



Fort Caspar
Chapter,
NSDAR

PROJECT COMPLETION REPORT

Name: _____ Title: _____ Submission Date: _____

Project Details	Project Title:
	Date of Completion:
	Total Cost: \$
	Number of People Involved:
	Area of Focus: Historic Preservation Education Patriotism
	Committee(s): _____

Expense Breakdown

Item Description	Cost	Chapter Expense	In-Kind Donation
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		

***If more room is needed, please attach additional expenses with final report.

Final Report

Please attach a one-page summary. This should include a timeline of steps, the scope/ reach of the project, any prospective members gained, additional plans for the future if any, etc. Also include any flyers, invitations, programs, scripts, and pictures.

Reimbursement Requests

If reimbursement was approved, please also prepare the proper form and provide all necessary receipts.

Completed reports should be sent to: FortCasparChapter@WyDAR.org.