# National School Lunch Program

# Equipment Assistance Grant Quarterly Progress Activity Report

*Email your quarterly report to* [*ode.schoolnutrition@ode.oregon.gov*](mailto:ode.schoolnutrition@ode.oregon.gov)

Fiscal Year (FY) of the Equipment Grant Awarded:  2021-2023  2022-2024

Indicate which quarter you are reporting:  1st Qtr. (Oct-Dec)  2nd Qtr. (Jan-Mar)

3rd Qtr. (Apr-Jun)  4th Qtr. (Jul-Sept)

Sponsor’s Name:       School’s/Site Name:

Type of equipment:        New

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| 1. Progress towards expending its grant funds:      1. Any accomplishments or challenges encountered in expenditure activities:      1. If applicable, reasons why haven’t spent all or part of grant funds:      1. The amount and percentage of the grant award spent:      1. The types of equipment purchased, the cost of each piece of equipment purchased with grant funds, and, if applicable, any ancillary costs covered with grant funds:      1. The impact of equipment purchased with grant funds on the nonprofit food service program:      1. If applicable, whether the recipient has returned, or is considering returning, equipment purchased with grant dollars.          \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Signature of Authorized Representative  Printed Name:       Title: |
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Duplicate as necessary Revised 1/2023