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| **New Hampshire Office of Highway Safety**  **Final Report**- October 1, 2018 – September 30, 2019  Overtime Enforcement Projects |

Enforcement Patrol Type (**Check one box only**)

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| * STEP | * Distracted Driving |
| * Operation Safe Commute * Join The NH Clique | * Pedestrian/ Bicycle |
| * DWI |  |
| * Sobriety Checkpoints / Saturation Patrols |  |

Agency Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Project Director \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Project Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| --- | --- |
| Date of First Patrol \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date of Last Patrol \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

List each project goal submitted in your grant application and provide information on the status of each goal through contract end date, September 30, 2019. **Include if you met the goal or did not meet the goal.**

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If you did not meet a goal, list the goal and provide an explanation including what you could do differently if you are receiving the same grant in fiscal year 20 (October 1, 2019 – September 30, 2020).

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Please provide a summary of activities/accomplishments/concerns you want us to know about for this grant year.

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