WISCONSIN ARTS BOARD

GRANT PROPOSAL REVISION REPORT

Instructions: If your Wisconsin Arts Board award is less than your grant request and/or the amount for which you were eligible, complete this form and return it with your signed Grant Agreement contracts.

Part I

Grantee Name _____ Grant Number _____

Project Title or Purpose for which funds were requested:

Part II

Indicate how you intend to compensate for the reduction in Wisconsin Arts Board funds and outline any changes in your original proposal which may occur:

Please check all that apply:

_____ We will increase the amount of funding that we raise from other sources for this project.

We will increase the amount of cash that we contribute to this project from our own organizational budget.

_____ We will modify the project in the following way(s):

Prepared by (Print) _	Title
Signature	Date