QUARTERLY REPORT

APPLICANT NAME						DATE RE			
DECLARATION: FEMADR-KY					APPLICANT ID#				
LARGE PROJECT THRESHOLD FOR FEMADR-KY: \$64,200									
PW #	PW VERS	CAT.		\$ AMOUNT		% COMPLETED TO DATE		DATE COMPLETED	COMMENTS
NAME:			SIGNATU	IRE: _		DATE:			