KMTA Reimbursement Request

PROJECT NARRATIVE

2020

Date of Request:

Name of Person Making Request:

Email Address:

Name of Sponsoring Organization:

Mailing Address (include city & zip code):

Phone Number:

**Name of Grant Project or Program:**

**Date of Award:**

**Reimbursement Request Amount $:**

**Match Amount $:**

**Description of Project and Status (i.e. is the project complete? If not, what remains) Please note any changes in your project that might vary from the original project proposal.** (1-2 paragraphs)

**Please answer the following questions:**

1. How did your project increase public awareness and appreciation for the natural, historic, scenic, and cultural resources of the KMTA National Heritage Area?

2. How many people participated in your project?

3. Who were your formal project partners and how were they involved?

Who were your informal project partners and how were they involved?

4. How was KMTA recognized in the project?

5. Did you accomplish project objectives & activities? Please specify how you measured your success and how each project objective was met. (i.e. # miles of trail maintained; # of historic documents/ items preserved; # of historic buildings preserved; # of people reached/ participants)

6. How will this project benefit KMTA Heritage Area and people who visit or live in the corridor into the future? How will the project results be maintained to ensure longevity?

\*Include photographs if available. Unless specifically prohibited by the grantee KMTA CCA may include this information and photos in press releases and promotional material.

When complete, email to katherineschake@kmtacorridor.org accompanied with Expense report and proper documentation.

If you have any questions, please contact Katherine Schake at katherineschake@kmtacorridor.org (Program Manager), or Jessica Szelag at jessicaszelag@kmtacorridor.org (Executive Director).