DOE F 540.3 OMB Control No. 1910-5127 Expiration Date: xx/xx/2023

1U.S. Department of Energy WEATHERIZATION ASSISTANCE PROGRAM **QUARTERLY PROGRAM REPORT**

State:	Budget period:	/	/ -	/	/	Grant Number:
State:	Budget period:	/	/ -	/	/	Grant Number:

I. GRANT OUTLAYS - FUNDS SUBJECT TO DOE PROGRAM RULES (rounded to the nearest dollar)

Reporting Period	/ - /	/ - /	/ - /	/ - /	Total
Quarter	Q1	Q2	Q3	Q4	To Date
A. OUTLAYS BY FUND SOURCE					
DOE					
Other funds included in grant budget, section A					
Total Grant Outlays					
B. OUTLAYS BY FUNCTION					
Grantee Administration					
Subgrantee Administration					
Grantee T&TA					
Subgrantee T&TA					
Program Operations Total					
Health and Safety					
Vehicles and Equipment Acquisition Cost *					
Liability Insurance					
Leveraging					
Financial Audits					
Total Grant Outlays					
Vehicles and Equipment Amortized Cost *					

Notes: Total grant outlays must equal outlays reported on the Federal Financial Report, line 10.e.

* Acquisition (actual cost to purchase) vehicle and equipment costs must be included on this form and are used to match net outlays on the FFR. Amortized vehicle and equipment costs are used to calculate the average cost per unit.

U.S. Department of Energy WEATHERIZATION ASSISTANCE PROGRAM QUARTERLY PROGRAM REPORT

State:	Budget period:	/	/ -	/	/	Grant Number:
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II. GRANT PRODUCTION

	Quarter	Q1	Q2	Q3	Q4	Total to Date
A.	TOTAL ANNUAL ENERGY SAVINGS (final report only)					
В.	DOE UNITS* (includes other funds if included in DOE budget)					
	1. UNITS BY TYPE			Į.		
	Owner-Occupied Single Family					
	Renter-Occupied Single Family					
	Owner-Occupied 2-4 units per site					
	Renter Occupied 2-4 units per site					
	Multifamily, 5 or more units per site					
	Owner-Occupied Mobile Home					
	Renter-Occupied Mobile Home					
	Shelter					
	2. UNITS BY PRIMARY HEATING FUEL**					
	Natural Gas					
	Fuel Oil					
	Electricity					
	Propane/LPG					
	Kerosene					
	Wood					
	Other Fuel					
	No Heating System					
	3. UNITS BY OCCUPANCY					
	Elderly-Occupied					
	Disabled-Occupied					
	Native American-Occupied					
	Children-Occupied					
	High Residential Energy User					
	Household with a High Energy Burden					
	4. OTHER UNIT CATEGORIES					
	Reweatherized Total					
	Window Replacements in Support of the Reduction of Lead- Based Paint Hazards					
C.	TOTAL PEOPLE ASSISTED WITH GRANT FUNDS* (includes other funds if included in DOE budget)					
	Elderly					
	Persons with Disabilities					
	Native Americans					
	Children					
D.	Leveraged Units (units completed with other funds that are not included in DOE budget, any part of the definition of a DOE unit has been met)					

^{*} Do not include reweatherized units in sections B.1, B.2, B.3 and C.

** "Primary Heating Fuel" is the fuel that provides the most space heat in the home.

III. COMMENTS	
Submitted by	Date
Type name_	-
Title	

OMB Burden Disclosure Statement

Public reporting burden for this collection of information is estimated to average 4 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0043), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

U.S. Department of Energy WEATHERIZATION ASSISTANCE PROGRAM QUARTERLY PROGRAM REPORT INSTRUCTIONS

The Quarterly Program Report format is designed to gather production and expenditure data. This report is to be submitted quarterly to the applicable Department of Energy 30 days after the end of the reporting period.

I. GRANT OUTLAYS - FUNDS SUBJECT TO DOE PROGRAM RULES

- A. By fund source: Outlays this quarter and program year to date for
 - 1. DOE funds
 - 2. All other funds listed in the grant budget, Section A, including PVE (Exxon, Stripper-Well, etc.), LIHEAP, state, local, and private funds that are *part of the approved DOE grant budget*.
- B. By function: Outlays this quarter and program year to date for each function in the DOE grant budget, section B. *Total must equal total in A.2 above.*
 - Acquisition (actual) vehicle and equipment costs are used to match net outlays in FFR. Amortized vehicle and equipment costs
 are used to calculate the average cost per unit.

II. GRANT PRODUCTION

Enter figures only for the quarter being reported except to correct previous quarter information. Include reweatherized and low cost/no cost units only in section B.4.

- A. Estimated Total Annual Energy Savings Estimate of total annual energy saved as a result of weatherization work. *Include in final report only.*
- B. DOE units completed this quarter with all funds included in the approved DOE grant budget, all sources.
 - Units by type: Number completed this quarter by type specified. The sum should equal total units completed with funds in the
 approved DOE budget. A completed unit in a building containing five or more units should be reported as a Multi-Family unit.
 A completed unit in a building containing four units or less should be reported under one of the two Single-Family categories.
 - 2. Units by primary heating fuel: Number of units completed by category of primary heating fuel. Primary heating fuel is the fuel that provides the most space heat in the home.
 - 3. Units by occupant: Number of units completed by category of occupant. The sum will not equal total units completed.
 - Other categories: Units reweatherized.
- C. Persons assisted with funds included in the DOE grant budget, all sources: Total and by category. Sum of persons by category will not equal total persons assisted.
- D. Leveraged units completed with other funds not included in the DOE budget provided any part of the definition of a DOE unit has been met

III. COMMENTS

Include here any additional information needed to clarify grant outlays and production reported this quarter.

Submitted by: Signature of the person submitting the report.

Date signed.

Typed name and title of the submitter.