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GEORGIA DEPARTMENT OF COMMUNITY AFFAIRS
QUARTERLY EXPENDITURES AND PROGRESS REPORT

Recipient Name: Gwinnett County Grant Number: 11-ns-6004 Report No: 01 Quarter End: 11/30/2011 Final Report: _____
Final Report: _____

SECTION IV: Work in Progress

Use this section to provide a brief narrative description of work in progress during the reporting period. Use the Project Implementation Schedule included in your application as the basis for reporting.

No funds were spent this quarter. During the quarter the Statement of NSP 3 Award was received and accepted by the County, the post-grant award public hearing was held, and a DCA representative visited NSP office for an initial monitoring session.

SECTION V: Other Supporting Efforts

Use this section to provide a description of all other supporting efforts that have begun, been partially implemented, or completed during this period. Use quantifiable data whenever possible. Use the information from DCA 8 (Budget Analysis) as the basis for reporting.

SECTION VI: Problems Encountered / Technical Assistance Needed

Use this section to provide a brief description of any problems or delays encountered or anticipated, or any technical assistance needed from DCA.

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SECTION VIII: Performance Measurement

All Grants

CDBG and CDBG Stimulus - People

TOTAL PEOPLE THIS

People	People
This Quarter	
Cumulative	

LEVERAGE THIS GRANT

Public	Private
This Quarter	
Cumulative	

CDBG and CDBG Stimulus - EIP Jobs (do not include ARRA jobs)

TOTAL F/T+PTE JOBS THIS

Created L/M	Retained L/M	Created L/M	Retained L/M
This Quarter			
Cumulative			

CDBG and CDBG Stimulus - Housing

TOTAL HOUSING THIS

Units Owner	Units Rental	Units Buyer	Total Units
This Quarter			
Cumulative			

NSP - Housing / Projects

HOUSING ACCOMPLISHMENTS THIS

Units Acquired	Units Rehab	Units Construct	Units Sold
This Quarter	0	0	0
Cumulative	0	0	0

PROJECTS COMPLETED THIS

Projects Completed

This Quarter	0
Cumulative	0

PERFORMANCE

This certifies that

CERTIFICATION

The signature of the Certifying Official below certifies that the data and other information provided in this Report (including Pages 1 and 2 of the Quarterly Report and the Project Activity and Completion as applicable), whether submitted in paper form or electronically, is true and correct, based on official accounting system and other records, and that expenditures and obligations shown have been made for the purpose of and in accordance with applicable Grant Terms and Conditions

Signature of Certifying Official

Mania Woods

Title of Official

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Date

DCA 206

GRANT
 This Quarterly Report is NOT complete.
 Date