

**EXHIBIT E**  
**SOUTH CAROLINA EMERGENCY MANAGEMENT DIVISION**  
**OFFICE OF THE ADJUTANT GENERAL**  
**PRE-DISASTER MITIGATION GRANT PROGRAM**  
**PROGRAMMATIC QUARTERLY REPORT**

---

**Subrecipient:** AGENCY NAME    **Grant No:** PDMC-PL-04-20XX-0XX

**Quarter Ending:**

**Project Description:** PROJECT TITLE

---

Percentage of Work Completed:    0%.

Project Proceeding on Schedule:    () Yes () No

Describe milestones achieved during this quarter:

Provide a schedule for the remainder of work to project completion:

Describe problems or circumstances affecting completion date, milestones, scope of work, and cost:

\_\_\_\_\_

Cost Status:    [] Cost Unchanged    [] Under Budget    [] Over Budget

Additional Comments/Elaboration:

Signed: \_\_\_\_\_