

City of Bellingham Human Service Program

**QUARTERLY OUTCOMES REPORT**

Submit form to Barbara Barr, City of Bellingham, 210 Lottie Street, Bellingham, WA 98225 . Ph 778-8313

Please enter data in shaded areas only when using electronic version of this form

AGENCY

PROGRAM

TODAY'S DATE

REPORT PERIOD

from

to

PREPARED BY

EMAIL

PHONE

FAX

PROGRAM OUTCOME (FROM CONTRACT)		JAN - MAR	APR - JUN	JUL - SEP	OCT - DEC	YTD
	A	Number of clients for whom you have complete outcome data.				
	B	Number that achieved the outcome.				
	C	Success rate percentage (B/A)				#VALUE!
Comments						

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