



## QUARTERLY PROGRAMMATIC NARRATIVE REPORT

**Due 10TH of the month — January, April, July, October**

**Fiscal Year:** \_\_\_\_\_ **Quarter:** \_\_\_\_\_

**Service:** \_\_\_\_\_

**Agency Name:** \_\_\_\_\_

**Report Prepared By:** \_\_\_\_\_

**Telephone #:** \_\_\_\_\_ **Fax #:** \_\_\_\_\_ **Email:** \_\_\_\_\_

Complete Below. Attach a separate sheet if needed.

1. Describe significant developments, staffing changes, or other significant activities that occurred in your funded grant/service in this quarter.
2. Describe goals and objectives for the program. What has been accomplished this past quarter? What goal/objectives set you set for the upcoming quarter?
3. List any problems and how you plan to resolve them (or how were they resolved).
4. How many units were utilized this quarter including TSA funded units and units funded with other resources?
5. Are there any contract compliance issues including over or under-utilization of units?
6. If your organization is currently under or over spending its grant (not meeting or exceeding the quarterly unit goal), what steps are you taking to ensure that you meet or exceed next quarter's goal? Have you made changes to the program's work plan?
7. Explain how your organization has targeted minority and low-income consumers this quarter.
8. List number of clients currently waiting for service. (Required if applicable)

**Reminders:**

Late reports may result in delayed payment. There must be a separate narrative report for each program and all documents must be typed.

**Updated: 11/29/17**

**I:\FISCAL\CONTRACTS III BW\Contractors 2017\Forms**