Community Re-Introduction Event.

1. Geographic locations of grant-supported public activities:

place (checos siny aloos alarys	ur grant was contract	District(s) in which project-services took tually obligated to serve):	
□1	\square_2	□3	
4	5	□ 6	
1 7	□8	□9	
□ 10	□ 11	□ 12	
□ 13	□ 14	□ 15	
ALL- check this box if all		0	
districts were served via			
broadcast/internet artistic			
programs			
2. Service Metrics:			
F	. I	at a construct to the cons	
Enumerate DCA grant-supported ar	nd match-tunded projec	ct-services below:	
•	services organizatio	on is contracted to provide as listed in your	
Appendix B:			
Enter the minimum number of services/pres	sentations required by your D	DCA grant contract.	
Enter the minimum number of services/pres	sentations required by your D	DCA grant contract.	
	. ,,	DCA grant contract. f your DCA-funded grant project	
	. ,,		
B.) Additional number of service	es provided as part of	f your DCA-funded grant project	al
B.) Additional number of service	es provided as part of		al
B.) Additional number of service	es provided as part of	f your DCA-funded grant project	al
B.) Additional number of services If you delivered services beyond the minimu number of services/presentations provided.	es provided as part of	f your DCA-funded grant project A B (e.g. for matching purposes), please enter the addition	al
B.) Additional number of services If you delivered services beyond the minimu number of services/presentations provided.	es provided as part of	f your DCA-funded grant project	al
B.) Additional number of services If you delivered services beyond the minimu number of services/presentations provided. C.) Estimated total number of units of the services	es provided as part of	f your DCA-funded grant project A B (e.g. for matching purposes), please enter the addition	al T

D.) Method(s) used to determine count of project-engagers above:

Are you submitting d	locumentation with your final report?	
•	ch e-files at the end of this report	
OYes - I plan to mail	·	
ONo - I am not subm	nitting documentation	
E.) Estimated numb	er of persons notified of project/servi	ce activities:
3. Engagement	t Metrics	
DCA is committed to	the equitable distribution of arts funding	to the diverse cultures of Los Angeles
	ded in this section is used to monitor pro-	
A.) Project Engagen	nent: Provide the estimated number of	of project-engagers by age group:
	Number (#) of Individuals engaged IN PERSON	Number (#) of individuals engaged ONLINE
Age Group: 0 to 4		
Age Group: 5 to 12		
Age Group: 13 to 17		
Age Group: 18 to 24		
Age Group: 25 to 34		
Age Group: 34 to 65		
Age Group: 65 and		
over		
Total Number of Pro	oject-Engagers *	

Engagement from Community Re-Introduction Activities (if applicable) *

participants, audience, etc.

Of the Total Number of Project-Engagers you entered above, approximately how many persons were engaged by the Community Re-Introduction activities supported by your contract's one-time, non-matching Federal grant supplement?

Add the values entered above to arrive at the sum total of in-person and virtual project-engagers, including project staff/artists,

Please indicate the forms media (e.g. br artistic project-services provided:	oadcast, print, digital, etc) used to engage people with the
☐ TV/cable	
□ radio	
☐ online announcements	
printed publications	
Provide the estimated Total Number of petc):	people engaged via media (e.g. broadcast, print, digital,
B.) Estimated percentages of project-en Percentage (%) of peo	
Female	
Male	
C.) Estimated percentages of project-en	gagers by ethnic heritage: Percentages (%) of people engaged
African American	
Asian American	
Caucasian/ European	
Latino/ Hispanic	
Middle Eastern	
Native American	
Native Hawaiian/ Pacific Islander	
Mixed Heritage	
Other	

If "other" selected above, please	specify here:	
D.) Activities/events were present	nted in multiple languages?	
OYes		
ONo		
If "Yes", which languages:		
☐ English	Spanish	Arabic
☐ Armenian	☐ Cantonese	Creole
☐ Farsi	French	German
Ghanaian	Hebrew	Hindi
☐ Italian	Japanese	☐ Khmer
Korean	Krio	Latin
☐ Mandarin	Polish	Portuguese
Russian	Swahili	☐ Tagalog
Thai	Ukrainian	Urdu
☐ Vietnamese	☐Yiddish	Yoruba
□Zulu	☐ American Sign Language	
F) Ware all project site(s) access	sible to physically challenged en	nagere?
OYes	Sible to physically challenged eng	gugers.
ONo		
O		
F.) Were some or all project-serv	vices interpreted for the hearing i	mpaired?
OYes		
ONo		
9		
	ecial constituencies listed below	that can be counted among
project-engagers (mark all cate	jories that apply):	
Artists		
	school in one of the City's Gang Rec	duction Zones)
Correctional residents (adults a	•	
Differently-abled persons (with p	onysical or mental challenges)	
Homeless persons	LICA	
☐ Immigrants/New arrivals in the ☐ Lesbian/ Gay/ Bisexual/ Transge		
Low income persons	muereu persons	
Parents/Guardians with children		
People in addiction or rehabilita		
copie in addiction of rendbilita	<u> </u>	ronic/terminal illnesses (HIV

cancer, etc.)

☐ Tourists (regional, national, or international) ☐ Women (with women specific programs) ☐ ☐		
Estimate the number of special constituence engagers:	ies listed below that ca	n be counted among project-
		Number (#) in each relevant category
Artists		
At-risk youth (who live or go to school in one of Reduction Zones)	of the City's Gang	
Correctional residents (adults and/or juveniles)	
Differently-abled persons (with physical or me	ntal challenges)	
Homeless persons		
Immigrants/New arrivals in the USA		
Lesbian/ Gay/ Bisexual/ Transgendered perso	ons	
Low income persons		
Parents/Guardians with children		
People in addiction or rehabilitation groups		
People with chronic/terminal illnesses (HIV, ca	ancer, etc.)	
Tourists (regional, national, or international)		
Women (with women specific programs)		
Other		
4. Outreach Metrics		
Provide the estimated number of people solicity you used listed below (we understand duplicate		
A.) Community partners and/or co-sponsor	rs:	
	Number (#) of People Re	eached, Estimated
programming partners/sponsors		

media partners/spons	cors	
venue partners/hosts		
other		
If "other" selected ab	ove, please specify pa	rtnership:
B.) Internet/ commu	ınication media:	
,		of People Reached, Estimated
e-blasts/e-vites		
podcasts/broadcast		
print advertising		
sms texting		
websites		
other		
If "other" selected ab	ove, please specify me	edia:
C.) Social media:		
o., ooda media.	Number (#) of People R	eached, Estimated
Facebook		
Instagram		
Twitter		
Youtube		
other:		
If "other" selected ab	ove, please specify so	cial media:

		Numbe	er (#) of People R	eached, Estima	ted	
Flyers						
Season Brochures						
Invitation Cards						
other:						
If "other" selected abov	ve nleas	e speci	ify printed mate	erial(s):		
	ro, prode	орос.	, printou mate	(5).		
5. Workforce Mo	etrics					
A.) Estimated number funds or matching fund		ng jobs	and volunteer o	opportunities c	reated/mainta	ined by DCA
	# of Ful	l-time	# of Part-time	# of Occasiona	al/ Seasonal	# of Volunteers
Administrative Staff						
Artists/ Performers						
Consultants/ Other(s)						
Technical workers						
TOTAL						
B.) Estimated number above (in part A): C.) Estimated number with all persons enumer	of artist	ic prod	uction (e.g. reh			
D.) Estimated numbe enumerated above (in		ic enga	gement/perfor	mance hours a	ssociated with	n all persons

6. Events and Activities

0/500

Detail each public activity that has been supported by DCA-funding and/or matching support.
Please provide basic information (i.e. event name , type , date , start and end times , venue/location , and Council District) for the separate Activities/Events specific to your grant-funded project.
To access the Event and Activities form, please click on the following link:
http://culturela.org/list-of-activities-part-ii-question-6-rev-8-25-17/
Click here to Find a City Council District by address
7. Narrative Report
a.) Describe the key project-engagers (staff, artists, volunteers, participants and audience) and their relationship to intended success. *
0/500
a2.) Community Re-Introduction Narrative: Briefly describe the activities supported by your one-time, non-matching Federal grant supplement. In your response, please indicate which two or more allowable expense categories the funding was used to cover (if applicable). *

 b.) Describe noteworthy or significant participant/audience feedback messages or survey result How might qualitative reflections inform future practices? *
0/500
c.) Considering the ratio of people solicited to those ultimately engaged, were your marketing/inclusion strategies effective? How might you change outreach and/or enrollment strategies for improved or ongoing success? *
0/500
d.) Describe how you credited DCA with your project. Be sure to attach copies of marketing, advertising, and/or materials related to project-service activities which showcase either the DCA logo or includes language giving credit to DCA. *
0/500
e.) Please list the names/sources and the amounts of the revenues or values of cash and/or in- kind contributions received or committed to match DCA support. When appropriate designate percentages or sub-amount of that apply to DCA so that we can understand the relationship between your answer here and the numbers registered in your final financial report. *

0/500

8. Final Financial Report

Use the Final Financial Report form to provide us with a breakdown of your DCA project expenses and income. To access the Final Financial Report form, please click on the following link:

http://culturela.org/wp-content/uploads/2016/03/Final-Financial-Report-Orgs-rev-6-27-17.xlsx

9. Testimonial Request

Submit a testimonial/story and images of a person (a participating resident or audience member) who was deeply affected (professionally or personally) by its grant-supported activities. DCA will feature some of these stories on our website and social media platforms to highlight the importance and impact of the work of DCA grantees.

Below, please provide a 200-word explanation of how the participant's life was transformed by the artistic/cultural experience you provided.		

10. Marketing Material

Please attach copies of marketing, advertising, and/or program materials related to project-service activities which showcase either the DCA logo or includes language giving credit to DCA. A minimum of one sample should be attached.

What is the sample and where can we find credit to DCA (if not immediately noticeable)?

What is the sample and where can we find credit to DCA (if not immediately noticeable)?
What is the sample and where can we find credit to DCA (if not immediately noticeable)?

Final Report Submission

Before submitting your final report, please remember to review all entries for accuracy. Responses cannot be changed once you click "Submit." It is highly recommended that you click on "Print Form" to save a copy of this invoice for your records.