**PEOPLE’S LAW ENFORCEMENT BOARD**

For the \_\_ Quarter, CY \_\_\_\_

Province :

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **MUNICIPALTY** | **NO. OF CASES HANDLED** | **NO. OF DECIDED CASES** | **NO. OF PENDING CASES** | **NO. OF CASES DECIDDED WITHIN THE PRESCRIBED PERIOD OF THE LAW (60 days)** | **WITH ORGANIZED PLEB (✔)** | **WITH EQUIPMENT/PHYSICAL OFFICE (✔)** | **ACTIVITIES** | **PHYSICAL REQUIREMENTS** | | **FINANCIAL REQUIREMENTS** | | **REMARKS** |
| **TARGET** | **ACTUAL** | **TARGET** | **ACTUAL** |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |

I HEREBY CERTIFY THAT I HAVE REVIEWED THE CONTENTS AND HEREBY ATTEST TO THE VERACITY OR CORRECTNESS OF THE DATA OR INFORMATION CONTAINED IN THIS REPORT.

**Prepared by:**

PLEB Provincial/City Focal Person Provincial Director Date