

STATE POET LAUREATE FINAL REPORT

Deadline: Within 60 days of the conclusion of the funding period.

Send completed application to: An-Ming Truxes, State Poet Laureate,
Connecticut Commission on Culture & Tourism, One Constitution Plaza, 2nd Floor, Hartford, CT 06103

GRANTEE INFORMATION

Grant Number _____ Grant Amount: \$ _____

Name _____

Mailing Address _____

City/State/Zip _____

Telephone _____ Website _____

E-mail _____

SUMMARY AND STATISTICS

Short description of your poet laureate activities for the past five years (ex: readings, special projects).
Attach support materials.

FOR OFFICE USE: App # _____

FINANCIAL REPORT

ACTUAL CASH EXPENSES

Administration expenses \$ _____
Artists Fees for Readings \$ _____
Technical/Production \$ _____
Facility & Equipment Rentals \$ _____
Printing/Publicity \$ _____
Supplies \$ _____
Conferences you attended \$ _____
Other _____ \$ _____

TOTAL CASH EXPENSES \$ _____

CCT Grant Amount \$ _____

TOTAL CASH REVENUE \$ _____

CERTIFICATION

I certify that the amounts reported here are correct, that they appear in the official records of this organization or in my personal files and that these records (which will be maintained for a period of not less than 3 years) are available for audit by the state and/or federal government.

Name _____ Title _____

Signature _____ Date _____