

4. How did this grant make a difference?

To the organization as a whole?

- Attach **client testimonies**, stories reflecting this impact. (Optional)
- Attach **photos of staff/program** environment. (Optional – If clients are included in any photos, please obtain their written permission to use the photo in Lakeview Health System’s communications. See sample photo consent form on our website.)

5. What have you learned and what would you do differently?

6. How did this project measurably improve community health and wellness?

7. Do you plan to share your results or findings? How?

- Please include a summary of the external communications regarding the grant/program/results (Information sent to local newspapers, TV news, or corporate news letters/community newsletters, etc.).

8. If continued, how will your project be funded in the future? If this grant was for general operating funds, what is the plan to sustain the program/organization in the future?