

**EXHIBIT III-F
QUARTERLY FINANCIAL STATUS REPORT**

1. MAIL 1 COPY SIGNED IN ORIGINAL TO:	QUARTERLY FINANCIAL STATUS REPORT _____ COMMUNITY DEVELOPMENT BLOCK GRANT ___ Public Facility ___ Economic Development	2. RECIPIENT ORGANIZATION (Name and Address)
3. CONTRACT ENCUMBRANCE NUMBER: C _____	4. BASIS OF ACCOUNTING: () CASH () ACCRUAL	5. FINAL REPORT: () YES () NO PROGRAM INCOME TRACKING: () YES () NO
6. PROJECT GRANT PERIOD: FROM (M/D/Y) TO (M/D/Y)	7. PERIOD COVERED BY THIS REPORT FROM (M/D/Y) TO (M/D/Y)	
8. EXPENDITURE CATEGORIES		
a) Net expenditures previously reported	\$ _____	\$ _____
b) Expenditures this quarter	\$ _____	\$ _____
c) Net expenditures to date (line a+b)	\$ _____	\$ _____
d) Unliquidated obligations	\$ _____	\$ _____
e) Total Expenditures and Unliquidated Obligations (line c+d)	\$ _____	\$ _____
f) Total CDBG funds on Contract (per budget in Scope of Services)	\$ _____	\$ _____
g) Unobligated balance of CDBG funds (line f-e)	\$ _____	\$ _____
9 PROGRAM INCOME Earned Since Contract Effective Date \$ _____		
a) Amount on hand at beginning of quarter	\$ _____	\$ _____
b) Amount received during quarter	\$ _____	\$ _____
c) Amount expended during quarter	\$ _____	\$ _____
d) Amount on hand at end of quarter	\$ _____	\$ _____
10. CERTIFICATION I certify to the best of my knowledge and belief the data above is correct and all expenditures were made in accordance with the grant/contract agreements.		
SIGNATURE OF AUTHORIZED OFFICIAL		DATE REPORT SUBMITTED
NAME AND TITLE (Print or type)		TELEPHONE NUMBER
		DLA-101, Revised 11/96

EXHIBIT III-F (Cont.)

SAMPLE

<p>1. MAIL 2 COPIES SIGNED IN ORIGINAL TO: CDBG Program Staff Office of Business Development 1625 Broadway, Suite 1710 Denver, CO 80202</p>	<p>QUARTERLY FINANCIAL STATUS REPORT <u>COMMUNITY DEVELOPMENT BLOCK GRANT</u> ___ Public Facility <input checked="" type="checkbox"/> Economic Development</p>	<p>2. RECIPIENT ORGANIZATION (Name and Address) Fun County P.O. Box 9999 Fun City, USA 99999</p>					
<p>3. CONTRACT ENCUMBRANCE NUMBER: C <u>8549666</u></p>	<p>4. BASIS OF ACCOUNTING: (X) CASH () ACCRUAL</p>	<p>5. FINAL REPORT: () YES () NO PROGRAM INCOME TRACKING: (X) YES () NO</p>					
<p>6. PROJECT GRANT PERIOD: FROM (M/D/Y) 01/04/94 TO (M/D/Y) 01/04/96</p>	<p>7. PERIOD COVERED BY THIS REPORT FROM (M/D/Y) 04/01/95 TO (M/D/Y) 06/30/95</p>						
8. EXPENDITURE CATEGORIES							
	CDBG Admin	CDBG Bus.Asst	Total CDBG	Match Admin	Match Bus.Asst	Leverage	
a) Net expenditures previously reported	\$10,000.00	200,500.00	200,510.00	\$4,000.00	\$55,000.00	\$500,000	
b) Expenditures this quarter	4,600.00	25,000.00	129,600.00	2,500.00	15,000.00	30,000	
c) Net expenditures to date (line a+b)	14,600.00	325,500.00	330,110.00	6,500.00	70,000.00	530,000	
d) Unliquidated obligations	6,400.00	100,000.00	106,400.00	0.00	0.00	0	
e) Total Expenditures and Unliquidated Obligations (line c+d)	21,000.00	425,500.00	436,510.00	6,500.00	70,000.00	530,000	
f) Total CDBG funds on Contract (per budget in Scope of Services)	50,000.00	550,000.00	600,000.00	20,000.00	250,000.00	1,000,000	
g) Unobligated balance of CDBG funds (line f-e)	29,000.00	124,500.00	163,490.00	13,500.00	180,000.00	470,000	
<p>9. PROGRAM INCOME Earned Since Contract Effective Date <u>\$52,340.00</u></p>							
a) Amount on hand at beginning of quarter	9,000.00	25,000.00	34,000.00				
b) Amount received during quarter	3,000.00	11,000.00	14,000.00				
c) Amount expended during quarter	10,000.00	29,500.00	39,500.00				
d) Amount on hand at end of quarter	2,000.00	6,500.00	8,500.00				
<p>10. <u>CERTIFICATION</u> I certify to the best of my knowledge and belief the data above is correct and all expenditures were made in accordance with the grant/contract agreements.</p>							
			<u>SIGNATURE OF AUTHORIZED OFFICIAL</u>			DATE REPORT SUBMITTED	
			NAME AND TITLE (Print or type)			TELEPHONE NUMBER	
						DLA-101, Revised 11/96	