

North Carolina Department of Public Safety

This information should be completed and submitted by each grantee receiving \$1 - \$999,999 in total state grant funds.

Program Activities and Accomplishments Report

All forms must be completed and emailed to: DPS_Grantcompliance@ncdps.gov

Each grantee receiving \$1 - \$999,999 should complete the basic information requested here relative to the organization, and a description of activities and accomplishments undertaken by the grantee with the State funds.

State Authorization: G.S.143C-6-23 09 NCAC 03M .0401

Table with 2 columns and 7 rows: Grantee Name, Grantee Tax ID #, Program Name, Project/Activity Title, Grantee's Fiscal Year End (mm/dd/yyyy), Date of This Report, Preparer of This Report.

In compliance with the requirements of G.S. 143-6.2, Use of State Funds by Non-State Entities, (repealed June 30, 2007) and G.S. 143C-6-23, State grant funds: administration, oversight and reporting requirements, (effective July 1, 2007), the following is a description of activities and accomplishments undertaken by our organization using the provided state funding.

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1. What were the original goals and expectations for the activity supported by this grant?

2. If applicable, how have those goals and expectations been revised or refined during the course of the project?

This form is effective 10/1/24.

If there are any questions, please contact the Agency's Division that provided your grant.

Emergency Management: 919-825-2500

Governor's Crime Commission: 919-733-4564

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3. What has the activity accomplished with these grant funds? Please include specific information including facts and statistics to support conclusions and judgments about the activity's impact.

4. If the activity is a continuing one, briefly summarize future plans and funding prospects.