



State Appropriations Quarterly Activity Report

Please be sure to complete each section of this form. It is made up of three sections with individual instructions to guide your responses.

Deliverables: In the text box below, please address the completion of each deliverable and the performance indicators associated to include quantifiable data.

Activity Deliverables <i>Type each deliverable as written in proposal</i>	Deliverable Performance

Minimum Service Level Requirement(s): In each section, please indicate whether the Minimum Service Level Requirement for the current quarter was met by responding **COMPLETE** and provide a supporting statement describing the impacts or accomplishments if any.

Quarter 1 **2** **3** **4** : **Completed** **Incomplete**

Supporting Statement:

Evidence:

Supporting Statement:

Documentation: Please attach documentation along with the submission of this report. In the fields below please provide any observations made through analyzing documentation. For example, if there was an increase, decrease, or accomplishment please provide.

Title of Documentation

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