Community Facilities Improvement Program



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Final Report Template 2020-2021

Name of Organization:	
Project File Number:	
Project Contact:	
Contact Email:	
Telephone Number:	

The following questions must be answered in the final report. If you need more space, please answer questions separately in another document and attach.

1. What improvements to the facility were completed as a result of this project? Did you encounter any specific major problems?

2. How does this project improve the current community'sinfrastructure? How do these upgrades enhance access to services for the community?

3. Tell us how the completion of this project will contribute to the sustainability of the organization.

4. Please include images of the work completed, where possible.

PO Box 456

Halifax, NS B3J 2R5

5. Complete the budget report. Include copies of receipts or invoices for all costs associated. Invoices, receipts and volunteer/in-kind resources should equal the total project costs. The second (final 20%) payment will reflect the actual total spent, up to the total awarded amount or 75% of the total project costs, whichever is less.

Please provide statistics for volunteer hours associated with this facility/organization as it relates to the budget of the completed project. Donated resource form is available upon request.

Certification: *I certify that the information contained in the report is accurate and reflects the full scope of the completed project.*

Signature:	Title:
Name (Print): Name of Organization:	Date:
Send materials to:	
Attention: Communities Nova Scotia Department of Communities, Culture and Heritage	Telephone: (902) 424-5793 Fax: (902) 424-0710 E-mail: CommunitiesNS@novascotia.ca

2020-2021 CFIP - Final Budget

Applicant:

Project Name:

REVENUES AND CONTRIBUTIONS	Estimated Amount	Actual Amount	TOTAL	
Applicant's Contribution (10% minimum)				
Amount Granted from this Program				
Donated In Kind				
Other NS Government Departments Funding (specify below)				
Other Funding (specify below)				
Other Federal Funding (specify below)		•		
Corporate Sponsorships				
Municipality Funding (specify below)				
Other Sources of Funding (specify below)				
TOTAL - REVENUES AND CONTRIBUTIONS				

EXPENSES - List expenses below	Cash Out	Donated in-kind	TOTAL
TOTAL - EXPENSES			