



Report Form #1

Weed Management Area Status Report

(Annual Report)

Weed Management Area (WMA) _____ Date _____

Submitted by _____ Title _____

Address _____

Address _____

WMA Acreage

Private _____

City _____

County _____

Right-of-way _____

State (list) _____

Federal (list) _____

Other _____

Total Acres in WMA _____

WMA Organization Status:

1. WMA Organized Yes _____ No _____

(See Section II, "Purpose and Organization of Weed Management Areas" for the five steps involved in organizing a WMA)

2. Management Plan Completed
Yes _____ No _____ Date completed _____

3. Management Plan Approved by **all** WMA cooperators
Yes _____ No _____ Date approved _____

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WMA Objectives Status:

Please rate on a percentage basis the progress completed towards achieving the objectives for your WMA as detailed in your WMA Management Plan. A **100%** rating indicates a successfully completed objective.

WMA Objective	Funds Expended in Current Year	Percent Completed	Funding Required
1. WMA Inventory Status (see Section V)	_____	_____	\$ _____
2. WMA Awareness, Education, Training (see Section III)	_____	_____	\$ _____
3. WMA Prevention and Early Detection (see Section IV)	_____	_____	\$ _____
4. WMA Acres Treated/Under Management (see Section VI)	_____	_____	\$ _____
5. WMA Monitoring & Evaluation (see Section VIII)	_____	_____	\$ _____
6. WMA Administration	_____	_____	\$ _____

Total funding required to fully implement **all** objectives of WMA Management Plan \$ _____

Report Form # 2

Noxious Weed Management by Species, Method, and Cost

(Annual Report)

Weed Management Area (WMA) _____ Date _____

Submitted by _____ Title _____

Address _____

Address _____

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WEED SPECIES	Management by Method, Acres, and Cost								TOTAL ACRES	TOTAL COST
	Biological		Cultural (including revegetation)		Mechanical		Chemical			
	Acres	Cost	Acres	Cost	Acres	Cost	Acres	Cost		
Totals										

