1. **Jurisdiction Name:**
2. **Project Title:**

Grant Agreement (Contract) Number:

Funding Source Agreement Number:

Grant Program: Select Program…

Estimated Completion Date:Select Date…

Project Status: Select Status…

1. **Reporting Period:**

Calendar Year: Select Year…

[ ]  January-March (Federal Fiscal Quarter 2)

[ ]  April-June (Federal Fiscal Quarter 3)

[ ]  July-September (Federal Fiscal Quarter 4)

[ ]  October-December (Federal Fiscal Quarter 1)

1. **Quarterly Progress Report Prepared by:**

Phone:

E-mail Address:

1. **Funds Expended to Date: $** Enter Amount…

Do you anticipate a project cost overrun or underrun?Select Answer… If yes, please explain:

1. **Project is** Select Percentage…**% completed at this time.**

Do you need a time extension? Select Answer…

 If yes, please explain:

If this is an acquisition project, how many properties have you closed on this quarter?

Enter Amount…

1. **Provide a summary of progress on your project for the quarter. (Please include information such as activities conducted, milestones reached, successes, and/or challenges.)**

**For HMGP Coordinator Use Only**

**Coordinator Comments:**