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| **Grant No. – Sub. Name:** | **MT039-City of Avon Park** |
| **Project Title:** | **Drinking Water Infrastructure Project**  |
| **Funding Awarded:** | ***$670,623.00*** |
| **Agreement Period:** | ***01/10/2021 – 01/09/2025*** |
| **Primary Points of Contact Information:** | *April Cluess**DEO - Office of Long-Term Resiliency*  | *Melody Sauerhafer**863-452-4410**msauerhafer@avonpark.city* |
| Activity Reporting Period: **June 2023** |
| *An update of this report shall be submitted to DEO ten (10) calendar days after the end of each month.* |
| **Section One – Financial Data:**  |
|  |
|  | Amount | Funds used this period | Funds used to date | Balance Remaining |
| Leverage Funds (A) |  *0* |  *0* |  *0* |  *0* |
| CDBG-MIT Funds (B) | ***$670,623.00*** | *0* | *0* | ***$670,623.00*** |
| TOTAL Project Funds (A+B) | ***$670,623.00*** | *0* | *0* | ***$670,623.00*** |
|  |
| **Section Two – Accomplishments within the Past Month:** |
| A narrative MUST be includedEngineering design 20%. Completed and adopted the FWA and QA/QC policies. Completed Fair Housing activity putting fair housing colouring books at the library. Completed progress meetings with FDEO. No FDEO invoice this period. Council decided to readvertise for Admin services. Readvertisement was delayed due to the need for a meeting with FDEO on RFP requirements. |
| **Section Three – Issues or risks that have been faced with resolutions:** |
| None. |
| **Section Four – Projected activities to be completed within the following Month:** |
| A narrative MUST be includedReadvertise admin RFP. Work on revisions to the purchasing policy. 25% Engineering design.  |
| **Section Five – Required Submissions:** |
| * **Attachment B - Project Budget**
	+ Has the Project Budget changed?
	+ *If answered “Yes”, please submit the* ***Revised Attachment B*** *for review and approval.*
 | Yes [ ]  | No [x]  |
| * **Attachment C - Activity Work Plan**
	+ Has the Activity Work Plan/Project Timeline changed?
	+ *If answered “Yes”, please submit the* ***Revised Attachment C*** *for review and approval.*
 | Yes [ ]  | No [x]  |
| * **Staffing Plan**
	+ Were there any Staffing changes?
	+ *If answered “Yes”, please submit the* ***Revised Staffing Plan*** *which will include the* ***Revised Org Chart*** *and* ***Updated names and Job descriptions.***
 | Yes [x]  | No [ ]  |
| * **Equipment Transfer/Disposal**
	+ Were there Equipment Transferred/Disposed?
	+ *If answered “Yes”, please request a copy of the Equipment Transfer/Disposal Form and disposition instructions from your grant Manager. Complete and submit the Equipment Transfer/Disposal form.*
 | Yes [ ]  | No [x]  |
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| *This report was prepared by:****J. Corbett Alday/Melody Sauerhafer*** | **Signature and date:**  |