



Board of County Commissioners Agenda Request



Requested Meeting Date: August 25, 2020

Title of Item: CARES Act - Reporting Update

<input checked="" type="checkbox"/> REGULAR AGENDA	Action Requested:	<input type="checkbox"/> Direction Requested	
<input type="checkbox"/> CONSENT AGENDA		<input type="checkbox"/> Approve/Deny Motion	<input checked="" type="checkbox"/> Discussion Item
<input type="checkbox"/> INFORMATION ONLY		<input type="checkbox"/> Adopt Resolution (attach draft)	<input type="checkbox"/> Hold Public Hearing* <i>*provide copy of hearing notice that was published</i>

Submitted by: Kathleen Ryan, CFO	Department: Auditor
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Presenter (Name and Title): Kathleen Ryan, CFO	Estimated Time Needed: 10 Minutes
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Summary of Issue:

Attached is the 1st report which was submitted to the State August 11, 2020. This report covers the period from March through July 31, 2020. Expenses were categorized based on state guidance.

Alternatives, Options, Effects on Others/Comments:

Recommended Action/Motion:

Financial Impact:

Is there a cost associated with this request? Yes No

What is the total cost, with tax and shipping? \$

Is this budgeted? Yes No *Please Explain:*



Please submit your completed form each month to
CRAOffice.mmb@state.mn.us.

Local Government Expenditure Report		
Name of Local Government (this will auto populate based on your SWIFT Supplier ID)	SWIFT Supplier ID #	Date Submitted
AITKIN COUNTY	0000197275	
Name and Title of Person Filling Out Form	DUNS/SAMS Number	Phone Number (enter 10 digits without spaces or dashes)
Kathleen Ryan	047464805	218-927-7265
Email Address	Amount of CRF Received from the Department of Revenue	Total Spent to Date (this amount will autofill)
Kathleen Ryan	\$ 2,007,508.00	\$ 485,874.90
Select "Interim" if your agency has any unspent funds and "Final" in the box to the right if all available CRF funds have been spent and this will be your final report.	Interim	
Please submit this report no later than 7 business days after the end of each month to provide the spend status of allotted Coronavirus Relief Funds (CRF), CFDA Number 21.019 awarded by the State of Minnesota.	Amount of CRF Remaining (this amount will autofill)	
	\$ 1,521,633.10	

As of July 31, 2020 the covered period for these expenses is March 1, 2020 through November 15 (cities and towns) /December 1, 2020 (counties). The covered period may change based on federal guidance and you will be notified if any changes occur.

DO NOT USE CRF FUNDS FOR ANY COST INCURRED OUTSIDE THIS COVERED PERIOD.

Coronavirus Relief Fund (CRF) Categories		Total	July, 2020	August, 2020	September, 2020	October, 2020	November, 2020	December, 2020
Describe expenses as specified in federal guidance (Links in green font in the two cells to the right) in the space below.		Treasury Guidance	FAQs					
Medical Expenses (expended)		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical Expenses obligated but not yet paid			\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Public Health Expenses (expended)	PPE Supplies	\$ 16,681.42	\$ 16,681.42	\$ -	\$ -	\$ -	\$ -	\$ -

Public Health Expenses obligated but not yet paid		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
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Payroll Expenses (expended)	Payroll and benefit costs associated with public employees who could have been furloughed or otherwise laid off but who were instead repurposed to perform previously unbudgeted functions substantially dedicated to mitigating or responding to the COVID-19 public health emergency are also covered and HHS Public Health Staff - substantially dedicated time spent on COVID Response	\$ 454,056.77	\$ 454,056.77	\$ -	\$ -	\$ -	\$ -	\$ -
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Payroll Expenses obligated but not yet paid		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
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Compliance with Public Health Measures (expended)	Improve telework capabilities for public employees	\$ 14,845.40	\$ 14,845.40	\$ -	\$ -	\$ -	\$ -	\$ -
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Compliance with Public Health Measures Obligated but not yet paid		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
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Economic Support Spent		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
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Economic Support obligated but not yet paid		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
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Other (expended)	Other COVID-19 related expenses reasonably necessary	\$ 291.31	\$ 291.31	\$ -	\$ -	\$ -	\$ -	\$ -
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Other obligated but not yet paid		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
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Total (Expended)		\$ 485,874.90	\$ 485,874.90	\$ -	\$ -	\$ -	\$ -	\$ -
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Total obligated but not yet Paid		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
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Cities and Towns	
Enter the Amount of unspent funds distributed to home county	\$ -
Enter the name of the home county	
Enter the date funds were returned	

Cities and Towns in Hendrix and Ramsey Counties	
Enter the amount of unspent funds granted to hospitals	\$ -
Enter the name(s) of hospitals receiving grants of unspent funds	

Counties	
Enter the amount of unspent funds received from cities and towns	\$ -
Enter the amount of unspent funds returned to the State of Minnesota	\$ -
Enter the date unspent funds were returned to the State of Minnesota	

	Total	July, 2020	August, 2020	September, 2020	October, 2020	November, 2020	December, 2020
Enter the amount distributed to cities and towns with a population under 200	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

CRF Fund Spending Confirmations

Use the dropdown menu to place an "X" in the cell B62 to confirm that your CRF funding request meets federal guidance:

- (1) as a necessary expenditure to respond to the COVID-19 public health emergency,
- (2) is not accounted for in the current budget,
- (3) expenses were incurred during the covered period. See box C18 for explanation, and
- (4) does not include any ineligible expenses as defined in federal guidance.

X