

AJK POWER DEVELOPMENT ORGANIZATION
Monthly Progress Review

Implementation of Development Projects
 (To be furnished by 5th day of each month)

1 Report for the month of

2 Name of the Project:

3 Date of Approval/ Forum

| Original | Revised | Re-Revsied |
|----------|---------|------------|
| | | |

4 Date of Commencement

| Original | Revised | Re-Revsied |
|----------|---------|------------|
| | | |

5 Date of Completion

| Original | Revised | Re-Revsied |
|----------|---------|------------|
| | | |

6 Financial Status

i) ADP allocations for the current year

ii) Current quarter requirements as per APO

iii) Releases during current quarter

iv) Expenditure upto previous month

v) Expenditure during the month

7 Itemized Expenditure during the month under report

| S.No. | Items/ Activity | Allocation (2016-17) | Released Amount (M.Rs) | Expenditure up to Previous Month 3/2017 | Expenditure during the Month 4/2017 | Cumulative Expenditure (M.Rs) |
|-------|-----------------|-------------------------|------------------------------|--|--|-------------------------------------|
| | | | | | | |
| | | | | | | |
| | | | | | | |

8 Physical Status

Physical achievements during the month under report

| S.No. | Items/ Activity | Unit/ Quantity | Targets planned for completion CFY | Targets Achieved upto Previous Month | Targets Achieved During the Month | Comulative Targets Achieved Durig CFY |
|-------|-----------------|----------------|------------------------------------|--------------------------------------|-----------------------------------|---------------------------------------|
| | | | | | | |
| | | | | | | |
| | | | | | | |

9 Problems/Bottlemecks in Project Implementation

- | | |
|---|--|
| <input type="checkbox"/> Recruitment of Staff | <input type="checkbox"/> Delay in Release of Funds |
| <input type="checkbox"/> Delay in Consultants Appointments | <input type="checkbox"/> Law & Order Situation |
| <input type="checkbox"/> Lack of coordination between Fed./Prov. Govts. | <input type="checkbox"/> Management Capability |
| <input type="checkbox"/> Land Acquisition | <input type="checkbox"/> Delay in Procurement |
| <input type="checkbox"/> Turn over of PD/Staff | <input type="checkbox"/> Delay in Civil Works |
| <input type="checkbox"/> Delay in designing / Consultancy | <input type="checkbox"/> Other |

10 a) Name of Consultant

b) Name (s) of Contracting Firm

11 Officer(s) responsible for project implementation (Current and all previous since start of the project)

12 Mailing Address/ Contact Number (Res/ Mobile)

Signature: _____

Designation: _____

Date: _____