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| --- |
| MCR Planning Progress ReportProject 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 Noimplementation 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: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |