

Hallandale Beach Community Redevelopment Agency Community Partnership Grant Progress Report Fiscal Year 2012-2013

Please complete this Community Partnership Grant Progress Report, attach all copies of paid expenses, and submit to the Hallandale Beach Community Redevelopment Agency. All Progress Reports **MUST** include paid invoices, receipts, and payroll verifying payment of funds for wages and/or consultants. Progress Reports **MUST** also include the number of HBCRA participants served and a line item budget, detailing how grant funds were expended. An electronic version of this Report is available upon request by calling the HBCRA Office at 954-457-1303. **Failure to submit a timely and complete Progress Report will result in breach of Agreement and retraction of grant funds.**

Organization Information:

| | | | |
|-----------------------|--|--------|--|
| Agency Name: | | | |
| Agency Address: | | | |
| Agency Tax ID: | | | |
| CEO or Chair: | | Phone: | |
| Email: | | Fax: | |
| Grant Contact Person: | | Title: | |
| Phone: | | Email: | |

Program/Project Information:

Reporting Period: Quarter 1 and Quarter 2 (October 2012 through March 2013)

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|-----------------------|---|
| Program/Project Name: | |
| Location(s): | (Physical Address, or Addresses, of Program/Project Activities.) |
| Total Funds Awarded: | \$ |
| Total Funds Expended: | (Amount of Program/Project funds spent during this reporting period.) \$ |

Program/Project Performance:

I. List the total number of HBCRA participants served: (Attach attendance sheets and/or records):

II. Provide a detailed description of tasks, activities and services provided:

| Month/Year | Task/Activity/Service Provided | Performed By |
|------------|--------------------------------|--------------|
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Print Name(s) of Person(s) Completing Progress Report:

| Name | Title |
|------|-------|
| | |
| | |

I certify the information contained in this Progress Report. The use of grant funds is in accordance with the terms and conditions of the Agreement and solely for costs and expenses incurred for the performance of the Program/Project as stated in the approved Budget.

CEO/Chair Signature: _____

Date: _____

Progress Report Completion and Submission Guidelines:

Progress Reports must be completed and submitted on a Quarterly basis as follows:

- **Quarter 1** (October 2012 through December 2012) and **Quarter 2** (January 2013 through March 2013) - *Due no later than 5:00 p.m. on Monday, April 8, 2013*
- **Quarter 3** (April 2013 through June 2013) - *Due no later than 5:00 p.m. on Monday, July 8, 2013*
- **Quarter 4** (July 2013 through September 2013) - *Due no later than 5:00 p.m. on Monday, October 7, 2013*

Complete and submit this Progress Report by the scheduled deadline, with all supporting receipts and documentation, via mail or hand delivery to:

Hallandale Beach Community Redevelopment Agency
 400 South Federal Highway
 Hallandale Beach, FL 33009

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| <p>To be completed by HBCRA Office:</p> <p>Received By:</p> <p>Date:</p> <p>Comments:</p> |
|---|

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|--|
| <p>To be completed by Grant Consultant:</p> <p>Report Complete: Yes _____ No _____</p> <p>Receipts Provided: Yes _____ No _____</p> <p>Signature: _____ Date: _____</p> |
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