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| **SECTION A: PROJECT INFORMATION** |
| **Project Title:**      | **Project Number:**      |
| **Interim Report accompanies each invoice.****Period Cover by Report:**  | **Interim Report:**  | **Final Report:**  |
| **Project Lead (Name, Title, and Organization)** |
| **Mailing Address:** |
| **Phone:** | **Email:** |

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| **SECTION B: SUMMARY OF WORK COMPLETED** |
| **Project Progress:*** Summarize project progress for the period covered by this *interim* report.
* OR summarize *final* project, since the project commenced.
* Highlight key milestones as listed in the original project proposal and explain how they have been accomplished.
* Explain any deviations from the original project proposal.
* Provide revised milestones if necessary.
* Describe any technology and knowledge transfer activities that have taken place in this fiscal year (publications, workshops, presentations, reports, etc.)
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| **SECTION C: SUMMARY OF EXPENDITURES** |
| **Description of eFRI Funds Spent: The Forestry Futures Trust Committee requires confirmation that funds are being spent as outlined in the project budget.** * Present the current yearly expenditures on the two spreadsheets provided in the Section E: Project Financial Tracking document.
* Provide additional description of how funds were spent, (i.e., number of people employed (person days), conferences attended, workshops and publications, etc.)
* Provide a brief summary of any significant deviations from planned project expenditures, reasons for differences and implications for the project.
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| **Description of In-Kind Contributions:** * Present the current applicant contributions using the provided Financial Tracking form,
* Explain any deviations from planned in-kind contributions.
* Provide an update on new partnerships (if any).
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| **SECTION D: DECLARATION** |
| I hereby certify that the above is a true and accurate report of work completed during the reporting period noted on page one of this report. |
| **Project Lead Authorization:** |
|       |  |       |
| Name and Title (Print) |  | Institution |
|  |  |       |
| Authorized Lead Signature |  | Date |
| **Institution Authorization (university, college, company etc):** |
|       |  |       |
| Name and Title (Print) |  | Institution |
|  |  |       |
| Authorized Institution Signature |  | Date |