****

Ref:

**FINANCIAL INFORMATION AND CLAIM FORM 2019-20 (if evaluation submitted online)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Project/Event:** |  | **Lead Partner:** |  |
| **Orchestra:** |  | **Project Date:** |  |

Please give the final statement for the project, as follows:

|  |  |  |  |
| --- | --- | --- | --- |
| **Income (excluding OL)** | **£** | **Expenditure** | **£** |
| Ticket Sales |  | Artistic Fees: Concerts |  |
| Programme Sales |  | Artistic Fees: Projects |  |
| Advertising Income |  | Music Hire / Piano Hire/tuning |  |
| Sponsorship Income (Name): |  | PRS Fees |  |
| Venue Hire |  |
| Trusts/Foundations Grant Income  (Name): |  | Digital (incl digital marketing costs) |  |
| Other Marketing |  |
| Management & Staffing Costs |  |
| Other public funding (please specify): |  | Overheads |  |
| Other costs (please specify): |  |
| **TOTAL INCOME** |  | **TOTAL EXPENDITURE** |  |
| **DEFICIT (total income – total expenditure):** | |  | |

**Estimated value of in-kind contributions** (if applicable)

|  |  |  |
| --- | --- | --- |
| ***Amount*** | | ***Details*** (e.g. management, staff time, venue hire etc) |
| **£** |  |  |
| **£** |  |  |

**FUNDING**

Please note that allocations are in the form of a grant, which does not attract VAT, and these funds are only payable if this project has made a financial loss.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | ***Name of Partner that has Partnership Agreement with OL*** | | **Allocation** | |
| **Partnership Fund** |  | | **£** |  |
|  | | **£** |  |
| **Programme Funding from Orchestras Live** | | | **£** |  |
|  |  | **CLAIM AMOUNT\*** | **£** |  |

*\* Please note that these fund allocations are a guarantee against loss for this project.*

**PAYMENT DETAILS**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **BACS Details** | | Account Name |  | | | | | |
| Account No. |  | | | Sort Code | |  |
| Email address for notification of BACS payment: | | | |  | | | | |
| **OR**  **Cheque Details** | | Cheque payable to: |  | | | | | |
| Send to: |  | | | | | |
| **Name** |  | | | | **Date** | |  | |
| **Signed** |  | | | | | | | |

###### Please return this form and invoices to [tom@orchestraslive.org.uk](mailto:tom@orchestraslive.org.uk)