**REPORT OF PAST PERFORMANCE**

*(Current Title III recipients only)*

**·AGENCY NAME·**

**·CURRENT PROJECT YEAR·**

| 2019 Projected Outcome | Program Outputs  (Activities, service units, number of participants & timelines) | Outcome Results as of 6.30.2019 |
| --- | --- | --- |
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| --- | --- | --- | --- | --- |
| PRIMARY SERVICE (List) | (Service 1) \* | | (Service 2) \* | |
| 3. NUMBER OF UNDUPLICATED PERSONS SERVED | PROJECTED for 2019 | ACTUAL AS OF  06.30.2019 | PROJECTED for 2019 | ACTUAL AS OF  06.30.2019 |
| A. NUMBER SERVED BY COUNTY (List) |  |  |  |  |
| 1. |  |  |  |  |
| 2. |  |  |  |  |
| 3. |  |  |  |  |
| 4. |  |  |  |  |
| 5. |  |  |  |  |
| 6. |  |  |  |  |
| 7. |  |  |  |  |
| 8. |  |  |  |  |
| 9. |  |  |  |  |
| 10. *(Attach another sheet for additional counties.)* |  |  |  |  |
|  |  |  |  |  |
| 4. NUMBER OF LOW-INCOME PERSONS |  |  |  |  |
| 5. NUMBER OF MINORITY PERSONS |  |  |  |  |
|  |  | |  | |
| 6. NUMBER OF SERVICE UNITS PROVIDED  (List unit measure for each service) | (Measure-example “1 hour”) | | (Measure) | |
|  | PROJECTED for 2019 | ACTUAL AS OF  06.30.2019 | PROJECTED for 2019 | ACTUAL AS OF  06.30.2019 |
| Total Units Provided |  |  |  |  |
| 7. TOTAL UNIT COST |  |  |  |  |

\*Add an additional Page for more than two services.