



WARREN COUNTY
DIVISION OF CULTURAL & HERITAGE AFFAIRS

Shippen Manor
 8 Belvidere Ave
 Oxford, NJ 07863
 (908) 453-4381



LAP 2024 FINAL REPORT

This final report is required of all re-grantees during the FY 2024 grant cycle who have applied for and received funding from the Local Arts Program Grants through the Division of Cultural & Heritage Affairs.

| | |
|--------------------------------|---|
| Deadline for Submission | After December 1 and no later than Wed., Dec. 18, 2024 by 3pm* * Deadline has been extended, please adjust accordingly |
| Submission Methods | 1. Email as a one PDF packet to Gina (grosseland@co.warren.nj.us)-- preferred |
| | 2. Drop-off at Shippen (please coordinate with Gina for drop-off time/date) |

If you have any questions, please feel free to **contact Gina by phone or email.**

When completing the final report, please **type information** neatly.

| | |
|-------------------------------|--|
| Contact Person (print) | |
| Name of Organization | |
| Organization Address | |
| City/State/Zip | |
| Phone | |
| Email | |

All project monies must be expended and projects **concluded by December 31, 2024.**

Final payments will be released in 2025 by the State once the final report has been submitted and accepted. Please be sure to have posted or displayed the logo provided to demonstrate appreciation to the NJ Council on the Arts and the Division of Cultural & Heritage Affairs for grant funding.



Made possible by funds from the New Jersey State Council on the Arts, a partner agency of the National Endowment for the Arts.





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CHECK LIST FOR LAP FINAL REPORT (2024)

| | |
|-----------------------------|--|
| Name of Organization | |
|-----------------------------|--|

Please be sure to include all documents, in the following order, when submitting final reports.

Please sign documents as requested with original signatures (not digital).

Only submit documents listed below.

| ✓ | DOCUMENTS |
|---|--|
| | Check list (check off the list, include organization’s name)—page 2 |
| | Cover page (fill in organizational information)—page 1 |
| | Project/Program Data —page 3 |
| | Cultural Diversity —page 4 |
| | Presenter Data —page 5 |
| | Narrative —pages 7-11 |
| | Agreement —page 12 |
| | Publicity Release/Consent Form —page 13 |
| | Income Report (Excel) |
| | In-Kind Contributions (Excel) |
| | Expense Report (Excel) |
| | Summary of Projected & Actual Income and Expenses for all Organizations (Excel) |
| | Supplementary materials <ul style="list-style-type: none"> Receipts (showing paid), invoices for purchases (showing paid) and payment for artists/authors/presenters/performers (showing paid) Copies of brochures, pamphlets, flyers, programs, and other print materials (1 copy each) Screenshots of website/social media (include URL for websites) to show project/program Marketing & Advertising (radio spots, newspapers, other)—screen shots, copies, etc. (1 copy each) Photographs of project/programming (color)—print or digital (good quality, no more than 1-2 per page) Other |

LAP (24) FINAL REPORT: PROJECT/PROGRAM DATA

| | |
|-----------------------------|--|
| Name of Organization | |
|-----------------------------|--|

The data requested in this final report is required and needs to be accurately provided to the State of New Jersey.

| ARTS ACTIVITIES SUPPORTED BY THIS GRANT | | | | | | | |
|--|-------|-------|------------|--------------------|---------|-------------|------------------|
| <i>Enter the number of events. Each activity = one event</i> | | | | | | | |
| Total # of Activities | Music | Dance | Literature | Multi-disciplinary | Theatre | Visual Arts | Other (describe) |
| | | | | | | | |

| AUDIENCE | | | |
|--|--------|---------------------|-------|
| <i>*Regardless of how many programs a person attends, they must be county only once as having benefitted</i> | | | |
| | ADULTS | CHILDREN (under 18) | TOTAL |
| Attendance | | | |
| People Benefitting* | | | |

| ARTISTS | |
|--|--|
| <i>*Regardless of how many programs a person attends, they must be county only once as having benefitted</i> | |
| Number of Adult Artists Presenting | |
| Number of Adult Artists Benefitting* | |

| BUDGET INFORMATION | |
|--|----|
| Total In-Kind Value | \$ |
| Amount requested on grant application | \$ |
| Total grant award | \$ |
| Actual cash match amount (not required for FY 2024) | \$ |
| Total project expenses (FY 2024) | \$ |
| Amount spent on Arts Education (FY 2024) | \$ |

| | |
|---|---|
| Percentage of Arts Budget spent on Arts Education (FY 2024) | % |
|---|---|

LAP (24) FINAL REPORT: CULTURAL DIVERSITY

| | |
|----------------------|--|
| Name of Organization | |
|----------------------|--|

| | |
|---|--|
| Cultural Diversity Participation | <p>For the purposes of our report to the State, minority refers to the following racial and ethnic categories:</p> <ul style="list-style-type: none"> • American Indian or Alaskan Native • Asian or Pacific Islander • African American • Not of Hispanic origin • Hispanic/Latino <p>Please indicate which minorities when answering the following questions.</p> <p>Be as accurate as possible.</p> |
|---|--|

Of the **total number** of individuals benefitting, **estimate the number** of actual minorities benefitting by ethnic categories as well as you are able.

| Minority Groups | Total Number of Individuals Benefitting |
|--|---|
| American Indian or Alaskan Native | |
| Asian or Pacific Islander | |
| African American, not of Hispanic origin | |
| Hispanic/Latino | |

*Regardless of how many programs a person attends that person can only be counted **once** as having benefitted.
For a category without a number, insert “0” (zero).*

LAP (24) FINAL REPORT: PRESENTER DATA

| | |
|-----------------------------|--|
| Name of Organization | |
|-----------------------------|--|

If you have more presenters than there are space below, add an addendum to your final report (“Presenter Data”)

| Date(s) Presenter’s Name Ethnicity | Complete Contact Information Address Phone Email | Describe Type of Art | Cost | Attendance | Program Quality Comments |
|--|---|-------------------------------------|----------|------------|---|
| 04/04/2024 James Smith African American | 4 Main Street Town, State Zip Code (908) 555-1212 JSmith123@email.com | Vocal jazz concert & workshop | \$600.00 | 400 | Engaging Appropriate for all ages Interactive opportunities Gives discount for more than two workshops |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

LAP (24) FINAL REPORT: NARRATIVE

| | |
|-----------------------------|--|
| Name of Organization | |
|-----------------------------|--|

| FINAL NARRATIVE | |
|--|---|
| Five (5) Sections for Narrative | <ul style="list-style-type: none"> Keep it simple & clear Include information that will help us to better understand your successes better Include non-returnable images (digital is fine) that show audience interaction with presenters |
| Images & Release Form | <ul style="list-style-type: none"> Digital or print images must be labeled with organization name, date and program/event All digital or print images are 4" x 6" or 5" x 7" in size and are very good quality, clarity. All images must be in color All images must be accompanied by approval and releases that WCCHA and the NJSCA can use for publication Provide completed release form |
| Narrative Formatting | <ul style="list-style-type: none"> Complete narrative on this report (not as a separate document) Fill-in PDF (medium-sized font, not too small, needs to be readable) Address each point separately Outline format is acceptable as long as all information is provided One (1) copy of your report is required (please do not send duplicates) |

LAP (24) FINAL REPORT: NARRATIVE

Do not omit answers. These are required for your final report.

| | |
|--|---|
| Name of Organization | |
| Arts Program & Audience <i>(This refers to your programming in 2024, including but not limited to all programs funded by NJSCA monies.)</i> <i>If you need additional space, go to a blank page, label and continue your statement.</i> | 1. How have you achieved your program's goals? In what way did the public benefit? |
| | |
| | 2. How do you evaluate the artistic quality of your program? |
| | |

3. Describe audience demographics: race, ethnicity, age, income level, education level, disabilities, etc. as well as you can.

4. List any awards, interviews, recognition, etc. related to your 2024 arts programming.

| | |
|---|--|
| Anecdotes & Audience Impact <i>(The State likes anecdotes!)</i> | 1. Include audience anecdotes indicating the public value of your arts programming. |
| | 2. Describe your audience's reaction to your arts program. |

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|---|---|
| <p>Accessibility</p> <p><i>(This is an important aspect of the Arts grant. Please be cognizant of the needs of all, and if able, provide reasonable accommodations.)</i></p> | <p>1. Describe the accessibility of your location/site and any plans for improvement.</p> |
| | |
| | <p>2. Describe your organization’s accessibility plan and ADA grievance procedure. If it is located on your website, please include the web address.</p> |
| | |

**Marketing &
Outreach**

1. What type of advertising did you use? Was it effective?

2. What is the percentage of your budget that was used for marketing for your program(s)?

| | |
|--|---|
| | <p>3. In what manner did your organization direct marketing towards underprivileged and diverse communities within the County?</p> |
| <p>Administrative/ Personnel (Paid staff, volunteers)</p> | <p>How many people help with your arts program? Identify actual hours.</p> |



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LAP Grant Final Report (2024)



FINAL REPORT AGREEMENT

| | |
|-----------------------------|--|
| Name of Organization | |
|-----------------------------|--|

Final report must show the **project was completed, all grant funds expended** and final packet **includes complete documentation** (copies of receipts and canceled checks may be requested) of all arts project expenses as per agreement guidelines. All signatures must be original, not digital.

We, the undersigned, certify that to the best of our knowledge the statements made in this final report are true. These are the same two individuals who signed the application and agreement.

Please sign in BLUE or BLACK ink. No digital signatures accepted.

| | |
|--|--|
| Project Director <i>(print name)</i> | |
| Projector Director <i>(signature)</i> | |
| Date | |
| Address | |
| City/State/Zip | |
| Phone | |
| E-mail | |
| Authorizing Official <i>(print name)</i> | |
| Authorizing Official <i>(signature)</i> | |
| Date | |
| Address | |
| City/State/Zip | |
| Phone | |
| E-mail | |



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LAP Grant Final Report (2024)



PUBLICITY RELEASE/CONSENT FORM

*I hereby consent to, and authorize, the Warren County Cultural and Heritage Affairs, a Division of the Department of Land Preservation, and the New Jersey State Council on the Arts and/or its program partners to reproduce the **included visual images** without limitation for publication. I understand and accept that publication of the visual images is provided without compensation to me, my organization and/or my associates. Performing Arts Directors may sign for entire company.*

| | |
|---|--|
| Name of Organization | |
| Printed Name | |
| Signature <i>(Actual not digital)</i> | |
| Date | |

Include up to four (4) photographs as digital or printed (4"x6" or 5"x7").
Please obscure faces of minors.