EXHIBIT 3

PERFORMANCE OUTCOME REPORT

Provider Name: **Northeast Florida Community Action Agency, Inc.** **Reporting Period: ___10/01/10-03/31/11**
_X__04/01/11-09/30/11

Program: Assets for Independence/Individual Development Accounts

Outcome # 1: By September 30, 2011, at least 3 low income households will be enrolled in the Individual Development Account (IDA) – Performance unit is a household.

Service Description: Proof of savings account being opened.

Required Documentation: New account forms and deposit slips

(Column 1) Projected # Served Annually	(Column 2) Actual # Served Year to Date	(Column 3) Total # Achieving Outcome Year to Date	(Column 4) % Clients Achieving Outcome (Column 2/Column 3)
3	3	3	100%

Outcome # 2: By September 30, 2011, 3 clients will make regular deposits into savings accounts toward their savings goal.

Service Description: Monitoring of bank statements.

Required Documentation: Deposit slips and bank statements.

(Column 1) Projected # Served Annually	(Column 2) Actual # Served Year to Date	(Column 3) Total # Achieving Outcome Year to Date	(Column 4) % Clients Achieving Outcome (Column 2/Column 3)
3	3	3	100%

Outcome # 3: By September 30, 2011, at least 3 client enrolled in the program will accumulate sufficient savings to purchase a home, business or post-secondary education.

Service Description: Monitoring of bank statements and deposit slips.

Required Documentation: Deposit slips and bank statements, home closing documents, business registration or school registration forms.

(Column 1) Projected # Served Annually	(Column 2) Actual # Served Year to Date	(Column 3) Total # Achieving Outcome Year to Date	(Column 4) % Clients Achieving Outcome (Column 2/Column 3)
3	3	2	67%

Outcome # 4: By September 30, 2011, 6 clients will increase their financial literacy skills.

Service Description: Attendance of Money Smart training.

Required Documentation: Completion certificates of Money Smart training or other training certificates.

(Column 1) Projected # Served Annually	(Column 2) Actual # Served Year to Date	(Column 3) Total # Achieving Outcome Year to Date	(Column 4) % Clients Achieving Outcome (Column 2/Column 3)
6	21	11	52%

Instructions: ***Outcome:*** What is the desired result of the program? ***Service Description***: How is the result being accomplished? ***Required Documentation***: What written documentation is being collected to support the results? ***Column 1* –** Total annual number of clients projected to be served in this program per proposal. ***Column 2* –** Actual number of clients served in program year to date. ***Column 3* –** Total number of clients served that met outcome**.** ***Column 4* –** Percent of clients served that met outcome (column 2 divided by column 3)