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| --- | --- | --- | --- |
| MCR Planning Progress Report  Project Progress Reports must be submitted with each Request for Funds Form during the term of the contract agreement. | | | |
| **Date Submitted:** | **Report Period:** | | |
| A. Grantee |  | | |
| B. Primary contact |  | | |
| C. Phone and email |  |  | |
| D. County, City, Zip Code |  | | |
| E. DOC Contract Number |  | | |
| F. Planning project |  | | |
| G. Name and location of all primary contractors, subcontractors and sub- recipient entities engaged in any of the activities described in Section 6, “Scope of Work of Contract” | **Contractor Name** | | **City, State** |
|  | |  |
|  | |  |
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|  | |  |
| H. Current status of the project | i. Percentage Complete % | | |
| ii. Is the project on track with the Yes No  implementation schedule?  If “No,” explain any issues in Section M. | | |
| I. Anticipated completion date |  | | |

|  |  |
| --- | --- |
| J. Cumulative costs incurred thus far | $ |
| K. Amount invoiced with this Progress Report | $ |
| L. Grant funds remaining | $ |
| M. Problems encountered and necessary modifications in the Scope of Work, budget or implementation schedule |  |
| N. Any additional comments |  |
| To the best of my knowledge and belief, the information provided on this form is true and correct.  Signature: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  Title: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  Date: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | |