



**County of Volusia
ECHO Grants-in-Aid
2012 Annual Report Request Form**

INSTRUCTIONS: You have received this letter because your project is either 99% or 100% complete. Please fill in the contact information and complete all the questions below. You may key your answers into the form directly. **Annual reports track from July 1 to June 30 of each year.**

This Annual Report meets the reporting requirement set forth in the ECHO Grant Agreement. This report is **due to the ECHO office on or before July 16, 2012.**

You may email the completed form to sharris@co.volusia.fl.us. Should you have any questions, please call Sedrick Harris at 386-740-5210.

GRANT #:	MAILING ADDRESS:
FACILITY NAME:	EMAIL:
SITE ADDRESS:	PHONE NUMBER:
NAME OF PERSON COMPLETING THIS REPORT:	

I. HOURS OF OPERATION / PUBLIC ACCESS

1. Is the facility fully open to the public (Yes or No)? If not, state when you plan to open (month/year).
2. What are the regularly scheduled days/times this facility is open (Do not include special events)?
3. Are the regularly scheduled hours of operation seasonal (yes/no)? If yes, state the time periods your facility was closed.

II. PROGRAMS

1. Does your facility offer classes or other scheduled programming (Yes or No)? If yes, please explain in the space below or attach a schedule to this form, including the age group(s) your programming serves.

2011 – 2012	
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2. How many special events were held (festivals, tournaments, community meetings, weddings, or other events)? Of the total, what number was ECHO related?

	# Total Events	# ECHO
2011 – 2012		

III. POPULATION SERVED - for this section, include only ECHO related events / programs.

Due to the varied nature of the ECHO facilities, staff has developed a preferred methodology of determining population served. These methodologies are listed in order of preference by the ECHO staff with the most accurate listed first and the least accurate listed last. You will use the methods listed here to answer questions 1-4 of this section. If you have any question as to which method to use or which table to use for your facility please do not hesitate to call the office to discuss your options. **Include only ECHO related activities held at the project facility in your customer counts.**

1. Admission, Ticket Sales, Clicker Count, Registration (**Table A**)
2. Members/League (**Table A and/or Table B**)
3. Sign-In Sheet (unattended) (**Table A**)
4. Scheduled Periodic Head Count (4 times per year) (**Table C & A**)

- Outdoor Active Parks should include players in all leagues scheduled for play at your facility in **Table B**, all spectators entering the complex and special event customers should be accounted for in **Table A** under “Event Attendees.” Private rentals should be included under “Event Attendees.”
- Outdoor Passive Parks, Beach Parks, and Trail facilities should pick the busiest day/hour for each quarter, January, April, July and October. Use a similar day/time each quarter, such as the 1st Wednesday from 1pm to 2 pm. These counts should be averaged for the quarter and used as a daily count for all days the facility was open to the public during that quarter (**Table C**). If the facility rented space for events or for a festival, put those counts in **Table A** under “Event Attendees.”

1. What method(s) do you use to track the number of customers coming into your facility from the list above?
2. Determine your customer count using tables A, B, C, or combination (if appropriate) and put the total customers in the space labeled “**Box D.**” Please read all tables before beginning in order to better understand this section. Only provide counts relative to ECHO related events.

A	Memberships		Walk-ins (non-members)		Special Event Attendees (non-members)		Total
2011 – 2012		+		+		=	

(Treat tour groups as walk-ins)

Outdoor Active Sports Parks (add more rows as needed)

B	League Type	# Members		Plays Per Month		# Months Played		Total
2011 –2012			X		X		=	
2011 –2012			X		X		=	
2011 –2012			X		X		=	
2011 –2012			X		X		=	

(Spectators for Outdoor Sports Parks should be reflected in “Event Attendees,” Table A.)

Outdoor Passive Parks, Beach Parks, & Trail Facilities

C	1 st Quarter		2 nd Quarter		3 rd Quarter		4 th Quarter		Total
2011 – 2012		+		+		+		=	

Total Customers 2011-2012 Fiscal Year: Box D

3. What percentage (%) of customers (Box D) are repeat customers?

Year	Percentage	Estimated? Y/N
2011 – 2012	%	

4. What percentages (%) of customers (Box D) are low income or underserved populations?

Year	Percentage	Estimated? Y/N
2011 – 2012	%	

5. How do you accommodate low income households/individuals? Check method(s) and/or describe “Other.”

Free days	
Sliding scale based on income	
Scholarships	
Other/ <input style="width: 150px; height: 20px;" type="text"/>	

IV. OPERATIONS / BUDGET

The purpose of this section is to understand the financial outlook of the organization. Include all categories of your organization's income in the table below. Use the 'Other' category to identify your organizations unique line items, including Endowments. Add lines for "Other" categories as needed. The Revenue section should be completed for all facilities receiving income. The "Operational Expenses" section should be completed by all facilities, including Cities and Municipalities.

1.

Budget – Questions are related to the period of July 1, 2011 - June 30, 2012	
Expenses:	2011 / 2012
Total Operational Expenses:	\$
Revenues:	
Fundraising:	\$
Membership Fees:	\$
Cash Donations:	\$
Operational Grants:	\$
Other/	\$
Other/	\$
Total Revenues:	\$
Total number of volunteers:	
Total number of volunteered hours:	
Total number of paid full time employees:	
Total number of paid part time employees:	
Total number of contracted service providers (lawn care, caterers...):	
Total value in-kind services:	\$

2. For pre-existing facilities, how did the ECHO project affect your operational costs? Check one.

Increased Expenses	<input type="checkbox"/>
Decreased Expenses	<input type="checkbox"/>

V. PARTNERSHIPS

On a separate page, attach to this report a list of all partnerships that this facility/organization has with local groups, including other non-profit groups, civic groups, or tourist development entities. Also include a brief explanation of each partnership.

Examples:

Little League of Town USA: sponsored ___ # of seasonal games for a rate of \$_____.

Local Chamber of Commerce: shares cost of promotional materials.

Town USA Theater Troupe: co-hosts one show a season, shares an administrative staff person.

Town USA Municipality: shares grant writing staff and 1/2 of facility maintenance costs.

Friends of Town USA Park: coordinates volunteer litter clean up once a month.

VI. OUTLOOK

1. Does your organization have plans for increasing or decreasing total employees at this facility in the upcoming year? Please mark an X in the box that describes your intentions:

Reduce	Add	Maintain
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. Does your organization have plans for increasing or decreasing total contracted services at this facility in the upcoming year? Please mark an X in the box that describes your intentions:

Reduce	Add	Maintain
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>