



## Mitigation Grant Program Quarterly Report

**Grant Recipient Organization Name** YOUNG HORIZONS

**Contract Number** HD-7790

**Grant Program**  Schools and Related Sites  Health Care and Senior Facilities  Greenhouse Gas Emissions Reduction

**Reporting Period** **Year:**  Jan.- March  April-June  July-Sept.  Oct.-Dec.  Final Report (attach final report summary)

Fund Expenditure	
<b>Total Grant Award</b>	\$ 9,281.00
<b>POLB Funds Expended This Reporting Period</b>	\$ 9,280.10
<b>POLB Funds Expended to Date</b>	\$ 9,280.10
<b>Anticipated POLB Expenditure Next Reporting Period</b>	0

Project Progress	
<b>Has the project been completed?</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>If not, when is the anticipated completion date?</b>	
<b>What project activities have occurred during the reporting period? Please be specific.</b>	Installed 3 HealthPro Systems Upgraded HVAC system with high-performance filters Purchased 28 NanoMax Filter No. 26 Purchased 12 PreMax Pre-Filter Purchased 6 HealthPro Series HyperHEPA filters Trained staff on use

<p><b>Will the project be completed according to the schedule specified in the contract?</b></p>	<p><input checked="" type="checkbox"/> Yes    <input type="checkbox"/> No</p>	
<p><b>If not, please describe the issues and how you propose to remedy them. Please be specific.</b></p>		
<p><b>What project activities are planned for the next reporting period?</b></p>	<p>Project complete</p>	
<p><b>Additional Comments</b></p>		
<p><i>Please attach documentation supporting your accomplishments this quarter. This documentation may include receipts, invoices, sign-in sheets, fliers, media coverage, educational materials, or presentations.</i></p>		
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