## Western Lane Community Foundation

## **Grant Activity Final Report**

Na	me of Organization:	Date:	
	_		
Со	ntact Name:	Title	
Daytime Phone:		Email:	
	7 below and return to WLC  We are requesting an exte funded project budget. Co	shed and funds were spent as approved. <i>Complete 1, 2, 3, 4, 5, 6, on or before September 30</i> , or sion in the completion of our grant OR an amendment to our plete 8, 9 below and return to WLCF immediately, or en cancelled or will not be completed as requested in our granting is enclosed.	
1.	To what extent have the goals achieved? Provide a summary	f your project/program set forth in your application been	
2.	How did your measure the sucresults?	ess of this project/program. What were the quantitative	
3.	If this is a continuing project/	ogram, has funding been secured for the future and how much	?
4.	How did your organization ac	owledge WLCF's award? Please attach a copy of what was	

**Your success stories are important.** Please take a moment to complete 5, 6 & 7 so we may incorporate with other success stories and use to demonstrate the value of local grants to prospective funders.

- 5. Tell us about a particularly *successful aspect* of your project that you think other organizations should know about.
- 6. Tell us about a specific *participant* who really benefited from your project.

published.

7. Include a photo with captions that shows your *project in action*. (Inclusion of photo grants WLCF permission to use photo in print and posted materials. Photo credit will be included where possible.)

If requesting an extension or amendment to the project budget, please complete below and return to WLCF immediately. Please attach all related documents for our review and consideration.

- 8. When did you learn of the need to ask for an extension or amendment?
- 9. For what reason/s are you requesting an extension or amendment to your project budget? Please be very specific.