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| **S:\GOHS Logos & Forms\GOHS LOGOS\1 - GOHS Logo Assortment\GOHS Logos Ducey Gov\gohs_color_blultr_ducey.jpg** | **Arizona Governor’s Office of Highway Safety**  **Final Statement of Accomplishments Report**  **FOR GOHS USE ONLY**  **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ GOHS Grant Coordinator Initials: \_\_\_\_\_\_\_\_\_\_**    **(October 1, 2017- September 30, 2018)** |

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| **Agency Name:** | **GOHS Contract Number:** |
| **Project Title:** | |

The Project Director shall submit a Final Statement of Accomplishments Report to GOHS **no later than 15 days following the contract end date.**  All agencies receiving funding are required to submit this report in addition to their number of active contract quarters (maximum of four (4) quarterly reports). The report is a summary overview of the contracted project and is reviewed by GOHS Project Coordinators. Please answer the following questions:

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| --- |
| How effective was the funded project in reducing or eliminating the identified traffic safety problem described on the proposal? |
| Were the Project Measure Goals (see page #3) outlined in the contract achieved?  Yes  No  Provide a summary of accomplishments and/or challenges for each goal outlined. |
| Were the Project Measure Objectives (see page #3) outlined in the contract achieved?  Yes  No  Provide a summary of accomplishments and/or challenges for each one. |
| What percentage of the awarded funding was expended?       %  (If 100% of the funding was not expended, provide a detailed explanation). |

**Project Administrator**

Printed Name: Position:

Signature: Date:

Email Address: Phone:

**Project Director**

Printed Name: Position:

Signature: Date:

Email Address: Phone: