



CERTIFIED LOCAL GOVERNMENT GRANT PROGRAM

STATUS REPORT FORM

Please submit via email to: RA-PHCLG@pa.gov

Grantee Name:	
Project Name:	
Funding Release Number:	
Reporting Period:	
Report Date:	
Project Contact:	
Project Contact Email:	

Work accomplished during the reporting period:

Difficulties encountered and reasons for delays, if any:

Project Director Signature