



TRCC STATUS REPORT

Organization Name: _____
Contact Name: _____
Phone Number: _____ Contact Email: _____

Project Name: _____
Calendar Year Reported: _____ Annual Report: <input type="checkbox"/> Final Report: <input type="checkbox"/>

Status

Summary: *Annual Report:* Explain the current project or program status, including next steps.
Final Report: Describe the completed project or program, including outside partnerships and community benefit.

Challenges: Provide a brief explanation of challenges faced by project or program, if applicable.

Schedule: *Annual Report:* Provide anticipated completion date and explain schedule changes from last status report or initial survey.
Final Report: Provide substantial completion date or date of ribbon cutting. Describe punch list items, if applicable.

Completion Date: _____

Explanation:



TRCC STATUS REPORT

Status

Funding:

Annual Report: Summarize committed and awarded funding sources, in-kind donations received, funds encumbered, and expenses paid since project or program inception. Input remaining budget. Is the remaining budget adequate to finish the TRCC approved scope? Please explain.

Final Report: Summarize actual contributions and grants, in-kind donations received, and expenses paid since project or program inception. Input remaining budget, if any. [Provide a detailed general ledger with report submission that matches Total Expenses Paid.](#)

Sources

Recipient Contribution: \$ _____

TRCC Grant: \$ _____

Other Grants or Contributions: \$ _____

Other Grants or Contributions: \$ _____

In-Kind Donations: \$ _____

Total Funding Sources: \$

Details

Grant Organization: _____

Grant Organization: _____

Good/Services Provided: _____

Uses

Encumbrances: \$ _____

Total Expenses Paid: \$ _____

Total Funding Uses: \$

Budget

Remaining Budget: \$

Explanation:

Authorization

We do hereby attest this information is true, accurate and complete to the best of our knowledge.

Fiscal Manager Signature: _____

Date: _____

Project Manager Signature: _____

Date: _____