

OHIO CLEAN DIESEL SCHOOL BUS FUND FISCAL AND ACTIVITY QUARTERLY PROGRESS REPORT



(Please note: If you complete the entire retrofit project within the first three months, instead of a Progress Report, you only need to submit a single Fiscal and Activity Closing Report.)

Grant Number (ex. B2014-F-xxx)	Grantee (name of school district or DD program)	Time period covered by report (ex. 1/1/14 – 3/31/14)

Section 1. School Bus Data. *Please enter information into the table below for each bus that was retrofitted with grant funds this quarter. This form may be requested in electronic format from the Ohio EPA Office of Environmental Education. Please add lines as needed. If no retrofits were completed this quarter, please move to Section 2.*

Bus ID#	Engine Manufacturer	Engine Model Year	Type and manufacturer of retrofit equipment installed	Date of Installation

Section 2: Activity Narrative

In the box below or on a separate sheet, please include a few paragraphs describing your progress on the retrofit project this quarter, including a brief discussion of:

- * Whether you ordered retrofit or related support equipment this quarter
- * the ease or difficulty of the retrofits by your district or a contracted vendor, and how your progress compares with your proposed timeline. If you are behind schedule, please explain why.
- * how you are addressing any problems that have come up

- * recognition you received for your retrofit project (Please include copies of news articles, awards, or photos about your retrofit efforts)
- * supporting activities such as your efforts to train employees and educate students, parents, and the local community about your retrofit project and anti-idling or other pollution reduction efforts. Please include a copy of any educational or publicity materials produced during the six month period.
- * modifications made to your project activities and budget

Please enter your narrative here, re-sizing the box to add additional space if needed.

Section 3: Retrofit and Support Equipment Expenditures Summary

Please fill in the table below, summarizing in separate lines each type of retrofit equipment purchased during the previous three months, as well as installation charges, taxes, and expenditures for related support equipment purchased with grant funds, such as pre-heaters or filter cleaners. Do not include fuel cost differentials. Add lines to the table as needed. Please include a Request for Payment Form and copies of invoices for any work completed this quarter that you have not already submitted for payment.

Name of Vendor	Product or Services Provided	Number Purchased	Unit Cost	Total Cost including any taxes paid
a.				
b.				
c.				
d.				
e. Total Expenditures for Retrofit and Support Equipment This Quarter, All Vendors Enter here and in Table 2, line c below.				

Section 4: Budget Summary

a. Total amount of grant award from Ohio EPA:	\$
b. Previous Balance: Amount available at the beginning of this quarter (after payments received for expenditures from previous quarters):	\$
c. Total grant-funded expenditures this quarter for retrofit and support equipment (from Table 1, line e above).	\$
d. Subtract line c from line b and enter the result here. This is your Remaining Balance, to be entered in line b of next quarter's report.	\$

I certify the reported Clean Diesel School Bus Fund grant expenditures are true and accurate. These expenditures have been incurred and complete documentation is on file.

Signature, Title, Date)

(Signature, Title, Date)

(Please have this certification statement signed by the Fiscal Agent and either the Project Director or the Authorizing Agent for the grant. We must have two signatures in order to accept the report.)