

COMMUNITY DEVELOPMENT BLOCK GRANT

SUB-GRANTEE MONTHLY PROGRESS REPORT - SERVICE PROJECT EXTENT OF BENEFITS

PRESUMED BENEFIT POPULATION

AGENCY NAME:		Date:												
ACTIVITY	Total # of Household/Persons Assisted	WHITE			BLACK			ASIAN		American Indian or Alaskan Native		Native Hawaiian or Pacific Islander		Female Head of Household
		B	C		D		E		F		G		H	
A	B	Not Hispanic or Latino	Hispanic	Not Hispanic or Latino	Hispanic	Not Hispanic or Latino	Hispanic	Not Hispanic or Latino	Hispanic	Not Hispanic or Latino	Hispanic	Not Hispanic or Latino	Hispanic	H
Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Year to Date														

Instructions: Count each household or persons only once during the grant year.

Column B - Give the cumulative number of households or persons which have been assisted by the activity described in column A. Indicated with either (H) or (P) whether this number represents "Households" or "Persons". Count each household or person only once.

Column C through G - Show the total number of households/persons assisted (from column B) by race and ethnic origin.

Column H - Show the total number of female headed households

The total of column C through G should equal Column B.