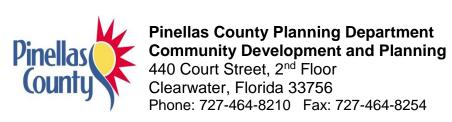
## **Attachment F**



## 2016-2017 CDBG ACTIVITY PERFORMANCE REPORT For Low/Moderate Benefit Activities Collecting Income Data

Name of Agency:	
Agency Address:	
Name of Project:	
Site Address:	
Contract Number:	Date:
Collecting data needed to complete this report:	
In order to complete this form, you will need to co	ollect certain data for each family served (a single person is considered
	ns living in the same household who are related by blood, marriage or
adoption. The data needed is:	
Total number of persons in the fa	mily (can be one person)
Race/ethnicity of each family men	nber (see number 4 on next page)
Income of each family (total incon	ne of all family members)
Maintain the above data in your files to document	t your report.
Completing the report:	
Quarterly, fill out the following report and return	to your project manager at the Pinellas County Planning Department.
Approximate date which the grant funded por	tion of the activity began to assist persons:

2. End of reporting period (date):

3. Total number of persons served by this activity (all persons, not just low- and moderate-income).

Residential Jurisdiction	<b>Total Persons Served</b>
City of Clearwater Residents	
City of Largo Residents	
City of St. Petersburg	
Residents of Other Locations	
Total Served-All Locations	

4. Please tabulate race/ethnicity information collected on the number of persons served and report as follows:

City of Clearwater		City of Largo		City of St. Petersburg		Other Locations		Total Served		
Race	# Total	# Hispanic	# Total	# Hispanic	# Total	# Hispanic	# Total	# Hispanic	# Total	# Hispanic
White										
Black/African American										
Asian										
American Indian/Alaskan Native										
Native Hawaiian/Other Pacific Islander										
American Indian/Alaskan Native <i>and</i> White										
Asian and White										
Black/African American <i>and</i> White										
American Indian/Alaskan Native <i>and</i> Black/African American										
Other Multi-Racial										
TOTAL*		_						_		

<sup>\*</sup> In the # Total column, count total served for each race for each residential jurisdiction listed. Then of the number served in that race, indicate in the # Hispanic column for each residential jurisdiction listed, how many of the # Total were Hispanic. Total of <u># Total</u> columns should be the same number as those reported in # 3.

5.	In completing the sections below, count all persons who are members of very low-, low-, moderate-income and non-
	low moderate-income families. The income of all family members and the size of the family are used to determine if
	the family members fall into these categories. Income chart available upon request.

Identify the number of persons served/assisted by the activity for each income range/residential jurisdiction listed.

Income Range	City of Clearwater	City of Largo	City of St. Petersburg	Other Locations	Total Served
Very Low-Income					
0 - 30%					
Low-Income					
31% - 50% AMI					
Moderate-Income					
51% - 80% AMI					
Non-Low/Moderate-Income					
Over 80% AMI					

Person completing report:	
Title and phone number:	

If there are any questions in completing this reporting form, please contact your project manager in the Community Development and Planning Division of the Planning Department at 464-8210. Thank you.

(rev. 8/2016)