

# GRANT PROGRESS REPORT

**PERRY COUNTY  
SUBSTANCE ABUSE  
COMMITTEE**

PROJECT TITLE:		
SERVICE TYPE: <input type="checkbox"/> Prevention/Education <input type="checkbox"/> Law Enforcement/Justice <input type="checkbox"/> Treatment/Intervention		
PERIOD COVERED BY REPORT	FROM:	TO:
AGENCY:		

PLEASE INDICATE NEW OR CHANGED INFORMATION BY CHECKING THE BOX(ES)	
<input type="checkbox"/> PROJECT DIRECTOR/CONTACT PERSON:	
<input type="checkbox"/> MAILING ADDRESS:	
<input type="checkbox"/> TELEPHONE NUMBER: (     )	<input type="checkbox"/> FAX NUMBER: (     )
<input type="checkbox"/> EMAIL ADDRESS:	
<input type="checkbox"/> PERSON AUTHORIZED TO MAKE LEGAL AND CONTRACTUAL AGREEMENT FOR APPLICANT AGENCY:	NAME:
	TITLE:

PLEASE LIST NAME OF AGENCY REPRESENTATIVE(S) WHO ATTENDED PCSAC MEETING(S) HELD DURING PERIOD COVERED BY THIS REPORT:	July 8, 2011	
	Oct. 26, 2011	
	Dec. 28, 2011	
	Feb. 22, 2012	
	April 25, 2012	
	June 27, 2012	

The undersigned hereby certifies that the information included in this progress report is correct and accurately reflects program activity and expenditures to date.

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Signature of Person Completing Report Title Date

Submit report to: PCSAC  
P. O. Box 442  
Tell City, Indiana 47586-0442

**GRANT PROGRESS REPORT**  
**Program Activities**



PROJECT TITLE:
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Number of persons <i>projected</i> to be served during the period covered by this report:	*
Number of persons actually served during the period covered by this report:	*

\*Please explain, if applicable, any significant difference in number of persons served vs. persons projected to be served during the period covered by this report.

Describe program successes to date. Please be sure to detail progress toward goals and objectives listed in your agency's grant application and include results of any program evaluation. *[Attach additional page(s) if necessary.]*

Please explain any challenge(s) your agency has experienced in reaching the goals and objectives listed in your grant application and describe action(s) taken to overcome said challenge(s). *[Attach additional page(s) if necessary.]*

