**Please complete reports based on the work completed in each quarter. Work plans should be submitted to** [**MDHHS-CLPPP@michigan.gov**](mailto:MDHHS-CLPPP@michigan.gov)**. Quarter 1 report due January 30th, Quarter 2 Report due April 30th, Quarter 3 Report due July 30th, Quarter 4 report due October 30th.**

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| Quarter # Report FY 2020 | | | |
| Goal: Increase testing for children under the age of 6, specifically capillary to venous testing rates. | | | |
| **Completed Activities**  Describe activities that took place in the quarter to meet the goal | **Target Audience/Location** | **Narrative Report/Notes** | **Completed by:**  Indicate month/year completed, and stakeholder/responsible party |
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