

**PMC FORM I-2  
PHYSICAL AND FINANCIAL ACCOMPLISHMENT REPORT  
FOR CAPITAL INVESTMENT PROGRAMS/PROJECTS**

As of \_\_\_\_\_  
**IMPLEMENTORS:** \_\_\_\_\_  
**REGION :** \_\_\_\_\_  
**PROVINCE:** \_\_\_\_\_

a) Name of Proect b) Date Started c) Target Completion Date	Location (City/ Muni- pality)	FINANCIAL STATUS (%)				PHYSICAL STATUS				EMPLOYME NT GENERATED To Date (Man-Days)	REMARKS  1) Prob- lems/Issues of imple- mentation 2) Recom- mendation
		a) Pro-gram b) AA Issued CY ___	a) Pro-gram b) AA Issued To Date	EXPENDITURE		Output Indicator	Target to Date	Actual This Month	Actual To Date		
				Unpaid Obligations To Date	Disbursement To Date						
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)

Prepared by: \_\_\_\_\_  
 Designation: \_\_\_\_\_  
 Date: \_\_\_\_\_

Noted: \_\_\_\_\_  
*Agency Head*