



Post-Production Worksheet

Fill out this form to obtain payment for a grant that was previously awarded.

MCEF's Mission Statement:

MCEF's goal is to help fund quality performing arts events in the Treasure Valley by subsidizing production costs of local arts groups and sponsoring performances of national and international artists. We look forward to partnering with you to bring a positive impact to our community.

James Patrick Focarile, Vice-President
Bonnie Wilkerson, Grant Committee Chair

Important Definitions:

Theater is defined as a structure that contains rows of permanent seating before a stage area where a performance is given to an audience.

Event is used to denote an entire production, ie. the entire run of the Nutcracker.

Show is used to denote one performance of the event, ie. Saturday matinee of the Nutcracker.

Payment Procedure:

Fill out the Post-Production Worksheet only after the completion of an event for which you received a grant award. We do ask that you return this request within three months of the event. If you need more time, please contact us at grants@morrisonendowment.org. Be aware, we may not reimburse all expenses related to your event.

Following a MCEF staff review of this worksheet, a check will be issued by the Morrison Center Endowment Foundation to your organization.

Required Attachments:

1. Event Invoice Summary

Attach a summarized list of vendors and a total of every invoice you wish to have reimbursed then put the total amount of the reimbursement requested at the bottom. You only need to list vendors that qualify for reimbursement. See the example below. You can create this in a spreadsheet or word processing format.

theater	\$30,000
guest performer 1-name	\$5,700
guest performer 2-name	\$4,650
costume creation-name	\$1,000
program printer-name	\$500
newspaper ad 1-name	\$300
newspaper ad 2-name	\$150
other expense-name	<u>\$550</u>
Total to be reimbursed	\$42,850

2. Individual Invoices

Attach scanned copies of all invoices that you wish to have reimbursed that coincide with your list above. Add as many attachments as you need.

3. Event Attendance

To determine the effectiveness of our grant we track attendance data for each event we fund. Please provide:

- Number of seats available in the theater.
- Number of shows that charged admission.
- Number of shows that were free.
- Number of tickets comped (for a free show this will be equal to the show's attendance).
- Number of tickets sold (for shows that charged admission).

4. Event Collateral

Attach one example of your event collateral (e.g., program, event t-shirt) that acknowledges MCEF.

5. Event Images (Optional)

You may add 2 of your best photos from the event.

Please complete the form below:

Post-Production Worksheet

Organization's name: (required)

Name field

Organization's Tax ID Number/EIN (required)

Please enter your organization's EIN in this format: 12-3456789

Number field

Has the any of the organization's key information changed since the application? (required)

Single choice buttons of yes or no

If "yes"

Organization's address:

Address fields

Organization's phone number:

Phone # field

Organization's chief executive's name:

Name field

Executive's e-mail:

Email field

Executive's phone number:

Phone # field

Only enter if different than the organization's phone number.

Executive's phone extension:

Number field

Leave blank if none.

Grant worksheet writer's e-mail (required)

Email field

Worksheet confirmation will be sent to this email.

Grant worksheet writer's name (required)

Name field

Grant worksheet writer's phone number

Phone # field

Only enter if different than the organization's phone number.

Grant worksheet writer's phone extension

Number field

Leave blank if none.

Event name (required)

Drop down of outstanding events

Did the event name change from the name on the application? (required)

Single choice buttons of yes or no

If yes

Current event name

Text field

What grant cycle are you reporting on? (required)

Grants are awarded twice a year: once in January and once in July. Please select when your grant was awarded.

Amount of reimbursement you are applying for (required)

field

Do not include "\$" or ","

Event opening date: (required)

Date field

Event closing date: (required)

Date field

Attach a summarizing list of vendors and invoices-Attachment #1(required)

File upload

Follow example in directions, "Information about Worksheet Attachments", item #1.

Individual Invoices-Attachment # 2 (required)

File upload

Attach a copy of all the invoices you wish to have reimbursed.

Theater where the event took place: (required)

Short text field

Theater's seating capacity (required)

#field

For example, the Morrison Center holds close to 2000.

If there is an electronic ticketing report-Attachment #3

File upload.

If there was an electronic ticketing report, please attach.

Number of shows that were ticketed (required)

Number field

Number of shows that were entirely free (required)

Number field

Number of tickets sold (required)

Number of tickets comped (required)

For events with free admission, this will be the same as the total number of people attending.

Total number of people attending the event (required)

Please use your ticketing report for this number. We are looking for the total number of people present throughout the course of the event, not the number of tickets sold/comped. If you don't know, enter your best guess.

Event collateral-Attachment #4 (required)

File upload

An example of event collateral that acknowledges the MCEF. To conserve space, please limit this to one attachment of your best example. This can be a scanned sample or a photographic image.

Quick summary of your final impressions from this event: (required)

Long text field

Keep it short. One paragraph is fine.

Event Images or other information

File upload

Optional: attach images or other information from your event. Limit this to 2 of your best photos.

Submit Post-Production Worksheet

Button