

# Condom Distribution Data Collection Tool

Template

* These are the data variables you are required to report in your semi-annual Progress Report for HIV Testing and Syringe Services.
* If doing HIV Testing and Syringe Services, you will need to report your condom distribution separately for each program.
* You are not required to use or submit this tool. You may develop your own data collection tool.

## Condom Distribution

**Program Name:**

### Number of Condoms Distributed to:

|  |  |  |  |
| --- | --- | --- | --- |
| **Month** | **HIV+ Individuals** | **High Risk Negatives/****Status Unknown** | **Total** |
| January |  |  |  |
| February |  |  |  |
| March |  |  |  |
| April |  |  |  |
| May |  |  |  |
| June |  |  |  |
| **Total** |  |  |  |
|  |  |  |  |
| July |  |  |  |
| August |  |  |  |
| September |  |  |  |
| October |  |  |  |
| November |  |  |  |
| December |  |  |  |
| **Total** |  |  |  |
|  |  |  |  |
| **Annual Total** |  |  |  |