



QUARTERLY PROJECT STATUS REPORT FORM

Time Period: _____ ---- _____

Project Identification:

Project Code:
Project Name:

Contact:
Phone No:
Email:

Budget:

Amount: _____
Cumulative Amount Invoiced for DBE _____

Cumulative Amount Invoiced to _____
Date (thru this quarter) _____
Amount Invoiced this Quarter: _____

Tasks and Schedules:

	Percent of Project Scope (Total 100%)	Percent Completed:
1.		

Project completion date: _____

Work accomplished this quarter:

Comments, Observations, Problems/Issues Encountered and/or Lessons Learned (Please describe, including problem/issue resolution and/or actions pending):

Match Credits:

Required Match Credit Amount: _____
Project Classification (Pooled or Deployed): _____

<u>Source of Match</u>	<u>Total Match Expended this Period</u>
Cumulative Non-Federal Funds (cash, equipment, personnel)	0
Cumulative Federal Funds	0