

Name of Municipality _____
Address _____
Telephone _____
Fax _____



PROJECT STATUS REPORT

PROJECT SUMMARY

REPORT DATE	PROJECT NAME	PREPARED BY
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PROJECT CONTACT INFORMATION

NAME OF CONTACT	PHONE	E-MAIL	TITLE
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STATUS SUMMARY

PROJECT OVERVIEW

TASK	% DONE THIS PERIOD	OVERALL % COMPLETE	COMPLETION DATE	NOTES

BUDGET OVERVIEW

CATEGORY	SPENT THIS PERIOD	% COMPLETE	BALANCE	ON TRACK?	NOTES

PROJECT STATUS REPORT

ISSUE HISTORY

ISSUE	DATE ASSIGNED	DATE RESOLVED

CONCLUSIONS/RECOMMENDATIONS

PROJECT COMPLETION DATE

START DATE	COMPLETION DATE	PREPARED BY	REPORT DATE
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