



## CLG Grants Quarterly Progress Report

Complete and email this form every quarter to [DNR.grants@illinois.gov](mailto:DNR.grants@illinois.gov)

Month(s) of: \_\_\_\_\_ CLG Name: \_\_\_\_\_

Project Number: \_\_\_\_\_ Project Title: \_\_\_\_\_

I. Summarize this quarter's activity.

II. Explain any deviations from established time line.

III. Explain actions taken to correct the above deviations.

#### IV. Fiscal Information

Quarterly Fed/State Expenditures: \$ \_\_\_\_\_ Total Fed/State Expenditures: \$ \_\_\_\_\_

Quarterly Local Expenditures: \$ \_\_\_\_\_ Total Local Expenditures: \$ \_\_\_\_\_

Quarterly Total Project Exp.: \$ \_\_\_\_\_ Total Project Cost to Expenditures: \$ \_\_\_\_\_

IV. Additional Comments.

By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal or State award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812).

\_\_\_\_\_  
*Project Manager's Signature*

\_\_\_\_\_  
*Project Manager Name*

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Date*