

<b>Project Name:</b>	<b>CIP Project Number:</b>
<b>Project Mgr / Department:</b>	<b>Reporting Date:</b>
<b>Overall Project Assessment:</b>	
<b>Accomplishments Since Last Period:</b>	
<b>Issues of Concern:</b>	
<b>Focus for Next Month:</b>	
<b>Project Cost, Project Budget and Schedule Status:</b>	

**Budget Status:**

Monthly or Quarterly Budget		Annual or Full-Life Budget	
Monthly or Quarterly Actual		Annual or Full-Life Actual	
Variance		% Expended	
<b>Alternate Source:</b>			
<b>Variance Explanation:</b>			
<b>Corrective Actions:</b>			
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 45%; border-top: 1px solid black; padding-top: 5px;"> <b>Signature of Person Submitting Report</b> </div> <div style="width: 45%; border-top: 1px solid black; padding-top: 5px;"> <b>Date</b> </div> </div>			