

OSBM Administered Grant Quarterly Performance Report

As required by your signed grant agreement with the North Carolina Office of State Budget and Management, you must report on your use of State grant funds. This includes outlining activities, accomplishments, and performance measures associated with the grant.

| Name: (Person Completing Report) | | | Date: | |
|---|----------------|--|---------|--|
| Organization: | | | | |
| Grant ID #: | | | | |
| Reporting Period: | eriod: Reporti | | g Year: | |
| Were grant funds expended during this reporting period? Yes No | | | | |
| Do you certify that all expenses to date have been submitted for this grant and are reflected in the associated Smartsheet? Yes No | | | | |
| Do you certify that all funds to date were used for the purposes for which they were awarded and in compliance with your contract? Yes N_0 | | | | |
| Provide a report of activities and accomplishments related to your Grant Project(s) during this reporting period. | | | | |
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| Provide an update on the objectives, as outlined in your Scope of Work, of the Grant Project(s). Have you accomplished any of your objectives? | | | | |
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| Provide an update on your expected results, as outlined in your Scope of Work, of the Grant Project(s). Have you accomplished any of your expected results? | | | | |
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| Provide an update on your performance measures, as outlined in your Scope of Work, for the Grant Project(s). | | | | |
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