Copies of form may be made as needed.

NCDA&CS
ADFP Trust Fund

Progress Report

Grantee Name:	
Project Title:	
Contract Number:	
Reporting Period:	

INSTRUCTIONS: Please reply to the following prompts.

1. Please complete information in the chart below for the corresponding reporting period.

Tasks Completed/Goals Achieved	ADFP Funding Used	Matching Funding Used	Total Funding Used

2. If your progress report differs from your contract Project Timeline and/or Contract Budget, you MUST explain why. Funding will not be made available until these differences have been explained.

Grantee Signature: **Date:**

ADFP Signature: **Date:**