MONTHLY PROGRESS REPORT PAGE___ OF___

_____ COUNTY

_____(MONTH) _____ (YEAR)

	NUMBER OF PARCELS		
GEOGRAPHICAL AREA (CITY, SUBDIVISION, S-T-R, ETC.) OR FURTHER BREAKDOWN (AS NEEDED) *Note: Please provide as detailed a description as necessary, so that exact parcels for each completed area can be determined. Do not include work that has had data collection only or data collection/data review only. Do not include maintenance work or previously reported work.*	DATA COLLECTION/ REVIEW AND DATA ENTRY	VALUATION	OTHER TASKS COMPLETED

The reappraisal for this county is scheduled to be completed in_____ (year) _____ Date

Appraisal Firm (If Contracted) _____ Appraisal Manager_____

COMMENTS:_____

_____

_____

_____

PLEASE REMIT BY THE 20TH OF EACH MONTH

Form A-12 (Rev 12-8-03) 09/25/2008