



Gaston Arts Council
Individual Artist Grant Application Final Report

Email completed application to gac@gastonarts.org; or mail to P.O. Box 242, Gastonia, NC, 28053

Due date:

- Submit Final Report or proof of purchase(s) within 30 days after grant award.

• **Contact Information**

Artist Name: _____

Address: _____

Telephone: _____ Email: _____

• **Financial Information**

- 1. Funds received from Gaston Arts Council : 1. \$ _____
- 2. Funds received from other Sources (include In-kind data): 2. \$ _____
- 3. Total Expenses: 3. \$ _____

- **Certification** – Applicable receipts being submitted and I affirm that grant funds have been expended as stipulated in the application submitted to the Gaston Arts Council.

Signature

Print name

Date: _____