

CSCB Matching Grants Program: Quarterly Report - 2025

Quarter Dates:

District:

Project Title:

Sections 1-4 must be completed as project activity occurs but need only be completed once. Sections 5-7 must be completed for every report. Please ensure Project Coordinator authorization at end of report and e-mail reports to the CSCB Grant Administrator by the 20th of the month following the calendar quarter end (cda_cscbgrants@state.co.us).

1. Which of the following method(s) will the District use to track CSCB funds received and spent and matching funds for this program:

- a) Separate account
- b) Matching Grant funds/match coded within mixed account
- c) Spreadsheet tied to account activity
- d) Other –please explain

2. If your project includes engineered structural practice(s), give the name and affiliation (e.g. NRCS or business name) of the engineer that will be overseeing certification of design and installation. If other than NRCS this person must be a professional engineer (please also provide business address and phone number in this instance).

3. If the project is an open cost-share project please address the following (attach copies of project ranking criteria and policies as developed or explain if not formally developed; document if the process changed from what was depicted in your initial application)

- (a) What methods were used to solicit applicants for cost-share?

<p>(b) What criteria were developed to assess and rank applications?</p> <p>© By whom were projects selected for funding?</p>	
<p>4. Is baseline photo documentation being gathered for this project? (required)</p>	
<p>5. Outline what activities have taken place this quarter to further this project. Outline both district and partner involvement and whether goals and timelines are being met as you laid out in your application. You need not go into detail because your final report will describe more of what the project accomplished etc. but indicate the progression of your project. E.g. "District and XY partner publicized and solicited applications for cost-share projects. As projected in project timelines, projects for funding selected, all cost-share funds obligated and contacts to participants sent out. Baseline photography in process."</p>	
<p>Use the table below to quantitatively outline the activities that have been completed through this quarter.</p>	
Number of Landowners Reached	
Number of Acres Impacted	
Feet of Trees/Windbreak Planted	
Feet of Fence Built	
Number of Wells Installed	
Number of Livestock Tanks Installed	
Number of Irrigation Systems Installed	
Feet of Irrigation Pipe Installed	

Number of Irrigation Systems Installed	
Efficiency Gains	
Gallons of Water Conserved	
Tons of Soil Conserved	
Number of Students Reached	
Number of Gardens Planted	
Other Quantifiable Impacts Made	

6. Is this project on track to comply with the contract? – this means carry out the work as laid out in the Statement of Work outlined in your contract, expend all the funds obligated in the contract, and raise the required match by the contract end date as stated in your contract with CDA-CSCB – Enter YES or NO.

If “no”, explain why not and describe what is being done to rectify the situation and bring the project back on track.

7. Describe public information activities relating to this project that have been carried out this quarter (attach copies of news releases, etc., where appropriate). This does not mean landowner application solicitations – it means publicity that highlights the District conservation leadership role, or accomplishments related to this project natural resource issue. Remember, *one of the award expectations is that that the district will submit a publicity piece about your project to at least one media outlet other than your District newsletter* - although you may do that too! CSCB would like Districts to educate a wider audience to the benefits of both Conservation Districts and the

Matching Grants Program. The District may be requested to provide evidence of publicity submission.

Project Coordinator/District Manager name/signature: (must authorize this report)

Certification: I/we certify that, to the best of my/our knowledge, the information stated in this report is complete, true, and accurate.

Date of report: