|  |  |
| --- | --- |
| **Contract Information** | |
| County/Counties |  |
| Contract Number 21- |  |
| Completed by (Name) |  |
| For Quarter Ending |  |

**PART ONE: Service Provision**

1. Report Community Development Activities. (Refer to bid proposal and executed contract to identify specific deliverables.) Year to date (YTD) totals shall include services provided since the beginning of the fiscal year (July 1).

|  |  |  |
| --- | --- | --- |
| **Community Development Measures** | **Quarterly Progress** | **YTD Progress** |
| Measure 1 (provide description) |  |  |
| Measure 2 (provide description) |  |  |
| Measure 3 (provide description) |  |  |

2. Report total number of group sessions provided by the project. All other participant information will be acquired through the FSSD.

|  |  |  |
| --- | --- | --- |
|  | **This Quarter** | **Year to Date** |
| Number of Group Sessions |  |  |

**PART TWO: Council Activities**

3. Discuss council activities this quarter. Include dates of council meetings and progress

towards obtaining/maintaining membership of required representation.

**PART THREE:** **Quarterly Narrative**

4. Briefly describe the progress made on your project this quarter and any challenges or delays experienced. If no services have been provided for the quarter and you will be requesting funds, provide a brief description of your activities.

5. Provide a summary of progress towards adherence to the program model as outlined in the contract.

6. Share a story of impact from your program.

7. If your project utilizes blended funding, indicate the following:

a. ICAPP funds expended this quarter:

b. Other funds expended this quarter:

SUBMISSION INSTRUCTIONS

* Each project needs to submit a quarterly report even if there was no activity during the quarter.
* Submit by the 15th of the month following the quarter (October, January, April, July) or the first business day after the 15th.
* Submit reports via email to: [icapp@pcaiowa.org](mailto:icapp@pcaiowa.org).