**Jurisdiction Name:** Contract # STATE OF CALIFORNIA - CDBG PROGRAM FOR CDBG USE ONLY PLANNING **Project Completion Report** Complete this form as a Setup Report, a Completion Report or a Setup and Completion Report and Mgr Initials: Date submit to your CDBG Program Representative. Department of Housing and Community Development Rep Initials: Date CDBG Program CAPES □ idis P.O. Box 952054 Fiscal Initials Date: Sacramento CA, 94252-2054 Program Income PI Receipt # **Select Option** √ Grants PI Voucher# ☐ PI **CDBG-Assigned Numbers CDBG Project Number IDIS Activity Number** Original 1/1/2014 12-CDBG-8401 Original 09-2015 9/30/2015 0 JURISDICTION INFORMATION & PREPARER **Jurisdiction Contact Information** Preparer Admin Contractor/Program Operator 1a. Name (Contact Person) 2a. Preparer's Name Jane Royer Barr Jane Royer Barr 1b. E-Mail 2b. Organization (if not grantee) barrj@co.monterey.ca.us 1c. Phone/Direct Line 2d. Phone/Direct Line 2c. E-Mail barrj@co.monterey.ca.us 831.755-5389 831.755-5389 Subrecipient Information (Only) 3a. Organization name 3b. Complete address 3c. Organization is categorized as: 3d. DUNS number 3e. E-Mail 3f. Phone/Direct Line **Select Option** Check all that applies to this organization A Faith-Based Organization An Institution of Higher Education Non-Profit Organization PROJECT & ACTIVITY INFORMATION REQUIRED 1a. Name of Project Regional Cut Flower Shipping Consolidation Study 1b. Project Service Address 1c. City 1d. Zip Code CDBG Project Amount (Incl AD) North Monterey County 2. Activity Description / Accomplishment Narrative: This study was to determine if the local cut flower industry could realize cost savings by developing a shipping consolidation facility. It is hoped that these costs savings could make the local industry more competitive and lead to job creation. 4. Activity & Matrix Code 5. Accomplishment Type 3. National Objective LMA - Low/mod area benefit 01 - People 20A - Planning No 6. Do you anticipate this plan to result in a CDBG Activity? 7. If "Yes", select activity 8. if "Yes" Anticipated date for contract implementation AREA BENEFIT DATA Census / ACS ☐ Income Survey Benefit data determined by **County Code Select Option** 

Jurisdiction Name:	Contract #	
S	TATE OF CALIFORNIA - CDBG PROGRAM	
Project Setup & Completion Report		
	Block Groups	
Census Tract		10
Census Tract		10
Census Tract	1 2 3 4 5 6 7 8 9	10
Census Tract	1 2 3 4 5 6 7 8 9	10
Census Tract	1 2 3 4 5 6 7 8 9	10
Census Tract	1 2 3 4 5 6 7 8 9	10
Census Tract	1 2 3 4 5 6 7 8 9	10
Total # Low/Mod	Total Low/Mod Universe Population	
Part D PRO	DJECT FUNDING SOURCE DETAIL REQUIRED	
1. CDBG Grant	20A - Planning	
Funding Type (CDBG F	Amount (CBDG Funds)	5)
CDBG - Grant		
Activity Delivery		
	TOTAL	
2. CDBG Program Income		
Program Income (PI) Type Amount PI Funds		
CDBG - PI Grant		
Activity Delivery		
	TOTAL	
3. Leverage and Other Funding	Sources	
Funding Sour	ce Name of Source Amount	
L300-Local Fur	ds California Cut Flower Commission \$1,820	
	TOTAL \$1,820	
•	TOTAL PROJECT COST \$1,820	
Comments: explain any issues with this activity or clarification of information provided in this form.  HCD disallowed the use of awarded PTA funds to complete this study. The study was subsequently prepared using general administration funds.		