Cooperative Agreement Performance Report								
		PART I						
Cooperative Agreement Number	2. Recipient Name and Address		CAGE Code	5. Period	of Performance	6. Rep	orting Period	
004000	Name Division (if applicable)	me A Book Time		From:	•	From:	(MM/DD/YYYY)	
SP4800-	Street City, State Zip code	(interim	or final)	То:	01/01/2014 (MM/DD/YYYY)	To:	07/01/2014 (MM/DD/YYYY)	
	1	PART II			12/31/2014	<u> </u>	09/30/2014	
	Always complete Part II (due with		ollow report is	netructione				
7. New Clients	Aways complete Fait II (due with	interim and iniai reports). To	Ollow report in	i structions				
7.a. New clients goal						10		
7.b. New clients (added this	reporting period)					1		
7.c. New clients previously re						9		
7.d. Total new clients (sum o	·					10		
	I business concerns in block 7.d.					10		
	essed area concerns in block 7.d. needed (block 7.a. minus 7.d.)					10 0		
8. Active Clients	leeded (block 7.a. Illinus 7.d.)					10		
8.a. Number of small busines	ss concerns in block 8					10		
8.b. Number of distressed ar						10		
Counseling Time					HOURS		MINUTES	
9.a. Counseling time goal					10	0	10	
9.b. Counseling time (this re	porting period)				,	7	10	
9.c. Counseling time previou	sly reported					9		
9.d. Total counseling time (s	·				10	16		
	with small business concerns in block 9.d.					16		
	with distressed area concerns in block 9.d.					16 -6		
9.e. Remaining counseling to     Participated events	me needed (block 9.a. minus 9.d.)				-1	6	-5	
10.a. Participated events goa						10		
10.b. Participated events (thi						10		
10.c. Participated events pre						1		
	10.d. Total participated events (sum of blocks 10.b. & 10.c.)					2		
10.e. Remaining participated	l events needed (block 10.a. minus 10.d.)					8		
		PART III						
Always c	omplete Part III (due with interim and final rep		ions. Use a	continuatio	n sheet if necessar	<b>/</b> .		
11. Discussion (follow report instru		,				<u> </u>		
12. Discussion (follow report instru	ctions)							

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Cooperative Agreement Number	e Agreement Number 2. Recipient Name and Address 3. Recipient CAGE Co		5. Period	d of Performance	ance 6. Reporting Period		
	Name	4. Report Type	From:	(MM/DD/YYYY)	From:	(MM/DD/YYYY)	
SP4800-	Division (if applicable) Street						
	City, State Zip code	(interim or final)	То:	(MM/DD/YYYY)	To:	(MM/DD/YYYY)	
13. Discussion (follow report instruc	ctions)						
14. Discussion (follow report instruc	ctions)						
14. Disoussion (follow report institut	Silving,						
15 Di							
15. Discussion (follow report instruc	ctions)						
16. Discussion (follow report instruc	ctions)						
17. Discussion (follow report instruc	ctions)						

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Cooperative Agreement Number 2.	Recipient Name and Ad	drace	3. Recipient CAGE Code	5 Perio	d of Performance	6 Bor	orting Period	
1. Cooperative Agreement Number 2.	necipient Name and Ad	u1633	3. Rediplent OAGE Code	3. 1 6110	d of Fellormance	Jo. 1165	orting r eriod	
l l	ame		Report Type	From:	(MM/DD/YYYY)	From:	(MM/DD/YYYY)	
1 3240111- 1	ivision (if applicable) reet				,		,	
	ity, State Zip code		(interim or final)	То:	(MM/DD/YYYY)	To:	(MM/DD/YYYY)	
		PARTI	V			1		
Complete Part IV v	with the report for the peri	od ending on 9/30 (due annuali		0/1 - 9/30	. Follow report insti	uctions.		
18. Contract Awards by DoD			7/					
18.a. Number of prime contract a	awards received by all ac	tive clients that were awarded b	ov DoD				4	
18.b. Dollar value of awards in b			- <del></del>			\$36,350.50		
18.c. Number of awards received		e small business concerns in bl	ock 18.a.			4		
18.d. Dollar value of awards in b	•		001110101			\$36,350.50		
19. Contract Awards by Federal Agenc								
19.a. Number of prime contract a		tive clients that were awarded b	ov Federal agencies other t	han DoD			4	
19.b. Dollar value of awards in b	•	Shorte that word analous	., . 300.0. agonolog other t			\$34,500.00		
19.c. Number of awards received		e small business concerns in bl	ock 19.a.				4	
19.d. Dollar value of awards in b	•					S	34,500.00	
20. Contract Awards by State and Loca								
20.a. Number of prime contract a		tive clients that were awarded b	ov State and local governm	ents			1	
20.b. Dollar value of awards in b	•	are one are true vere are used	by Clate and local governm	01120		\$:	50,000.00	
20.c. Number of awards received		e emall business concerns in bl	ock 20 a				1	
20.d. Dollar value of awards in b	_ ·	s sindii business concerns in bi	OOR 20.8.			- Si	50,000.00	
21. Subcontract Awards Resulting from		by DoD						
21.a. Number of subcontract awards		•	ontract awards by DoD				2	
21.b. Dollar value of awards in b		e chemis resulting from prime co	ontiact awards by Dob			\$60,000.00		
		a small business concerns in bl	ook 21 a				2	
21.c. Number of awards received by active clients that are small business concerns in block 21.a. 21.d. Dollar value of awards in block 21.c.						\$60,000.00		
22. Subcontract Awards Resulting from		by Federal Agencies other than	n DoD			Ψ.	50,000.00	
		· · · · · · · · · · · · · · · · · · ·		r than Dal	,		1	
22.a. Number of subcontract awards received by all active clients resulting from prime contract awards by Federal agencies other than DoD 22.b. Dollar value of awards in block 22.a.					<del>'                                       </del>	\$150,000.00		
						1		
22.c. Number of awards received by active clients that are small business concerns in block 22.a.  22.d. Dollar value of awards in block 22.c.						\$150,000.00		
23. Subcontract Awards Resulting from		by State and Local Governmen	210			Ψ1.	50,000.00	
		•		oromonto			1	
23.a. Number of subcontract awards received by all active clients resulting from prime contract awards by State and local governments 23.b. Dollar value of awards in block 23.a.						\$50,000.00		
23.c. Number of awards received by active clients that are small business concerns in block 23.a.						\$30,000.00		
23.d. Dollar value of awards in b	•	e sindii business concerns in bi	OOR 20.8.			\$50,000.00		
25.d. Dollar value of awards in b	100K 20.0.	PART '					,	
Complete Part V with the report	for the period ending on			the perio	od 10/1 - 9/30 Folia	w renort	instructions	
24. Number of surveys distributed	.s. s.o poned onding on	2.22 (400 aaaii), 110poit 80i		,o porn	22 . 3,		10	
25. Number of surveys returned						10		
26. Results: survey question #1 (follow report instructions)						10		
27. Results: survey question #2 (follow					+			
28. Results: survey question #3 (follow					+			
20. Tresuits, survey question #5 (10110W	report manuolions)	29.a. Name and Title of Autho	orized Certifying Official	20 h T	I elephone (Area cod	o numb	or and extension)	
		125.a. INAITIE ATIU TILIE DI AULTIC	onzed Gertilying Onicial	29.0.	elebilolle (Aleg cod	e, numbe	and extension)	
29. Certification: By submitti					29.c. Email address			
certify that it is true, complete,		Name		29.U. E	man addi 600			
the best of my knowledge.		Title		20 4 5	ata Cartified			
_				29.d. Date Certified				
					(IVIIVI/DL	(MM/DD/YYYY)		

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