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**SPACE Final Report Form**

**(Small Projects and Community Events)**

Date       Name of Organization

Project Coordinator Name           Phone      

Project Title

Please attach any photographs, articles, reports, etc. that best illustrate and document your event or project. Include this form with your request for reimbursement, or, if you received payment up front, mail us this form when your event or project is complete. Please send completed report and documentation to Suzanne Easton, Grants Program Manager at [Suzanne@emswcd.org](mailto:Suzanne@emswcd.org) or mail to EMSWCD, 5211 N. Williams Ave, Portland, OR 97217. Please call us if you have any questions: 503-935-5370.

Briefly describe your project or event, and its successes. Please include metrics such as how many people attended or were served, number of volunteers, number of native plants and trees planted, acres or square feet of habitat restored, etc.

How were EMSWCD funds used? What did this funding contribute to your project or event?

If you were to conduct this project or event again, what would you do differently?

Additional notes or comments: