Attachment B CDC Recovery Act Performance Progress Report







CDC Recovery Act Performance Progress Report

Centers for Disease Control and Prevention U.S. Department of Health and Human Services

OMB Approval Number 0920-xxxx Expiration Date: XX/XX/20XX					Page	Of Pages	
Federal Agency and Organization Element to Which Report is Submitted		2. Federal Grant or Other Identifying Number Assigned by Federal Agency		3a. DUNS			
				3.b. EIN			
4. Recipient Organization (Name and complete address including zip code) 5. Recipient Identifying Number or Account Number						dentifying Number or Account	
6. Project/Grant Period		7. Reporting Period End Date (Month, Day, Year)		8. Final Report? Yes			
Start Date: (Month, Day, Year)	End Date: (Month, Day, Year)				9. Report Free annual quarterly (If other, desc	semi-annual other	
10. Performance Narrativ	e						
11. Other Attachments (attach other documents as needed or as instructed by the awarding Federal Agency)							
12. Certification: I certify to the best of my knowledge and belief that this report is correct and complete for performance activities for the purposes set forth in the award documents.							
12a. Typed or Printed Name and Title of Authorized Certifying Official			12c. Telep	12c. Telephone (area code, number and extension)			
			12d. Ema	12d. Email Address			
12b. Signature of Authorized Certifying Official				12.e. Date	12.e. Date Report Submitted (Month, Day, Year)		
				13. Agend	cy use only		

The information collection requirements contained in this application have been submitted to the Office of Management and Budget (OMB) for review under the Paperwork Reduction Act of 1995 (44 U.S.C. 3501-3520). This agency may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number. Information is submitted in accordance with the regulatory authority contained in each program rule. Public reporting burden for this collection of information is estimated to be 1.5 hours, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB Approval Number 0920-xxxx Page Of Pages Expiration Date: XX/XX/20XX						
Element to Which Report is Submitted Ident		Identify	eral Grant or Other ing Number Assigned by I Agency	3a. DUNS		
				3.b. EIN		
			B. Performance Mea	sures		
B (1) Item	B (2) Measure		B (3) Indicator or Status		B Expla	(4) anation
B-01				Please attacl	n a descriptio	n of these activities
B-02				Please attacl	n a descriptio	n of these activities
B-03				Please attacl	n a descriptio	n of these activities
B-04				Please attacl	h a descriptio	n of these activities
B-05				Please attacl	h a descriptio	n of these activities
B-06				Please attacl	h a descriptio	n of these activities
B-07				Please attacl	n a descriptio	n of these activities
B-08				Please attacl	n a descriptio	n of these activities

Line Item Instructions for Performance Progress Report

	Performance Progress Report – Page 1					
Ite m	Data Elements	Instructions				
1	Awarding Federal agency and Organizational Element to Which Report is Submitted	Enter the name of the awarding Federal agency and organizational element identified in the award document or otherwise instructed by the agency. The organizational element is a sub-agency within an awarding Federal agency.				
2	Federal Grant or Other Identifying Number Assigned by the awarding Federal agency	Enter the grant/award number contained in the award document.				
3a	DUNS Number	Enter the recipient organization's Data Universal Numbering System (DUNS) number or Central Contract Registry extended DUNS number.				
3b	EIN	Enter the recipient organization's Employer Identification Number (EIN) provided by the Internal Revenue Service.				
4	Recipient Organization	Enter the name of recipient organization and address, including zip code.				
5	Recipient Account Number or Account Number	Enter the account number or any other identifying number assigned by the recipient to the award. This number is strictly for the recipient's use only and is not required by the awarding Federal agency.				
6	Project/Grant Period	Indicate the project/grant period established in the award document during which Federal sponsorship begins and ends. Note: Some agencies award multi-year grants for a project/grant period (e.g., 5 years) that are funded in increments known as budget periods or funding periods. These are typically annual increments. Please enter the project/grant period, not the budget period or funding period.				
7	Reporting Period End Date	Enter the ending date of the reporting period. For quarterly, semi-annual, and annual reports, the following calendar quarter reporting period end dates shall be used: 3/31; 6/30; 9/30; and or 12/31. For final PPRs, the reporting period end date shall be the end date of the project/grant period. The frequency of required reporting is usually established in the award document.				
8	Final Report	Mark appropriate box. Check "yes" only if this is the final report for the project/grant period specified in Box 6.				
9	Report or Frequency	Select the appropriate term corresponding to the requirements contained in the award document. "Other" may be used when more frequent reporting is required for high-risk grantees, as specified in OMB Circular A-110.				
10	Performance Narrative	Attach performance narrative as instructed by the awarding Federal agency.				
11	Other Attachments	Attach other documents as needed or as instructed by the awarding Federal agency.				

Line Item Instructions for Performance Progress Report

	Performance Measures Section – Page 2				
Item	Data Element	Instructions			
1	Awarding Federal agency and Organizational Element to Which Report is Submitted	Enter the name of the awarding Federal agency and organizational element identified in the award document or otherwise instructed by the agency. The organizational element is a sub-agency within an awarding Federal agency.			
2	Federal Grant or Other Identifying Number Assigned by the awarding Federal agency	Enter the grant/award number contained in the award document.			
3a	DUNS Number	Enter the recipient organization's Data Universal Numbering System (DUNS) number or Central Contract Registry extended DUNS number.			
3b	EIN	Enter the recipient organization's Employer Identification Number (EIN) provided by the Internal Revenue Service.			
B. (1)	Item	No specific instructions for this section			
B. (2)	Measure	Enter the description or phrase describing the actual performance measure against which project/award progress and award activities can be measured. This can be quantitative or qualitative. For example, it can include counts, percentages, targeted dates, time periods, or levels. It could also describe a condition, a result, or a status. (Awarding Federal agency guidance may be provided to prescribe specific measures, prescribe how the measures can map to program goals/objectives or program/priority areas, or leave determination to the recipient).			
B. (3)	Indicator or Status	Provide a numeric indicator (%, #) or status statement (completed, not completed or ongoing) that best characterizes performance progress for the measure. (Awarding Federal agency guidance may be provided to prescribe specific numeric or status indicators to be used by recipients)			
B. (4)	Explanation	Enter a narrative explanation of your performance progress for the measure.			