

SPECIAL EVENT ADDITIONAL SUPPORT (SEAS)

FINAL REPORT

	Grant Period: _	to			
Organization Name: _					
Address (Mailing):					
City:	Zip Code	Email:			
Amount of Grant:		Total S	Spent:		
Program/Event Title:					
Program/Event as des	scribed in application/c	contract:			
Were there changes to	o the application/conti	ract? □YES	□NO		
If yes, please explain	the reason for the cha	anges.			
How was the City reco	ognized/acknowledged	l as a contributo	or/sponsor? (Ple	ase attach docu	mentation
				<u> </u>	

FINANCIALS

Please provide your actual costs for City Support Services below

Service Type	Department/Division	What is Covered	Total Cost
Event Site Staffing	PRCA	Fees related to staff required to be onsite for oversight of City property.	\$
Site Clean-up	Parks Division	Removal of debris and trash from event site	\$
EMS/Paramedic	Gainesville Fire Rescue	First aid and emergency response Required for all athletic events	\$
Event Security	Gainesville Police Department	Police officers to roam site to mitigate public safety issues	\$
Reserved Parking		See no parking signs	\$
Waste /Recycling	Solid Waste	Waste and recycle boxes	\$
Street Closures		Required items listed below	\$
Barricades	Traffic Division	Type II and/or III barricades, cones and detour signs to reroute traffic	\$
No Parking Signs	Traffic Division	Printed, laminated and placed. Signs will be in place the day before the event starts.	\$
Traffic Control	Gainesville Police Department	Police officers to monitor vehicle and pedestrian traffic to mitigate public safety issues	\$
TOTAL COST			\$

GRANT IMPACT

Please describe how this	s event benefited the co	mmunity as a whole.	

How many individuals attended	Amount	Comments
Туре	Amount	Comments
Youth (Ages 0-17)		
Adults (18-64)		
Seniors (65 & up)		
Total Attendance		
Free/Paid Attendance		
Туре	Amoui	nt
Free Entry		
Paid/Ticketed Entry		
your event included any paid/ticketed a	attendees, plea	ase explain
your event included any paid/ticketed a		ase explain
Participants/Volunteers/Vendor	rs.	
		Comments
Participants/Volunteers/Vendor Type	rs.	
Participants/Volunteers/Vendor	rs.	
Participants/Volunteers/Vendor Type How many artists participated? How many staff members were involved?	rs.	
Participants/Volunteers/Vendor Type How many artists participated? How many staff members were	rs.	
Participants/Volunteers/Vendor Type How many artists participated? How many staff members were involved? How many volunteers participated? Total number of volunteer hours	rs.	
Participants/Volunteers/Vendor Type How many artists participated? How many staff members were involved? How many volunteers participated?	S Number	Comments

Email report to prcagrants@cityofgainesville.org
or mail to
City of Gainesville Cultural Affairs Division
P.O. Box 490, STA 30
Gainesville, FL 32627.