**Quarterly Report Form**

**BD\_\_-1068-1068C-1068L-\_\_\_\_\_\_**

**Please submit Quarterly Reports to:** **MGCCMF@MassGaming.gov**

Quarterly reports are due April 30th for the period ending March 31st, July 31st for the period ending June 30th, October 31st for the period ending September 30th and January 31st for the period ending December 31st.

|  |  |
| --- | --- |
| Grantee:  | Project Name:  |
| Vendor Code:  | Total Award:  |
| Funding Requested (Fill out Exhibit B)  | \_\_\_ Yes  | \_\_\_ No  | Contract End Date:  |
| Period Ending: | Type of Grant:  |
| Date Submitted: | MMARS I.D.: |

|  |
| --- |
| **Expenditures This Quarter** |
| **Date** | **Description** | **Expenditure** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

|  |
| --- |
| **Description of Activities:**  |
|  |

**Please check below if applicable**:

|  |  |
| --- | --- |
|  | Please send the next funding allocation when approved. Attached is the Summary of Expenditures and related invoices. |

Prepared by:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Exhibit B - Request for Disbursement**

**BD\_\_\_-1068-1068C-1068L-\_\_\_\_\_**

**Please compile and submit this form with scanned copies of you invoices**

 **as one PDF to** **MGCCMF@MassGaming.gov**

|  |  |
| --- | --- |
| Grantee:   | Project Name:  |
| Vendor Code:  | Total Award:  |
| Amount Requested:   | Contract End Date: |
| Invoice Date Range:  | MMARS I.D.: |

**Use the following table to detail your invoiced expenditures.**

**To be eligible for disbursement you must submit this form with your timely Quarterly Report.**

|  |  |  |  |
| --- | --- | --- | --- |
| Vendor and Invoice #  | Vendor / Description  | Qty  | Amount   |
|   |   |   |   |
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|   |   |   |   |
|   |   |   |   |
| Total:  |   |  |

Prepared By \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_