

**Deadline: July 29, 2016 at 5:00p.m. No exceptions will be made.**

**Richardson Cultural Arts Commission  
Arts Funding Grant Application  
2016-2017**

organization \_\_\_\_\_

street address \_\_\_\_\_

city \_\_\_\_\_ state \_\_\_\_\_ zip \_\_\_\_\_

date organization founded \_\_\_\_\_

name of representative completing application \_\_\_\_\_

title \_\_\_\_\_

phone 1 \_\_\_\_\_ phone 2 \_\_\_\_\_

e-mail address \_\_\_\_\_

contact name \_\_\_\_\_

title \_\_\_\_\_

phone 1 \_\_\_\_\_ phone 2 \_\_\_\_\_

e-mail address \_\_\_\_\_

organization's website address \_\_\_\_\_

amount of funds requested \_\_\_\_\_

season start date: \_\_\_\_/\_\_\_\_/\_\_\_\_ season completion date \_\_\_\_/\_\_\_\_/\_\_\_\_

fiscal year begins: \_\_\_\_/\_\_\_\_/\_\_\_\_ fiscal year ends \_\_\_\_/\_\_\_\_/\_\_\_\_

	Richardson only current season	Richardson only proposed season	all locations current season	all locations proposed season
# of performances				
tickets sold				
comp tickets				
non-ticketed attendees				
total season attendance				

**For CAC Use Only**

number \_\_\_\_\_ \$ recommended \_\_\_\_\_ \$ awarded \_\_\_\_\_  
date received: \_\_\_\_/\_\_\_\_/\_\_\_\_ time \_\_\_\_\_

**proposed season events schedule for Richardson and all other areas**

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<b>date</b>	<b>time</b>	<b>event</b>	<b>location</b>

**board of directors meeting schedule**

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<b>date</b>	<b>time</b>	<b>location</b>



### Total Season Expenditures and Revenues Estimation

Expenditures:	Column 1 Expenditures Paid by CAC	Column 2 Expenditures Not Paid by CAC	Column 1+2 Total Expenditures
staff salaries (not in-kind)			
professional services (not in-kind)			
facilities rental			
travel & transportation			
rentals (except facilities)			
supplies & materials			
publicity & promotion			
printing			
postage			
in-kind services (Itemize on separate sheet)			
other:			
other:			
other:			
<b>Total Expenditures</b>			
<b>Revenues:</b>			<b>Funds by Source</b>
CAC funds			
admissions			
sales			
membership			
individual donations			
corporate donations			
foundation support			
state funds			
in-kind services			
board member donations:			
other:			
other:			
<b>Total Revenues</b>			

**Expenditures and Revenues Estimation (Richardson Events Only)**

There is no need to complete this worksheet if all performances occur in Richardson.  
If all performances occur within Richardson - please check this box.

<b>Expenditures:</b>	<b>Column 1 Expenditures Paid by CAC</b>	<b>Column 2 Expenditures Not Paid by CAC</b>	<b>Column 1+2 Total Expenditures</b>
staff salaries (not in-kind)			
professional services (not in-kind)			
facilities rental			
travel & transportation			
rentals (except facilities)			
supplies & materials			
publicity & promotion			
printing			
postage			
in-kind services (Itemize on separate sheet)			
other:			
other:			
other:			
<b>Total Expenditures</b>			
<b>Revenues:</b>			<b>Funds by Source</b>
CAC funds			
admissions			
sales			
membership			
individual donations			
corporate donations			
foundation support			
state funds			
in-kind services			
board member donations:			
other:			
other:			
<b>Total Revenues</b>			

## Key Contributors

### top 10 individual financial contributions

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Name	amount

### top 10 corporate donations or sponsorships

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corporation	amount

**foundation support**

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foundation	amount

Please attach a copy of your organization's strategic plan.

## Assurances

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If the grant is awarded, the applicant gives assurances to the Richardson Cultural Arts Commission that:

- The season for which financial assistance is sought will be administered by or under the supervision of the applicant organization.
- All funds received will be used solely for the season described herein.
- The officials signing the application form have been authorized by the applicant organization to submit this application.
- The applicant shall retain a copy of the Richardson Cultural Arts Commission Arts Grant Guidelines and shall execute the grant by the rules stated therein.

We hereby certify that all figures, facts, and representation made in this report, including any attachments, are true and correct to the best of our knowledge.

**chief administrative officer:**

**representative completing application:**

\_\_\_\_\_  
**signature**

\_\_\_\_\_  
**signature**

\_\_\_\_\_  
**typed name**

\_\_\_\_\_  
**typed name**

\_\_\_\_\_  
**date**

\_\_\_\_\_  
**date**