

Participatory Budgeting · 555 Santa Clara Street · Vallejo · CA · 94590 · 707.648.4041 · Fax 707.648.4426

## Participatory Budgeting Program PROGRESS REPORT FORM

2. PB PROJECT NAME
3. PROGRESS REPORT NUMBER AND PROGRESS REPORT PERIOD  a) #:
p) From, 201 to, 201

1. GRANTEE NAME and ADDRESS

4. PROGRESS UPDATE Describe percentage of materials purchased and activities undertaken as described in Exhibit A: Action Plan. If materials were not purchased or requested or activities were not undertaken as listed in Exhibit A during this progress report period, do not omit them; list them and give a brief explanation of the planned timeline for making purchases or completing activities. Attach additional page if necessary.

a) Grant Project Amount:
b) Funds Received to Date:
c) Available (a. minus b.):
6. ANTICIPATED OR PLANNED ACTIVITIES FOR NEXT PROGRESS REPORT PERIOD
a) Describe the activities (and at which sites, when applicable) that are anticipated or planned.
b) If applicable, please describe and explain the need for changes or deviations from Exhibit A: Action Plan. Use the budget worksheet below to show changes or deviations in expenditures. (If changes or deviations are necessary, please sign on the last page of this document. After review from the City Manager or designee, you will be informed if approval has been granted to change or deviate from the Action Plan.)

5. GRANT FUNDS BALANCE

## **BUDGET WORKSHEET**

CHANGE REQUESTED	ITEM	ITEM DESCRIPTION	SITE(S)	AMOUNT
TOTAL				
TOTAL:				

5. PHOTOGRAPHS Please provide photographs of projephotograph and provide a brief description.	ect progress in digital format. Note the date and location of the
	describe, in numerical terms if possible, the impact of grant funds.  k part in educational programming, or used materials purchased with s of produce); etc.
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7. APPLICANT SIGNATURE	
I hereby declare under the penalty of perjury that the go accordance with the project specifications, are complete	ods or materials covered by this report have been performed in and accurate, and are eligible under the agreement.
Printed Name	
Title	
Signature	Date

## REQUEST FOR CHANGE OF DEVIATION TO ACTION PLAN:

REQUESTED BY: GRANTEE NAME:	APPROVAL GRANTED: CITY OF VALLEJO, a municipal corporation
By: NAME OF CONTACT:	By: Daniel E. Keen City Manager
NAME OF CONTACT.	
	DATE:
TITLE:	ATTEST:
DATE:	By: Dawn Abrahamson City Clerk
	APPROVED AS TO CONTENT:
(City Seal)	
	Daniel E. Keen City Manager
	APPROVED AS TO FORM:
	Claudia Quintana City Attorney