

State of California  
 Department of Pesticide Regulation  
 Pest Management Alliance Grant Program

## Quarterly Progress Report

Progress Report No. \_\_\_\_\_

Reporting Period \_\_\_\_\_ to \_\_\_\_\_

Submittal Date: \_\_\_\_\_

Project Title \_\_\_\_\_

Grant Agreement No. \_\_\_\_\_

Principal Investigator \_\_\_\_\_

1. What work was performed during this reporting period?

2. What milestones, if any, were achieved during this reporting period?

3. Were any problems encountered in the performance of the work?

4. Provide narrative supporting large or unusual expenditures this reporting period.

5. Summary of Any Changes to Personnel Expenditures

Name	Hourly Rate	Total Hours	Activity or Task

{see reverse}

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I certify under penalty of law that this document and any attachment was prepared by me or under my direction in accordance with the Grant referenced above. Based on my inquiry of the persons who manage the project, or those directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. All information submitted in this document and all attachments conform to and is in accordance with the state and federal laws, and I so here certify with my signature. I am aware that there are significant penalties for submitting false or misleading information.

\_\_\_\_\_  
Principal Investigator's Signature

\_\_\_\_\_  
Date