

**PUBLIC SERVICE COMMISSION OF WISCONSIN
UNIVERSAL SERVICE FUND**

**NONPROFIT ACCESS GRANT PROGRAM - FY12
FINAL REPORT OUTLINE**

1. Organization (name and address)

*ABC Nonprofit Organization
123 Anywhere in Wisconsin Ave.
City, Wisconsin*

2. Project Contact (name, phone number and e-mail address)

*John Doe
(555)555-5555
John.Doe@ABC.org*

2. Grant Award (\$)

\$15,000.00

3. Location(s) receiving services from the project.

Dane County, Brown County, Vilas County, Etc.

4. Approximate beginning and end dates for using grant funds.

June 1, 2012 – June 30, 2013

5. Describe how this project improved access to essential telecommunication services or information services. Refer to project goals and outcomes from the original application (use quantitative and qualitative information). Note any changes and adjustments made during the project.

Narrative.

6. Describe how the project did or did not meet expectations. Provide anecdotal examples, if possible.

Narrative.

7. Describe any problems encountered in project development or during project operation.

Narrative.

8. Describe any changes that would improve the Nonprofit Access Grant program:

Narrative.

9. Sign, date and mail to: Chela O'Connor, USF Manager
Public Service Commission
P.O. Box 7854
Madison, WI 53707-7854

NOTE: The final report should be submitted when the final reimbursement request (Financial Summary Statement) is filed with the Public Service Commission.