



## DISTRESSED COUNTIES .09 PROJECT STATUS REPORT

Submitted By:	
Reporting Period:	
<b>This form must accompany each request for reimbursement.</b>	
<b>Grantee:</b>	
<b>Grant Agreement Number:</b>	
<b>Project Name:</b>	
<b>Scheduled Project Completion Date:</b>	

### Project Progress

Describe the progress made to date on the project's scope of work

Approximately what percentage of the project is complete?		%
---	--	---

When do you expect the project to be completed (month/day/year)?	
If the scheduled completion date is different from the one above, what factors led to the change?	