



State Financial Assistance Funding

Performance Questionnaire (All Recipients)

Recipient: _____

Reporting Period: _____

Grant Number: _____

Date: _____

Performance Overview

Recipient shall provide **monthly** Performance Reports to the Department attesting to the progress towards deliverables and to validate the required minimum acceptable level of service performed. Performance Reports are due 15 days after the end of each reporting period. For example: If the monthly reporting period is July 1-31, the Performance Report is due August 15th. Please note that at the end of each quarter, the report will be due by the 10th. The quarters are as follows:

July – September

October – December

January – March

April - June

Information provided by the Recipient will be used by the Department to process payments, verify deliverables, and to compile reports on project progress to the Legislature and Executive Office of the Governor. Please note, in order for OCJG to be able to process any payments, the corresponding performance reports must be submitted.

Please contact the Office of Criminal Justice Grants at (850) 617-1250 for any questions pertaining to this report. If you would like to submit additional information, please submit a supplemental word document.

Please Note: When completing performance questions below, provide specific details of any activity and/or progress that has been made towards meeting your project's goals and objectives. For example, if you were procured bids, had a board meeting, or entered into a contractual agreement with a third-party vendor, please provide this information below. Additionally, all responses should be for the current reporting period. For example, if you are reporting in September, please only include the activities that occurred for the month of August.

Personnel

During the reporting period, did you have any personnel-related activities?

Briefly describe what the personnel accomplished during this reporting period. Please ensure responses relate to your project's goals and objectives.

Overtime

During the reporting period, did you have any overtime-related activities?

Briefly describe what overtime activities were accomplished during this reporting period. Please ensure responses relate to your project's goals and objectives.

Travel

During the reporting period, did you have any travel-related activities?

Briefly describe the purpose and/or type of travel, location, and dates, which were accomplished during this reporting period. Please ensure responses relate to your project's goals and objectives.

Equipment

During the reporting period, did you have any procurement activities for equipment?

Briefly describe what equipment was purchased during this reporting period. Please ensure responses relate to your project's goals and objectives.

Supplies

During the reporting period, did you have any procurement activities for supplies?

Briefly describe what supplies were purchased during this reporting period. Please ensure responses relate to your project's goals and objectives.

Consultants/Contracts

During the reporting period, did you have any consultants/contracts-related activities?

Briefly describe what the consultants and/or contracts accomplished during this reporting period. Please ensure responses relate to your project's goals and objectives.

Other Costs

During this reporting period, did you have any procurement activities for other costs?

Briefly describe what other costs were purchased during this reporting period. Please ensure responses relate to your project's goals and objectives.

Project Progress

If no activities occurred in your approved budget categories during this reporting period, please describe any barriers that occurred and/or progress that has been accomplished.

This Completes the State Financial Assistance Performance Measures