KACD WRAPS Partnership Application Spreadsheet

Date month/day/year	Time 00:00 am/pm	County	Participant Name	WRAPS Project Name	Legal Description	Targeted HUC 12	Best Management Practice(s)	Units Planned	Cover Crop 1st/2nd/3rd year Payment	County Ave Cost/Practice Cap 1/	Pounds of Phosphorus Reduced	Cost-Share Dollars Needed