Annex F: Statement of Work Accomplished (SWA)

PERFORMANCE CHALLENGE FUND
MONTHLY PROGRESS ACCOMPLISHMENT REPORT
For the month of_____

Project Title: _____
Prov/City/Mun.: _____
PCF Year: _____
PCF Amount: _____
Project Total Amount: _____
Contract Amount: _____
Date of Actual Start of Implementation: _____
Date of Completion: _____
Project Duration:_____
Variance: _____

Program of Works					Actual Implementation				
No.	Items of Work/Description	Quantity	Item Cost	(%) Weight	Previous Physical Accomplishment (%)	Physical Accomplishment for the month(%)	Total Physical Accomplishment to Date (%)	Paid Items(Php)	
								PCF	LGU Fund (If Any)
	TOTAL								

Prepared By:

_____
P/C/M Engineer

Date: _____

Approved:

_____
Governor/Mayor/Authorized Representative

Date: _____