

RFA HHS0017436 EXHIBIT J - ZOONOSIS QUARTERLY PERFORMANCE MEASURE REPORT  
Texas Department of State Health Services Animal Friendly Grant  
Contract Term: August 31, 2027 - August 30, 2028

1ST QUARTERLY PERFORMANCE MEASURE REPORT IS DUE TO DSHS BY

Contract / Attachment ID #: \_\_\_\_\_

Vendor Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_  
Street Address City State Zip

Vendor Phone #: \_\_\_\_\_

| 1st Quarter                                            |         |  |        |        |         |        |        |         |
|--------------------------------------------------------|---------|--|--------|--------|---------|--------|--------|---------|
|                                                        |         |  | Female | Male   | Total   |        |        |         |
| 1. Number of animals sterilized and returned to owner: |         |  | Canine | Canine | Canines | Female | Male   | Total   |
|                                                        |         |  |        |        |         | Feline | Feline | Felines |
| August 31-September:                                   | 2027    |  | 0      | 0      | 0       | 0      | 0      | 0       |
| October                                                | 2027    |  | 0      | 0      | 0       | 0      | 0      | 0       |
| November                                               | 2027    |  | 0      | 0      | 0       | 0      | 0      | 0       |
|                                                        | Totals: |  | 0      | 0      | 0       | 0      | 0      | 0       |
| 2. Average cost of each category:                      |         |  | \$0.00 | \$0.00 | \$0.00  | \$0.00 | \$0.00 | \$0.00  |
| Total Costs:                                           |         |  | \$0.00 | \$0.00 | \$0.00  | \$0.00 | \$0.00 | \$0.00  |

Written justification will be required on \_\_\_\_\_ if costs are greater than 5% of cost estimate submitted in proposal.

3. The total amount of DSHS grant funds spent on this project during this time period: \$0.00

4. Prepared by: \_\_\_\_\_ Date Prepared: \_\_\_\_\_

5. Names & Texas license numbers of all veterinarians performing sterilizations under this project

|                           |                           |
|---------------------------|---------------------------|
| Name & TX license # _____ | Name & TX license # _____ |
| Name & TX license # _____ | Name & TX license # _____ |
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Add additional sheets as needed.

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## 2ND QUARTERLY PERFORMANCE MEASURE REPORT IS DUE TO DSHS BY

Contract / Attachment ID #: \_\_\_\_\_

Vendor Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_  
 Street Address City State Zip

Vendor Phone #: \_\_\_\_\_

| 2nd Quarter                                            |      |               |             |               |  |               |             |               |
|--------------------------------------------------------|------|---------------|-------------|---------------|--|---------------|-------------|---------------|
| 1. Number of animals sterilized and returned to owner: |      | Female Canine | Male Canine | Total Canines |  | Female Feline | Male Feline | Total Felines |
| December                                               | 2027 | 0             | 0           | 0             |  | 0             | 0           | 0             |
| January                                                | 2028 | 0             | 0           | 0             |  | 0             | 0           | 0             |
| February                                               | 2028 | 0             | 0           | 0             |  | 0             | 0           | 0             |
| Totals:                                                |      | 0             | 0           | 0             |  | 0             | 0           | 0             |
| 2. Average cost of each category:                      |      | \$0.00        | \$0.00      | \$0.00        |  | \$0.00        | \$0.00      | \$0.00        |
| Total Costs:                                           |      | \$0.00        | \$0.00      | \$0.00        |  | \$0.00        | \$0.00      | \$0.00        |

Written justification will be required on all projects greater than 5% of cost estimate submitted in proposal

3. The total amount of DSHS grant funds spent on this project during this time period: \$0.00

4. Prepared by: \_\_\_\_\_ Date Prepared: \_\_\_\_\_

5. Names & Texas license numbers of all veterinarians performing sterilizations under this project

Name & TX license # \_\_\_\_\_ Name & TX license # \_\_\_\_\_

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## 3RD QUARTERLY PERFORMANCE MEASURE REPORT IS DUE TO DSHS BY

Contract / Attachment ID #: \_\_\_\_\_

Vendor Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_  
 Street Address City State Zip

Vendor Phone #: \_\_\_\_\_

| 3rd Quarter                                            |         |  |               |             |               |               |             |               |
|--------------------------------------------------------|---------|--|---------------|-------------|---------------|---------------|-------------|---------------|
| 1. Number of animals sterilized and returned to owner: |         |  | Female Canine | Male Canine | Total Canines | Female Feline | Male Feline | Total Felines |
| March                                                  | 2028    |  | 0             | 0           | 0             | 0             | 0           | 0             |
| April                                                  | 2028    |  | 0             | 0           | 0             | 0             | 0           | 0             |
| May                                                    | 2028    |  | 0             | 0           | 0             | 0             | 0           | 0             |
|                                                        | Totals: |  | 0             | 0           | 0             | 0             | 0           | 0             |
| 2. Average cost of each category:                      |         |  | \$0.00        | \$0.00      | \$0.00        | \$0.00        | \$0.00      | \$0.00        |
| Total Costs:                                           |         |  | \$0.00        | \$0.00      | \$0.00        | \$0.00        | \$0.00      | \$0.00        |

Written justification will be required on all projects greater than 15% of cost estimate submitted in proposal

3. The total amount of DSHS grant funds spent on this project during this time period: \$0.00

4. Prepared by: \_\_\_\_\_ Date Prepared: \_\_\_\_\_

5. Names & Texas license numbers of all veterinarians performing sterilizations under this project

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| 3rd Quarter                                            |                |               |             |               |  |               |             |               |
|--------------------------------------------------------|----------------|---------------|-------------|---------------|--|---------------|-------------|---------------|
| 1. Number of animals sterilized and returned to owner: |                | Female Canine | Male Canine | Total Canines |  | Female Feline | Male Feline | Total Felines |
| June                                                   | 2028           | 0             | 0           | 0             |  | 0             | 0           | 0             |
| July                                                   | 2028           | 0             | 0           | 0             |  | 0             | 0           | 0             |
| August                                                 | 2028           | 0             | 0           | 0             |  | 0             | 0           | 0             |
|                                                        | <b>Totals:</b> | 0             | 0           | 0             |  | 0             | 0           | 0             |
| 2. Average cost of each category:                      |                | \$0.00        | \$0.00      | \$0.00        |  | \$0.00        | \$0.00      | \$0.00        |
| <b>Total Costs:</b>                                    |                | \$0.00        | \$0.00      | \$0.00        |  | \$0.00        | \$0.00      | \$0.00        |

Written justification will be required on all projects greater than 15% of cost estimate submitted in proposal

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