

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 _____