

**Grant final report form**

This form is used to help track the results and impact of grants made by the Wisconsin Custom Operators. This form must be completed to receive the final 50% payment of the grant. Final reports are accepted on a rolling basis but must be submitted no later than Dec. 31 of the year following the award. The sooner final reports are received, the sooner payments will be issued.

**Report date: Period of time the grant covered:**

|  |  |  |
| --- | --- | --- |
| **Amount of grant award:** |  |  |
| **Organization name *(if applicable):*** |  |  |
| **Address:** |  |  |
| **City:** | **State:** | **Zip:** |
| **Contact person:** |  |  |
| **Phone number:** | **Email address:** |
| **Website:** |  **Twitter:** |  |
| **Facebook:** | **YouTube:** |  |
| **Purpose/description of grant:** |

# **Results**

Wisconsin Custom Operators communicates regularly with our members and stakeholders. We understand that even the best planned and organized programs may encounter unexpected success and challenges, which often provides excellent learning opportunities. We are interested in what you discovered and learned by doing this project, as well as how the custom farming community may have been impacted. Please attach any photos, news stories, testimonials or any other “third party” documentation of the impact of your project. Recipients may be asked to share their project at the annual Forage Symposium or other event. Content from final reports will be shared in the WCO newsletter and social platforms.

**What were the original goals of this grant?**

**Have those goals been achieved?**

**How did this grant and the project it funded impact farmers, custom farmers or the ag community?**

**What measurements did you use to evaluate the program? Please list any measured results.**

**In addition to measured results, what other important lessons were learned that can be shared with the ag/custom farming community?**

**Please tell us how you credited or promoted the Wisconsin Custom Operators during the grant period:**

# **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

# **Signature of main contact:**

# **Date:**

# **Attachments:**

# *Please include all that apply*

# **Photos/video**

# **News clips**

# **Press releases**

# **Testimonials**

# **Social media mentions**