

**PROGRESS REPORT:  
ENV 23 MVP 02 - FY23-24 MVP Action Grant Monthly Report Form**

**REPORT SUMMARY**

Reporting period from: \_\_\_\_\_ to: \_\_\_\_\_

Project Name: \_\_\_\_\_

Municipality: \_\_\_\_\_

Contractor vendor code (from contract): VC MMARS Doc ID (from contract): CTENV

Project Manager: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**DELIVERABLES**

Please list all completed deliverables from this month and provide to your Regional Coordinator (RC), ensuring their file names are consistent with the names in the agreed upon scope for easy identification. **Example:** *1.4\_brief-name.pdf* If you have any major project deliverables in draft form (e.g., design plans or final reports) please also list and provide those to your RC.

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**GRANT REPORT NARRATIVE**

*Note: Changes to scope, timeline, or budget (outlined in Attachment B to your contract) are generally discouraged and should be discussed with your Regional Coordinator before proceeding. Approved changes may require a formal contract amendment to ensure you will be in good standing for reimbursement.*

1. Please describe any major project roadblocks and assistance needed this month.
  
2. Please describe your progress toward completing the tasks and deliverables outlined in Attachment B to your contract using the chart below:

Project Task # and Description (from Att. B):	Deliverables (from Att. B)	Due date (from Att. B)	Progress description:	Estimated % complete:

3. Please describe any requested deviations from the following:  
Note: Changes should be discussed with your Regional Coordinator before proceeding. Approved changes may require a formal contract amendment to ensure you will be in good standing for reimbursement. Your RC will be able to provide guidance.
  - a) Project schedule:
  - b) Budget (including any anticipated underruns or overruns):
  - c) Tasks or deliverables:
  
4. List significant activities that have occurred this month.
  - a)
  - b)
  
5. List anticipated work for next month.
  - a)
  - b)

6. List any upcoming significant project meetings or community engagement meetings related to this project, including dates, times, and locations if known (please invite your Regional Coordinator to attend).

- a)
- b)

**PROJECT TRACKING**

7. Please provide any invoices received over the last month, and clearly document any in-kind match. If you have your own system for tracking the same information that is in the tables, you may provide it as an attachment instead. Compiling this information each month is designed to be helpful when putting together reimbursements requests where we require this information.

Note: If you have completed a task(s) and are ready to submit for reimbursement, please fill out the separate **FY23-24 Action Grant Reimbursement Request Template** for fully completed tasks(s) and see the **Guidance for FY23-24 MVP Action Grant Reimbursement** document for details. All deliverables for those completed task(s) must be submitted to your Regional Coordinator with the reimbursement request.

Table 1: Invoices

Task No. (from contract)	Invoice Description	Invoice Date	Invoice Number	Invoice Amount	Paid with Grant	Paid with Cash Match

Table 2: In-kind Match

Task No. (from contract)	Title/Position, Department	Description of Work	Hours Worked	Hourly Rate	Total

			<b>TOTALS</b>		