

CITY OF SANTA BARBARA
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM
Capital Construction Project Quarterly Status Report

Subgrantee Agency: _____ Project #: _____

Activity/Program Name: _____

Activity Location: _____ Grant Amount: \$ _____

Reporting Period: (check one)

1st Qtr. July 1 – Sept. 30, 2012

2nd Qtr. Oct. 1 – Dec. 31, 2012

3rd Qtr. Jan. 1 – March 31, 2013

4th Qtr. April 1 – June 30, 2013

Construction Status:
(attach additional pages as necessary)

A. Please list the project and/or construction activities that have been started or completed to date.

B. Please itemize the expenditures of CDBG funds made on this project to date.

C. Please list the project and/or construction activities that still need to be completed.

D. Anticipated date of completion? _____ If job has been delayed, provide detailed explanation.

The undersigned hereby certifies current status and that \$ _____ has been expended to date for the above named Project.

Signature _____ Date _____
Project Supervisor

THIS REPORT IS DUE WITHIN 7 DAYS AFTER THE LAST DAY OF THE REPORTING PERIOD.

**DELIVER TO: HOUSING & REDEVELOPMENT OFFICE
630 GARDEN STREET, 2ND FLOOR**

MAIL TO: P.O. BOX 1990, SANTA BARBARA, CA. 93102