GRANT CLOSE-OUT TRANSMITTAL FORM

Grantee's Nam	e and Address:	Grant Agreement No.:	21-PF-002				
	sas City, Kansas		1.1.0001				
118 W. Centr		Commencement Date:	March 1, 2021				
Arkansas City	/, KS 67005	Completion Date:	March 7, 2023				
including the Pe	this form and items 1 through 6 for all gra rformance Hearing Affidavit to conclude the 9 through 11 in addition. If this is a housing	nis grant project. If this is a busin	nts containing construction), less finance or infrastructure				
1.	Grantee's Release Form *						
2.	Final Independent Auditor's Report						
3.	Final Quarterly Progress Report (Section	2)					
4.	Certificate of Completion (2 originals) *						
5.	Property Management Report n/a						
6.	Explanation of Refund Check (if applicab	le) n/a					
 Notice of Completion/Final Inspection – Final Wage Compliance Report * 							
8.	Performance Hearing Affidavit						
9.	Economic Development Report, and 1		,				
	Copy of Final Payroll and Employee Certification	ification Report (from final moni	toring) n/\sim				
10.	Legal Review and Closeout Report (Econ	nomic Development) Ma					
11.	Program Income Assignment Agreement	(Economic Development) n/c					
12.	Housing Rehabilitation and demo data	ya.					
13.	Section 3 Tables A - D						
No costs have be have been follow	een incurred after the Completion Date of wed, thereby finalizing the above referenced	the above contract. All necessary contract.	y documents and procedures				
Rose Mary Sa							
Preparer's Nan		2.400					
CDBG Admi	nistrator 316-264- Telephone						
	Тетерной	Number					
3-7-2023 Date							
attribution (
Rev. 2/2018							

GRANTEE'S RELEASE FORM

1	Pursuant to the terms on Grant Agreement Number 21-PF_002 and in consideration of				
2	the sum of <u>Three Hundred Ninety-Four Thousand Five Hundred Fifty & 00/100</u> (\$394,550.00) which has been				
3	or is to be paid under the said contract to City of Arkansas City, Kansas,				
4	grantee upon payment of the said sum by the State of Kansas, Department of Commerce, hereinafter				
5	called the grantor, does remise, release, and discharge the grantor, its officers, agents and employees				
6	of and from all liabilities, obligations, claims, and demands whatsoever under or arising from the				
7	said contract.				
8	IN WITNESS WHEREOF, this release has been executed this 7th day of				
9	March, 2023.				
10	Signature of Authorized Elected Official:				
11	Typed Name and Title: Diana Spielman, Mayor				
	ATTEST AND SEAL				
12					
13					
(D	2 2010)				
(Kev	7. 2-2018)				

FINAL INDEPENDENT AUDITOR'S REPORT

If the grantee expends \$750,000 or more from all Federal sources in any fiscal year in which the grant is open, a 2 CFR Part 200 audit is required from the grantee. If you expend or expect to expend this amount in the current fiscal year, please indicate below. If required, a copy of the entire audit report must be submitted to Commerce in the required time period.

A.	2 CFR Part 200 audit is not required.
B.	Audit is complete and one copy is enclosed.
C.	Audit is in progress or not yet begun. Auditor's Name:
	Address:
	Telephone:
	Contact person with firm: Date audit to begin:
	How the audit will be paid for:
	Date audit to be completed:

QUARTERLY PROGRESS REPORT - PAGE 1 KANSAS DEPARTMENT OF COMMERCE SMALL CITIES COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

Grantee: City of Arkansas	s City, Kansas					Report #	8-Final			
Grant #: 21-PF-002	Quarter I	Ending: 0	3-31-202	23						
Address: 118 W. Central,	Contract	Award End	d Date:	02-28-2	:023					
Company Name (ED Projects): n/a							pared: 03	3-07-2023	3	
Current Chief Elected Officia	al: Diana Spiel	lman, I	Mayor							
Name and telephone number who prepare d this report:	3	16-264-340	00							
	T	elephone N	Number							
Financial Status:										
	Total Grant:	\$455,	00.00			Total Loc	cal Injection	n \$45,	000.00	
Drawdowns received to date: \$394,550.00							Local spent to date \$393,117.10			
Drawdowns requested and n	not yet received:	\$0.00				Initial Monitoring Conducted				
Total	Grant available	\$60,4	50.00			Final Mo	nitoring Co	onducted	\boxtimes	
Contracts Awarded This	Ouarter With All 1	Monie	s: *			- Residence S				
	Total			Act	ivity			tor Data		
Name & Address,	Contract					Type of	Section	**	**	Davis-
DUNS#	Amount L	ocal	CDBG	No.	Title	Procurement	3	MBE	WBE	Bacon
None										

Describe project accomplishments this quarter:

Held monitoring visit on 2/23 with CDBG personnel. No deficiencies found. Prepared and sent Project Performance Hearing notice to newspaper for publication on 2/28/2023. Held project performance hearing on 3/7/2023 and commission passed motion for Mayor to execute close out documents and submit to CDBG.

Planned activities next quarter:

n/a

Technical assistance needs:

n/a

^{*} Attach additional pages if needed.

^{**} Categories are: 1-White, 2-Black/African American, 3-Asian, 4-American Indian/Alaskan Native, 5-Native Hawaiian/Other Pacific Islander, 6-American Indian/Alaskan Native & White, 7-Asian & White, 8-Black/African American & White, 9-American Indian/Alaskan Native & Black/African American, 10-Other Multi Racial, 11-Hispanic, 12-Non-Hispanic

QUARTERLY PROGRESS REPORT - PAGE 2

You must complete this page if you have a:

- 1. Community Improvement, Urgent Need or KAN STEP grant and this is your first or final report
- 2. Economic Development grant
- 3. Attach housing log for housing projects

Complete for all circumstances listed above:

		Number of Beneficiaries	Number of LMI Beneficiaries
1.	Target	11,625	5,630
2.	Total to Date	11,625	5,630

*		White	BAA	BAA/W	AI/AN	NH/PI	Α	A/W	AI/AN/BAA	AI/AN/W	Other
1.	Total Beneficiaries	10,089	433	152	276	0	62	33	0	294	276
2.	Hispanic Beneficiaries	1.953	8	0	37	0	0	0	0	74	276

^{*}BAA-Black African American; BAA/W-Black African American & White; AI/AN-American Indian or Alaskan Native; NH/PI-Native Hawaiian or Pacific Islander; A-Asian; A/W-Asian & White; AI/AN/BAA-American Indian or Alaskan Native & Black African American; AI/AN/W-American Indian or Alaskan Native & White

Total Number of Households Benefiting to Date

5,600

Total Number of Female Heads of Households Benefiting

3,229

Total Number of Disabled Persons Benefiting

2,209

NOTE: Beneficiaries are to be reported cumulatively as they occur

Economic Development Grants only:

Proposed (FTE - Jobs Count)

		VIKI	QIKZ	CHI	QIK4	QIKS	QIKO	QIK /	QIK8
1.	Total Jobs Retained				Į.				
2.	Total LMI Jobs Retained								
3.	Total Jobs Created								
4.	Total LMI Jobs Created				T				

5. Total Jobs to be generated

Accomplishments

6.

9.

a.	Planned this Quarter	b. Completed this Quarter	c. Completed to Date
	711 - 17 - 1111 - 1111 - 1111 - 1111		

Number of Jobs Retained 7. Number of LMI Jobs Retained

8. Number of Jobs Created

10. Explain any variances from planned number of jobs:

Number of LMI Jobs Created

CERTIFICATE OF COMPLETION

A. Name of Grant Recipient	B. Grant Agreement Number
City of Arkansas City, Kansas	21-PF-002

C. Final Statement of Cost

	То Ве	To Be Completed By CDBG		
Program Activity Categories	Paid Costs (a)	Local Unpaid Costs (b)	Total Costs (c)	Approved Total Costs
1. Street Construction	618,899.10	0.00	618,899.10	
2. Engineering	60,770.00	0.00	60,770.00	
3. Inspection	77,998.00	0.00	77,998.00	
4. Administration	20,000.00	0.00	20,000.00	
5.				
6.				
7.				
8.				
9. Total Program Costs	777,667.10	0.00	777,667.10	-
10. Less Other Funds Applied	383,117.10	`0.00	383,117.10	
11. CDBG Grant Amount Applied	394.550.00	0.00	394,550.00	

D. Computation of Grant Balance

	To Be Completed By The Recipient	To Be Completed By CDBG
12. Total Amount Applied (Line 11a)	394,550.00	
13. Estimated for Unsettled Third-Party Claims	0.00	
14. Subtotal (Line 11c)	394,550.00	
15. Grant Amount Per Agreement (from contract)	455,000.00	
16. Unutilized Grant to be Canceled (Line 15 less Line 14)	60,450.00	
17. Grant Funds Received	394,550.00	
18. Balance of Grant Payable (Refundable) (Line 14 less Line 17)*	0.00	

^{*} If Line 17 exceeds Line 14, enter excess as a negative amount. This amount shall be repaid to the Department by check.

CERTIFICATE OF COMPLETION - PAGE 2 E. Unpaid Costs and Unsettled Third-Party Claims (Local Only) List amounts and describe circumstances n/a Check if continued on additional sheet and attach F. Remarks n/a Check if continued on additional sheet and attach G. Certification of Recipient It is hereby certified that all activities undertaken by the recipient with funds provided under the Grant Agreement identified as Item B above have, to the best of my knowledge, been carried out in accordance with the Grant Agreement; that proper provision had been made by the recipient for payment of all unpaid costs and unsettled thirdparty claims identified in Item E above; that the Department, the State of Kansas, and the United States of America are under no obligation to make any further payment to the recipient under the Grant Agreement in excess of the amount identified on Line 18 above; and that every statement and amount set forth in this instrument is, to the best of my knowledge, true and correct as of this date. Diana Spielman, Mayor Signature of Chief Elected Official Typed Name and Title Date H. Department Approval

Date

agreement and related funds reservation and obligations

This Certificate of Completion is hereby approved. Therefore, I authorize cancellation of the unutilized contract

Signature for CDBG Program

(line 16 above).

Typed Name

CERTIFICATE OF COMPLETION

A. Name of Grant Recipient City of Arkansas City, Kansas	B. Grant Agreement Number 21-PF-002
----------------------------------------------------------	----------------------------------------

C. Final Statement of Cost

To Be Completed By The Recipient			To Be Completed By CDBG
Paid Costs (a)	Local Unpaid Costs (b)	Total Costs (c)	Approved Total Costs
618,899.10	0.00	618,899.10	
60,770.00	0.00	60,770.00	
77,998.00	0.00	77,998.00	
20,000.00	0.00	20,000.00	
777,667.10	0.00	777,667.10	
383,117.10	`0.00	383,117.10	
394.550.00	0.00	394,550.00	
	Paid Costs (a) 618,899.10 60,770.00 77,998.00 20,000.00 777,667.10 383,117.10	Paid Costs (a) Local Unpaid Costs (b) 618,899.10 60,770.00 77,998.00 20,000.00 777,667.10 383,117.10 10.00 Local Unpaid Costs (b) 0.00 77,998.00 0.00 770,000 0.00	Paid Costs (a) Local Unpaid Costs (b) Total Costs (c) 618,899.10 0.00 618,899.10 60,770.00 0.00 60,770.00 77,998.00 0.00 77,998.00 20,000.00 0.00 20,000.00 777,667.10 0.00 777,667.10 383,117.10 0.00 383,117.10

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		Diana Spielman, Mayor	
Date	Signature of Chief Elected Official	Typed Name and Title	
H. Department	Approval		
This Certificate of agreement and relat	Completion is hereby approved. Therefore, I authed funds reservation and obligations	norize cancellation of the unutilized contract (line 16 above).	
Date	Signature for CDBG Program	Typed Name	

NOTICE OF COMPLETION/FINAL INSPECTION AND FINAL WAGE COMPLIANCE REPORT FORMAT

To:	-	artment of Commerce	Date:	February 28, 20223	
	CDBG Prog	ram		City of Arkansas City,	
	1000 S.W. Jackson St., Suite 100	Grante			
		66612-1354			
	1		Grant 1	Number: 21-PF-002	
1.	Date of Const	ruction Completion: Septe	mber 9, 2022	_	
2.	Date of Final	Inspection: September 14, 2	2022		
		FINAL WAGE COM		PORT FORMAT	
mech	nanics paid les	representative were review s than the minimum wage sion that applied to this proj	e rate plus fringe b	's weekly payrolls, were any labor benefits as specified in the Secret	rers o
	\boxtimes NO	☐ YES			
If yes	s, provide the f	following information:			
		l amount of restitution paired to be paid): \$	id (difference between	veen what was first paid and who	at wa
	b. Meth	nod of restitution:			
	Пр	aid by contractor(s)			
	□р	aid by city with funds with	neld from payment to	to contractor(s).	
Nar	ne of Contracto	or Name of Affected	Amount of Rest	stitution Nature of Violation	
	Subcontractor	Employees	Paid to Employ	yee Leading to Restitution	
		G' COL CEL .		ana Spielman, Mayor	
	Date	Signature of Chief Electer	ed Official	Typed Name and Title	
Com	munity Developme	ent Block Grant	257	Grantee Handbook	i leg
Comi	munity Developme	ent Block Grant	257	Grantee Handbook	

Column AFFIDAVIT OF PUBLICATION

Cowley Courier Traveler 200 East Fifth Avenue (620) 442-4200

I, David Alien Seaton, of lawful age, being duly sworn upon oath, deposes and says that I am the Publisher of Cowley Courier Traveler, a publication that is a "legal newspaper" as that phrase is defined for the city of Arkansas City and City of Winfield, for the County of Cowley County, in the state of Kansas, that this affidavit is Page 1 of 1 with the full text of the sworn-to notice set forth on the pages that follow, and that the attachment hereto contains the correct copy of what was published in said legal newspaper in consecutive issues on the following dates:

PUBLICATION DATES:

28 Feb 2023

Notice ID: CrYGhXEGOwuHuMBp8wQc

Notice Name: Arkansas City Project Performance Hearing

PUBLICATION FEE: 459.20

Dishlicher

VERIFICATION

STATE OF KANSAS COUNTY OF COWLEY COUNTY

Signed or attested before me on this

28th day of Jubruary, A.D. 20 23.

Notary Public

KATHRYN M. HARBERT
Notary Public - State of Kansas
My Appt. Expires 116 2635

(First published in the Cowley ComierThavoler Tuesday, 02-20

> PROJECT PERFORMANCE FUELD: HEARING NOTICE

The City of Arkmassi City, Rause with hostin public hearing on Tuesday, Manch 7, 2023, at 550 pm at the Copensistion Meeting Room 118 W. Coural, Arkmass Cit, Kissuss for the purpose of portlain git the performance of Special Coural No. 23-PF-0/22 for the purpose of Special improvements consisting of milling and creating of summit Street from Manches Coural No. Streets Assessed to Buffer Lane.

The proposed project will counts in the failure high water jimens: 1.1.S taschillarian, 1.1.S reffice cortico, 1.7.500 SY 1.7.500 SY 1.7.500 SY 1.7.500 SY 1.7.500 SY 2.7 suchait over 1.7.1.500 SY 2.7 suchait over 1.7.1.500 SY 2.8 such 1.7.500 SY

The final completed project concisted of the following stems: 1 as inaffic control 17-978 SY milling, 1 1.5 inaffic control 17-978 SY milling, 17-978 SY exhibits convenient covering, 921 SY tense report, 5,016 SF sidewalk, 37. LF concrete curl & guiter, 57-8 SY arrivated concrete inlequention 3,323 LF paramete marking (Thermoplastic-white)-(7) 1.194 LF paramet marking (Themoplastic-white)-(7) 22. LF parameter marking (Themoplastic-white)-(7) 22. LF parameter marking (Themoplastic-white)-(7) 23. LF parameter marking-white)-(127), 1243 LF parameter marking-white)-(127), 309 LF parameter marking-white)-(127), 34 2A parameter marking-white)-(127), 34 3A parameter marking-wh

The estimated final project cost is \$777,667.00, with the ginal required for \$394,550,00 of the project costs. Other project proposals introduced at the heurissy will be considered. Oral and written comments will be recorded and become a part of Arkeurass City's critizen positionation.

Reasonable accommodations will be mide available to persons with disabilities. Requests should be subnified to Rundy Fizzon, Cly Mineson by Much 3, 2023.