

GRANTEE PROGRESS AND MONITOR REPORT

FOR LAW ENFORCEMENT

Purpose: Use this form to monitor and evaluate projects and document grant monitor's contact with grantee.

Instructions: Complete all applicable sections.

GENERAL GRANT INFORMATION			
<input type="checkbox"/> Grant Project \$20,000 or less	<input type="checkbox"/> Grant Project Over \$20,000	GRANTEE NAME	
PROJECT TITLE		PROJECT NUMBER	FEDERAL FUNDS ALLOCATED
REPORTING PERIOD: <input type="checkbox"/> OCTOBER - DECEMBER <input type="checkbox"/> JANUARY - MARCH <input type="checkbox"/> APRIL - JUNE <input type="checkbox"/> JULY - SEPTEMBER			
DATES AND AMOUNT OF REIMBURSEMENT FILED DURING THIS REPORTING PERIOD.			
VOUCHER FILE DATE		AMOUNT OF VOUCHER	
_____		_____	
_____		_____	
_____		_____	

SELECTIVE ENFORCEMENT CONDUCTED DURING REPORTING PERIOD			
1. Number of allotted overtime hours stated in Statement of Work and Special Conditions for this reporting period	<input style="width: 100%;" type="text"/>	Actual number of overtime hours worked	<input style="width: 100%;" type="text"/>
2. Number of required checkpoints as stated in Statement of Work and Special Conditions for this reporting period	<input style="width: 100%;" type="text"/>	Actual number of checkpoints conducted	<input style="width: 100%;" type="text"/>
3. Number of saturation patrols as stated in Statement of Work and Special Conditions for this reporting period	<input style="width: 100%;" type="text"/>	Actual number of saturation patrols conducted	<input style="width: 100%;" type="text"/>
4. Number of required trainings to attend as stated in Statement of Work and Special Conditions for this reporting period	<input style="width: 100%;" type="text"/>	Actual number of trainings attended	<input style="width: 100%;" type="text"/>
5. Number of grant-funded activity citations issued during this reporting period:			
DUI/DUID <input style="width: 100%;" type="text"/>	Speeding <input style="width: 100%;" type="text"/>	Safety Belts <input style="width: 100%;" type="text"/>	Child Safety Seats <input style="width: 100%;" type="text"/>
Other Traffic <input style="width: 100%;" type="text"/>	Criminal Arrests as a result of traffic stop <input style="width: 100%;" type="text"/>		
6. Number of non-grant activity citations issued during this reporting period:			
DUI/DUID <input style="width: 100%;" type="text"/>	Speeding <input style="width: 100%;" type="text"/>	Safety Belts <input style="width: 100%;" type="text"/>	Child Safety Seats <input style="width: 100%;" type="text"/>
Other Traffic <input style="width: 100%;" type="text"/>	Criminal Arrests as a result of traffic stop <input style="width: 100%;" type="text"/>		
7. If applicable, list any notable results of grant activity (e.g. reduction in fatal crashes and injuries, higher safety belt usage rate, multi-jurisdiction enforcement involvement).			

EQUIPMENT PURCHASED WITH GRANT FUNDS DURING REPORTING PERIOD*(All equipment must be purchased before March 31 of the second reporting period unless otherwise approved by your Project Monitor.)*

1. Number of radar units (regular and handheld)
Serial Number(s) _____

2. Number of Lidar Laser radar units
Serial Number(s) _____

3. Number of preliminary breath test devices
Serial Number(s) _____

4. Number of in car video camera units
Serial Number(s) _____

5. Other Equipment (list each item, quantity purchased and serial numbers)

Quantity	Item	Serial Number(s)
_____	_____	_____
_____	_____	_____
_____	_____	_____

PROJECT TIMELINEIs the project on schedule? YES NO - If no, explain why.**CONDITIONS OR LINE ITEM BUDGET ADJUSTMENTS**

List any conditions or line item budget adjustments requested during this reporting period.

Has the project director changed? YES NO

If yes, please provide a letter to DMV Project Monitor indicating new Project Director information.

PUBLIC INFORMATION AND EDUCATION ACTIVITIES

Media Coverage:

Number of TV stations Number of spots aired Number of radio stations Number of spots aired Number of newspaper articles

Number of Materials Distributed

Brochures Posters Media Kits Educational Items

FINAL REPORT

List an overview of accomplishments and how they impacted your highway safety problems (e.g. reduced crashes, injuries, and fatalities) by providing data of any measures, surveys, or evaluations that document accomplishments through your use of this grant and your activities. Include any unique element(s) that could serve as a model for other traffic safety initiatives.

Matching Requirement: Has the required 20% match been fully documented for this grant year by submitting the Match Report Form, TSS-20?

YES
 NO
 NOT APPLICABLE
 If no, please submit the required form with this final report.

SUBMITTED BY

DATE (mm/dd/yyyy)

1 Select your
Program Manager

2 Save this form on your pc and
send it via email to:

DMV USE ONLY

This page is to be completed by DMV Project Monitor

DMV PROJECT MONITOR CONTACT INFORMATION		
Date of Contact	Contact Person(s)	Type of Contact T-Telephone, W-Written, P-Personal
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

DMV PROJECT MONITOR'S COMMENTS (List any notable pros or cons of the project.)

DMV PROJECT MONITOR NAME	DATE (mm/dd/yyyy)
DMV DEPUTY DIRECTOR NAME	DATE (mm/dd/yyyy)