AGENCY NAME:

CONTRACT #:

CONTACT PERSON:

EMAIL:

REPORTING PERIOD:

# **Instructions**

1. **Complete this** form for the most recent reporting period and indicate that period above.
2. **Email Quarterly Report** (completed form and tracking sheet) to Marilyn Gisser, [Marilyn.gisser@dcyf.wa.gov](mailto:Marilyn.gisser@dcyf.wa.gov) by the following due dates.

|  |  |
| --- | --- |
| **Reporting period** | **Report due date** |
| October – December 2022 | January 25, 2023 |
| January – March 2023 | April 25, 2023 |
| April – June 2023 | July 25, 2023 |

1. Please contact Marilyn Gisser [Marilyn.gisser@dcyf.wa.gov](mailto:Marilyn.gisser@dcyf.wa.gov), 360-701-2529, with any questions.

# **Report. Please respond to these questions.**

* 1. What types of supplies did you distribute during this reporting period?

|  |
| --- |
|  |

* 1. How did you did you determine what types of to provide?

|  |
| --- |
|  |

* 1. Where were the supplies distributed to families? If they were distributed by partner organization, please provide the names and locations of the partner organizations.

|  |
| --- |
|  |

* 1. Describe general characteristics of the families who received the supplies. (e.g. clients of x program, residents of y neighborhood, etc.

|  |
| --- |
|  |

* 1. Approximately how many families received these supplies during the reporting period? Please explain how you estimated that number. We understand you may not know the exact number?

|  |
| --- |
|  |