Exhibit B

**Interim Report**

Lucile Packard Foundation for Children’s Health

Interim Report Form  **Report Due:**

Please complete this report and submit it to the Grants Manager at [grants@lpfch.org](mailto:grants@lpfch.org). If you have any questions, please contact the Grants Manager at (650) 736-0675.

**I. Grant Information**

Organization:   
Project Name:

Grant Number:

Start Date:   
Grant Amount:

**II. Report Information**

**Title Page**

Please include the following information on the front page of your report: name of the project; the dates of the project period covered by this report; the number of this report (1 of 3, 2 of 3, etc.); and the names, addresses, phone numbers and email addresses of the Principal Investigator and Primary Contact (if different).

**Report Sections**

1. **Background (up to 1 page)** – Briefly restate the goals and objectives of your project and describe what your work is trying to achieve. If you feel your original goals and objectives need to be revised, note this here and then discuss the reasons for the proposed changes in Section III (Accomplishments and Challenges).
2. **Project Implementation and Administration (up to 1 page)** – Describe the administrative and day-to- day activities of the project during this reporting period. These could include: hiring of staff, identification of consultants, recruitment of patients or research subjects, inception of a proposed intervention, and establishment of data bases.
3. **Accomplishments and Challenges (1-2 pages)** – This is the most important section of the report and should account for a significant portion of the narrative. First, if your goals, objectives or deliverables need to change from what was originally proposed and approved, please begin by describing the proposed revisions and discussing the reasons for these changes. Pursuant to the Grant Terms & Conditions, no proposed revisions will be effective or valid unless and until approved by the Foundation.

Next, focus on the programmatic progress you are making. Please refer to your grant proposal and the Grant Deliverables Schedule which include the particular activities and deliverables expected from your project in this section. There may be additional items you will wish to describe as well.

While your accomplishments are important, it is equally important that you tell us about challenges you are facing and how you plan to address them. These may include: obstacles to implementation; changes to your protocol or plan; activities originally proposed that cannot be undertaken; and any internal and/or external problems.

1. **Plan for the Next Reporting Period (up to 1 page)** – Outline the major tasks that will be undertaken during the next phase of the project. If you wish, this section may be formatted as a timeline or workplan, but should contain sufficient detail to keep us apprised of your plans and progress.
2. **Analysis and Interpretation** **(up to 1 page)** – In this section, or if you prefer, integrated into the sections above, please reflect not only on the project’s results but also on the work itself – what does all of what you are doing mean? Certainly, the objective reporting of your project’s accomplishments is important, your interpretation of your experience and the insights gained are equally valuable and interesting as an outcome of the work you’ve performed.

**III. Attachments: Materials Produced**

Any documents to be shared with us can be added as attachments. Examples of items which should be included are:

* **All deliverables noted for this reporting period as specified in the Payment Schedule and Reporting Requirements.**
* Copies of reports from any consultants or advisors where applicable.
* Abstracts from presentations made to professional groups or associations.
* Copies of drafts of instruments, data dictionaries, educational materials, manuals or other project deliverables.
* Charts, tables, graphs, or other summaries of preliminary data.
* Bibliographies or reference lists.
* Other documents or materials as appropriate

**Report prepared by**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(Please print or type)** **(Name/Title)**

**Signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Phone**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Email**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_