**Progress and Final Report Form**

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| **GRANTEE INFORMATION (to be completed by Grantee)** | | | | | | | | | | | | | |
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| **Reporting Period** | | | | |  | **Contract Information** | | | | | | | |
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| From: |  | | | |  | Contract Ref# | | | | |  | | |
|  | *(date)* | | | |  |  | | | | |  | | |
|  |  | | | |  |  | | | | |  | | |
| To: |  | | | |  |
|  | *(date)* | | | |  |  | | | | |  | | |
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|  | | | | | | | | | | | | | |
| Grantee Name: | |  | | | | | Project Title: | | |  | | | |
|  | | | | | | | | | | | | | |
| Project Contact Completing this Form: | | | |  | | | | | | | | Title: |  |
|  | | | | | | | | | | | | | |
| Primary Telephone: | | |  | | | | | Email: |  | | | | |

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| **PROJECT SUMMARY** |
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| 1) Please provide a detailed description of the project progress to date. For Legislatively Directed/State Directed funded projects Final Report: please provide a detailed list of expenditures including the item and cost and attach copies of invoices/receipts for each expenditure paid with grant funds. |
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| |  |  |  | | --- | --- | --- | |  |  |  | | **SIGNATURE OF CHIEF ELECTED OFFICIAL/AUTHORIZED REPRESENTATIVE** |  | **Date** | |  | | | |  | | | | **TYPED NAME AND TITLE** | | | |