



Wake County Alcohol Beverage Control Board

1212 Wicker Drive | Raleigh, NC 27604 | 919.832.2726 | WakeABC.com

PROGRESS REPORT FORM

Note: to be typed, completed, and submitted within 12 months of grant monies being awarded and/or before a follow up grant request is submitted

1. Project Title:
2. Organizations Name:
3. Physical Address:
4. City / State/ Zip:
5. Phone:
6. Website Address:
7. Organization’s Grant Contact:
8. Contact’s Title:
9. Contact Phone Number:
10. Contact’s Email Address:

11. How many individuals has your program served since your grant was awarded:
12. What is the estimated cost of services per individual served:
13. What are the current revenues for your organization:
14. What are the current expenditures for your organization:

15. Within 500 words, please give a summary of what your project accomplished:

16. Within 500 words, what would your organizations have done differently with your program since originally applying:

17. Within 500 words, how could Wake County ABC have assisted you better with your program:

18. Please include two (2) testimonial letters from those your program has served
19. In your organization’s Progress Report Form response, please include the following text and signature lines listed below in *italics*.

By signing below, I attest that all information in this Progress Report is true to the best of my knowledge and that my organization adhered to the regulations set forth in North Carolina General Statute 18B-805(H).

Signature

Date

Printed name

Title