

Instructions: Complete all required fields of the Performance Report. Failure to complete all fields may result in additional follow up from Cal OES.

Subrecipient:			
Contact Information: (Name, Phone Number, Email address)			
Subaward Number:			
Total Awarded Amount:			
Subaward Period of Performance:	Start Date:	End Date:	
	12/01/2023	12/31/2025	
Reporting Period End Date:	June 30, 2024		
 Reports are semi-annual Please detail all activities taking place within the 6 month reporting period. 	December 31, 2024		
	June 30, 2025		
	December 31, 2025 (Final)		

Project Number 1

roject Title:	
escription:	
roject Category:	
roject Status:	
otal Budgeted Cost:	
Mount Expended to Date:	



Project Summary: (Describe what has been completed as outlined in the scope of the original project, and what still needs to be completed before the period of performance end date)

Milestones: (List major tasks and their expected completion dates)

Comments/Explanation for Not Started, Delayed, or Cancelled Status:



Project Number 2

Project Title:	
Description:	
Project Category:	
Project Status:	
Total Budgeted Cost:	
Amount Expended to Date :	

Project Summary: (Describe what has been completed as outlined in the scope of the original project, and what still needs to be completed before the period of performance end date)

Milestones: (List major tasks and their expected completion dates)



Comments/Explanation for Not Started, Delayed, or Cancelled Status.

Project Number 3

Project Title:

Description:

Project Category:

Project Status:

Total Budgeted Cost:

Amount Expended to Date:

Project Summary: (Describe what has been completed as outlined in the scope of the original project, and what still needs to be completed before the period of performance end date)



Milestones: (List major tasks and their expected completion dates)

Comments/Explanation for Not Started, Delayed, or Cancelled Status.

Project Number 4

Project Title:

Description:

Project Category:

Project Status:

Total Budgeted Cost:

Amount Expended to Date:



Project Summary: (Describe what has been completed as outlined in the scope of the original project, and what still needs to be completed before the period of performance end date)

Milestones: (List major tasks and their expected completion dates)

Comments/Explanation for Not Started, Delayed, or Cancelled Status.



Project Number 5

Project Title:
Description:
Project Category:
Project Status:
otal Budgeted Cost:
Amount Expended to Date:

Project Summary: (Describe what has been completed as outlined in the scope of the original project, and what still needs to be completed before the period of performance end date)

Milestones: (List major tasks and their expected completion dates)



Comments/Explanation for Not Started, Delayed, or Cancelled Status.

The undersigned is a duly appointed Authorized Agent and certifies that the above activities and statuses are true and correct.

Subrecipient:		
Signature of Authorized Agent:		
Printed Name of Authorized Agent:		
Title:	Date:	