



**City of Pahokee American Recovery Plan Act (ARPA)
Not-For-Profit Subrecipient Grant Application**

SUBMISSION DEADLINE
April 5, 2023, no later than 3:00PM
(IN-PERSON ONLY)
TO

City of Pahokee
207 Begonia Drive
Pahokee, FL 33476

(No applications will be accepted after 3:00PM on April 5, 2023)



**FOR MORE INFORMATION OR
QUESTIONS,
PLEASE CONTACT:**

CITY OF PAHOKEE

Community Economic Development Department
207 Begonia Dr.
Pahokee, FL 33476
arpa@cityofpahokee.com
(561)924-5534

OVERVIEW

On March 11, 2021, the American Rescue Plan Act was signed into law, and established the Coronavirus State Fiscal Recovery Funds and Coronavirus Local Fiscal Recovery Funds, which together make up the Coronavirus State and Local Fiscal Recovery Funds (“SLFRF”) program. This program is intended to provide support to State, territorial, local, and Tribal governments in responding to the economic and public health impacts of COVID-19 and in their efforts to contain impacts on their communities, residents, and businesses.

The US Treasury Department established four (4) funding objectives to respond to the COVID-19 public health emergency:

- Support urgent COVID-19 response efforts to continue to decrease spread of the virus and bring the pandemic under control.
- Replace lost revenue for eligible state, local, territorial, and Tribal governments to strengthen support for vital public services and help retain jobs.
- Support immediate economic stabilization for households and businesses.
- Address systemic public health and economic challenges that have contributed to the unequal impact of the pandemic.

On May 17, 2021, the Secretary of the US Treasury Department issued an Interim Final Rule as the rules and regulations for implementing the Fiscal Recovery Funds. SLFRF funds can be used for:

- Support public health expenditures in response to COVID-19.
- Address negative economic impacts caused by the public health emergency and provide aid to those communities and populations hardest hit by the crisis.
- Replace lost public sector revenue.
- Provide premium pay for essential workers.
- Invest in water, sewer, and broadband infrastructure.

The City of Pahokee (the “City”) embraced the importance of public input, transparency, and accountability for the implementation of the Fiscal Recovery Funds. In alignment with the City’s strategic plan, the City is inviting community partners to request ARPA funding for programs, projects, and interventions that will address community challenges in one or more of the following Community Assessment Priorities:



Economic Stability and Resilience

In response to the economic challenges for City residents and businesses magnified by the COVID-19 public health emergency, the City is seeking proposals that will identify and address current vulnerabilities, support short and long-term recovery efforts, and mitigate the effects of future economic disruptions. Proposed projects should demonstrate how they will reduce economic disparities and provide pathways to prosperity to economically disadvantaged populations, small and minority businesses. Some examples of initiatives include small business grants and loans, supporting businesses that did not qualify for federal programs, technical assistance support, job training assistance, direct payments to households, food assistance to low-to-moderate income households, etc.

Housing Affordability and Homeownership

Homeownership is the primary means to wealth building and financial stability for low- and moderate-income families. Pahokee aims to be a city where working families across the wage-spectrum can live and thrive. Significant disparities in homeownership and cost-burden exist for many Pahokee residents. In the current housing market and with pressures from families relocating from elsewhere, homeownership may become unattainable for many working families. Proposed projects should demonstrate impact on ameliorating the affordability challenges for current residents by providing pathways to homeownership, or homeowner and renter stability. Some examples of initiatives include rental and mortgage assistance, affordable housing development, utility assistance, housing counseling, home rehabilitation, homelessness services etc.

Educational Opportunities and Job Skills Development

Education contributes to community stability by promoting equity, providing for a sense of self dependence and confidence and creating opportunities for economic mobility. Economic opportunity and mobility are directly connected with educational attainment, as differences in educational attainment contribute to and perpetuate economic disparities. Projects should address barriers to educational equity and ensure pathways to prosperity for diverse populations. Some examples of initiatives include expanding broadband access, internship and mentorship programs, literacy programs, Art/Enrichment programs, entrepreneurship training, workforce development programs, short-term credentialing, and job placement etc.

Healthcare Access and Health Outcomes

The COVID-19 public health emergency exacerbated health disparities in Pahokee as it further illuminated the effect that nonmedical social needs, or social determinants of health (SDOH), have on individual health outcomes. Some factors that strongly influence health outcomes include access to medical care, nutritious foods, clean water, education and health literacy, housing and transportation, exposure to violence, neighborhood safety and recreational facilities, occupation and job security, and socioeconomic status. The city is seeking projects that improve health outcomes either short-term or lead to behavioral change that will reduce health disparities in the long-term. Some examples of initiatives include mental health services, health risk awareness initiatives, vaccine outreach, supporting physical education programs at schools, expanding healthcare access, childcare, home visiting programs, substance and domestic abuse prevention and assistance, support for community health worker programs etc.

Criminal Justice and Safety

Safe neighborhoods signify stronger and happier communities. Pahokee aims to create neighborhoods in which parents are free to raise their children without having to worry about crime, businesses can thrive and expand, and residents are comfortable to connect with each other - all extremely important to building a strong sense of community.



Proposed programs should focus on community-based approaches for violence reduction. Some examples of initiatives include Community Violence Intervention (CVI) programs, enhanced services for foster youths, at-risk youth engagement and intervention programs, crime diversion and reintegration programs etc.

REPAYMENT

Funding from this grant program is subject to federal, state and local audit. If a determination is made that these grant funds were used in a manner inconsistent with program guidelines, for an ineligible expense or for expenses reimbursed by another federal, state or local grant/loan program then the awarded entity will reimburse the City of Pahokee these funds.

SUBMISSION OF AN APPLICATION IS NOT A GUARANTEE OF FUNDING

It is the responsibility of the applicant to READ AND UNDERSTAND all aspects of the Grant Program Application and Guidelines.

NOTICE TO THIRD PARTIES: The grant application program does not create any rights for any parties, including parties that performed work on the project. Nor shall issuance of a grant result in any obligation on the part of the City of Pahokee to any third party. The City is not required to verify that entities that have contracted with the applicant have been paid in full, or that such entities have paid any subcontractors in full. Applicant's warranty that all bills related to the Project for which the applicant is directly responsible is sufficient assurance for the City to award loan funding.



Agency Name: _____

Project(s): _____

APPLICATION

_____	Submit In-Person Only
_____	Application is signed and dated. By Director, and Board Chairperson.
_____	501(c) (3) is attached (if applicable), or EIN/Tax ID attached (if applicable).
_____	City of Pahokee Business Tax Receipt attached (if applicable).
_____	Board Member list.
_____	Copy of latest audit.
_____	All funding sources for this project identified.

ADDITIONAL ATTACHMENTS

_____ Attachment 1	Agency Articles of Incorporation, Agency By-laws, and Tax Documents submitted to the Internal Revenue Service (IRS)
_____ Attachment 2	Copies of current license(s) needed to operate (as applicable to the funded activity) including City of Pahokee Business Tax Receipt (if applicable)
_____ Attachment 3	Documentation of all additional funding sources for program(s)/project(s) listed in application (if applicable)
_____ Attachment 4	A description/schedule of fees charged to the targeted beneficiaries of the programs/services/facilities to be funded (if applicable).
_____ Attachment 5	A job description for each position for which funds are being requested (explain role/responsibilities within each program/project)
_____ Attachment 6	Minority/Women Owned Business (MWOB). A company that is at least 51% owned and operated by an individual that is a female or at least 25% African American, Asian, Hispanic, or Native American. Attach Certification (if applicable).



ARPA SCORING CRITERIA

All applications received by the Submission Deadline will be reviewed, scored, and ranked based up the Scoring Criteria below. Incomplete applications will be rejected and will not receive a score or ranking for consideration of funding.

SCORING CRITERIA

AVAILABLE POINTS

1) Responds to COVID-19 Public Health Emergency

20 Available Points

The proposed program, project, or services responds to an identified need or negative impact of the COVID-19 public health emergency. The applicant has identified how the evidence based program, service, or other intervention addresses the need or impact (see Appendix B – from the “CSLFRF Compliance and Reporting Guidance” on evidence-based intervention).

2) Risk Assessment 20 Available Points

Applicants are expected to demonstrate that they are eligible, capable, and responsible in the management of federal funds. Costs covered by federal awards must be compliant with the terms and conditions of the award, and necessary and reasonable for the completion of the activity of the award. Fiscal and administrative oversight, internal controls, policies, procedures must be clearly documented. Number of years in operation will be considered.

3) Equity 15 Available Points

The applicant provides a description on how the project aims to reach underserved populations and/or those disproportionately affected by the pandemic.

4) Future Model Sustainability & Support 15 Available Points

The applicant describes the intended outcome of the project and how project success would be measured. The proposal describes how sustainability can be achieved to continue to develop and provide hybrid service options. The applicant includes a plan for handling ongoing expenses.

5) Activity Management & Implementation 15 Available Points

Applicants have provided documentation and information showing the goals, objectives, and resources needed to implement the proposed activity are available and ready, and that the commitment for operation and maintenance, where applicable, has been certified. This criterion takes into consideration factors that may accelerate or slow down the ability to implement the activity in a timely manner.

6) Cost Reasonableness & Effectiveness 10 Available Points

The activity will be evaluated in terms of its impact on the identified need, its implementation costs and budget funding request relative to the financial and human resources. Evaluation will include the cost incurred per person or per unit and the justification for a particular level of funding. Programs that are requesting support of administrative costs can range from 0-15%. Programs that request 10% or below for administrative costs will be awarded 1 additional point in this category.



Initials	Certifications and Affirmations
	I certify that I am authorized to submit this application on behalf of the applicant agency.
	I certify that the information provided in this application and the information provided in all supporting documents and forms is true and accurate. I understand that knowingly making a false statement in this application may subject me to criminal prosecution and penalties in accordance with applicable law. I further understand that, if it is determined that any of the requirements of the federal American Rescue Plan Act are found to not be satisfied in connection with my application and/or grant award, the City of Pahokee retains the right to seek reimbursement of any disbursed funds.
	I affirm that the award and payment of grant funds are subject to the sole and absolute discretion of the City of Pahokee City Commission without recourse. By submitting this application, I waive any and all claims related to the City of Pahokee ARPA Not-for-Profit Subrecipient Grant Program and specifically agree to indemnify and hold the City, its employees, officers, agents, and representatives harmless from any and all claims which may be in any way related to any City of Pahokee ARPA Not-for-Profit Subrecipient Grant Program award, payment, and/or denial.
	I affirm that due to the public health emergency with respect to COVID-19, this grant is necessary to respond to the negative impact of COVID-19 and addresses an identified need or impact. If funded, I affirm the applicant agency will continue service operations in the City of Pahokee.
	I acknowledge that, if this grant is approved, any amount my agency receives may be considered taxable income by the Internal Revenue Service.
	I certify that my agency was established and operating in the City of Pahokee on or before March 1, 2020.
	I acknowledge that, if this grant is approved, any amount my agency receives may be considered taxable income by the Internal Revenue Service.
	I acknowledge that if this grant application is approved, the City of Pahokee may request and I must produce my business records related to use of the grant funds and related business expenditures from the time of grant award through December 31, 2030.
	I acknowledge that, if this grant application is approved, my name, my agency name, and my grant award amount may be made public by the City of Pahokee.
	I acknowledge that, as an applicant for grant funds, my application and any business records related to use of grant funds will be subject to public access in accordance with Florida Sunshine Law.

Applicant Signature: _____

Title: _____

Date: _____



A Pre-Submittal Application Workshop will be held in the City of Pahokee City Hall located at 207 Begonia Dr., Pahokee, FL 33476 (see City of Pahokee website for more information). Attendance is encouraged and proof of attendance will be indicated by the agency representative’s signature on the attendance sheet provided at the Workshop. **Questions submitted after the Workshop will be posted on the City of Pahokee ARPA website with responding answers.** Applicants will not receive personal/direct answers to questions after Pre-Submittal Workshop has concluded.

FY 2022 FUNDING REQUEST

To submit an application, complete A – G, Attachments 1-5 (if applicable) in addition to any other items requested. Do not include any items that are not requested. Submit **In-Person Applications ONLY** to Community & Economic Development Department, 207 Begonia Dr., Pahokee, FL 33476 **by 3:00PM, April 5, 2023.** Please review the “Compliance and Reporting Guidance” for assistance with completing the application and reporting requirements. For assistance, please email Peggy Boule at arpa@cityofpahokee.com or call 561-924-5534, Monday-Friday, 9:00 a.m. –4:00 pm.

If approved for funding, additional information may be requested prior to award.

A. GENERAL INFORMATION

1. Name of Applicant: _____

Non-profit [Tax ID#: _____]

(Check the appropriate box and provide copy of your IRS ruling providing tax exempt status under Section 501(c) (3) of the 1986 IRS Code if you are a non-profit)

Recipients of City of Pahokee ARPA award funds will be required to have or obtain a Federal DUNS number (Data Universal Numbering System Number is a unique nine-digit business identifier that is required for applying for any grants from the federal government) per Section B.3.e of the Coronavirus State and Local fiscal Recovery Funds Guidance on Recipient Compliance and Reporting Responsibilities.

2. Name of Project: _____

3. Area or Location of Project: _____

4. Contact Person/Title: _____

(Preferably Pres. /Director)

Email Address: _____

Additional Contact Person/Title: _____

(Preferably Person responsible for preparing reports)

Alternate Email Address: _____

Mailing Address/Zip: _____



Telephone: Fax: _____

5. Grant Request COMMUNITY ASSESSMENT PRIORITY (Activity Area): **(Check all that apply)**

(See Appendix A. for eligible uses under each Initiative)

- Economic Stability and Resilience
- Housing Affordability and Home Ownership
- Educational Opportunities and Job Skills Development
- Healthcare Access and Health Outcomes
- Criminal Justice and Safety

6. Total Amount of ARPA Funds Requested for Project(s): _____

7. Total Amount of Additional (non-ARPA) Funds for Project(s): _____

Source of Additional Funding: Cash In-Kind Other Grants Donations

Identify Source of Additional Funding: _____

8. How many years has your organization been in operation? _____

Is this project:

- A new service; or
- A quantifiable increase in the level of an existing service which has been provided by the applicant.

9. Has the applicant received State or local government funds in the 12 months preceding the submission of this application for the project(s) for which the applicant is requesting

ARPA funds? Yes No

If Yes, what is the funding source? _____

10. Could this project occur without these funds? Yes No

11. Will this project continue after ARPA funding ends? Yes No

If Yes, describe how the applicant will guarantee the sustainability of the project/program after ARPA funds have been spent.



B. PROPOSED PROJECT: Project Description: In three sentences concisely describe your project. This description will be used in future publications should your application be approved. If proposing multiple projects, list each individual project/program and limit the description of each project to three sentences. (Attach separate sheet if necessary).

C. STRATEGY: Check the **COMMUNITY ASSESSMENT PRIORITY** for which you are requesting funding, and enter the eligible program/project, the metric being used to measure success, and the desired outcome of the project/program. (Check all that apply)

✓	COMMUNITY ASSESSMENT PRIORITY	PROGRAM/PROJECT	METRIC	DESIRED OUTCOMES
	Economic Stability & Resilience			
	Housing Affordability & Home Ownership			
	Educational Opportunities & Job Skills Development			
	Healthcare Access & Health Outcomes			
	Criminal Justice & Safety			

D. PROJECT SUMMARY Provide a detailed description of the proposed project/activity to be funded, including a plan of action explaining in detail how the agency (and who, specifically) will implement the activity: i.e. intake procedures, required documentation, etc. Describe how this activity relates to the overall organizational structure. Be very specific how the ARPA funds are proposed to be used. (Attach additional sheets if necessary)



Explain how this program fits with your mission. _____

How will it impact your current operation? _____

How does this program mitigate and/or respond to the negative impacts of the COVID-19 public health emergency? _____

Does this program serve a disproportionately impacted population, community, or Qualified Census Tract? Describe population and provide justification. _____

Will program income be generated from this activity? If yes, how will the program income be used? _____

Where will the program take place and is it within the City of Pahokee municipal boundaries? _____

Are you working with other organizations in a cooperative effort on the program? If yes, please list the other organizations and their role and responsibilities.



Goals/Objectives/Activity Measures:

(Descriptive narrative. For multiple projects, please use separate Goal Sheet for each individual project).

Project/Program Title:

<p>Goal:</p> <p>Objective #1:</p> <p>Resources Needed & Available:</p> <p>Start Date & Duration:</p>
<p>Objective #2:</p> <p>Resources Needed & Available:</p> <p>Start Date & Duration:</p>
<p>Objective #3:</p> <p>Resources Needed & Available:</p> <p>Start Date & Duration:</p>
<p>Goal:</p> <p>Objective #1:</p> <p>Resources Needed & Available:</p> <p>Start Date & Duration:</p>
<p>Objective #2:</p> <p>Resources Needed & Available:</p> <p>Start Date & Duration:</p>
<p>Objective #3:</p> <p>Resources Needed & Available:</p> <p>Start Date & Duration:</p>



E. PROJECT BUDGET

Please list applicant’s anticipated expenditures, detailing requested funds and additional funding. Please place C=Cash, I=In-Kind, O=Other Grants, D=Donations beside each amount under “Other Project Funds” to denote the type of funds being used. If funding request is for multiple programs/projects, please provide a separate **PROJECT BUDGET** for each program/project and indicate which **COMMUNITY ASSESSMENT PRIORITY** the program/project falls under (see **Appendix A** for eligible projects/programs under individual **Community Assessment Priorities**).

Project/Program Title:

Line Item	ARPA Funds Requested	Other Project Funds	Total Project Budget
ADMINISTRATION:			
Personnel (#)			
Payroll Taxes			
Employee Benefits			
Office Supplies			
Copy Supplies			
Postage			
Telephone			
Professional Services			
Vehicle Fuel/Mileage			
Other (Insurance, etc.)			
COMMUNITY ASSESSMENT PRIORITY			
Economic Stability & Resilience			
Housing Affordability & Home Ownership			
Educational Opportunities & Job Skills Development			
Healthcare Access and Health Outcomes			
TOTALS			



F. APPLICANT INFORMATION: (Provide a brief description of each)

Mission Statement:

Will all ARPA funds awarded be maintained in a manner that they will be accounted for separately and distinctly from other sources of revenue or funding? Provide a brief description of the applicant's policies and procedures that ensure funds will be tracked appropriately.

Does the applicant have written policies and procedures? How often are these policies and procedures updated? Provide a brief list of the topics covered in the applicant's policies and procedures. The City of Pahokee may request a copy for review during the application and award process or as part of the grant monitoring process.

Is the applicant's financial management system able to track actual expenditures and outlays with budgeted amounts for each grant or subgrant? Provide a brief summary of the organization's process for tracking expenditures, including tracking budgeted versus actual amounts.

Does the applicant have effective internal controls in place to ensure that federal funds are used solely for authorized purposes? Provide a brief description of the applicant's internal controls that will provide reasonable assurance that the award funds will be managed properly.

Does the applicant have a documented records retention policy? If so, briefly describe the policy and confirm that the policy complies with federal regulations. Information on Records Retention and Access can be found at 2 C.F.R § 200.333-200-337.



APPLICANT INFORMATION (cont.)

Is the individual primarily responsible for fiscal and administrative oversight of grant awards familiar with the applicable grant management rules, principles, and regulations including the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (2 C.F.R. Part 200)? Provide a short list of the individuals qualifications and experience.

Does the applicant have policies and procedures in place to manage subawards and monitor activities of subrecipients as necessary to ensure that subawards are used for authorized purposes in compliance with laws, regulations, and terms and conditions of the award and that established subaward performance goals are achieved (2 C.F.R. §§200.330-200.332)? Provide a brief description of the organization’s policies and procedures on subrecipient monitoring and management.

Does the applicant currently require employees to maintain time distribution records that accurately reflect the work performed on specific activities or cost objectives in order to support the distribution of employees’ salaries among federal awards or other activities (2 C.F.R. §200.430)? Budget estimates do not qualify as support for charges to federal awards. Provide a brief description of the organization’s established timekeeping policies and procedures.

Is the project/program an evidence-based intervention with strong or moderate evidence? If yes, please describe the supported causal conclusions and positive findings on outcomes.

APPENDIX B (attached) provides definitions of Strong, Moderate, and Preliminary evidence.

APPENDIX C (attached) denotes areas where subrecipients must report the total funds that are allocated to evidence-based interventions (*) and areas where subrecipients must report on whether projects are primarily serving disadvantaged communities (*).



G. Conflict of Interest

Federal law (24 CFR § 570.611) prohibits persons who exercise or who have exercised any functions or responsibilities with respect to the above grant...or who are in a position to participate in a decision-making process or to gain inside information with regard to such activities, may obtain a financial interest or benefit from an assisted activity...either for themselves or those with whom they have family or business ties, during their tenure or for one year thereafter.

1. Is there any member of the applicant's staff, member of the applicant's Board of Directors, or office who currently is or has/have been within one year of the date of this application a City employee, or a member of the City Commission?

Yes No

If yes, please list names: _____

2. Is there any member of the applicant's staff, member(s) of the Board of Directors, or officer(s) who are business partners or immediate family of a City employee, or a member of the City Commission?

Yes No

If yes, please list names: _____

3. Will the funds requested by the applicant be used to pay the salaries of any of the applicant's staff or award a subcontract to any individual who is or has been within one year of the date of this application a City employee, or a member of the City Commission?

Yes No

If yes, please list names: _____

The applicant certifies to the best of his/her knowledge and belief that the data in this application is true and correct and that the filing of the application has been duly authorized by the governing body of the applicant (if applicable) and that the applicant will comply with all the requirements of this grant if the application is approved.

Name: _____ Signature: _____

Title: _____ Date: _____

Name: _____ Signature: _____

Title: _____ Date: _____



H. Drug Free Workplace Certification

In order to have a drug-free workplace program, a business shall:

1. Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against an employee for violations of such prohibition.
2. Inform employees about the dangers of drug abuse in the workplace, available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees from drug abuse violations.
3. Give each employee engaged in providing the commodities or contractual services that under this solicitation a copy of the statement specified in subsection (1) above.
4. In the statement specified in section (1), notify the employees that, as a condition of working in the commodities or contractual services that are under this solicitation, the employees will Abide by the terms of the statement and will notify the employee of any conviction of, or pleas of guilty or nolo contendere to, any violation of Chapter 893 or if and controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.
5. Impose a sanction on, or require the satisfactory participation in, a drug abuse assistance or rehabilitation program, by any employee who is so convicted.
6. Make a good faith effort to continue to maintain a drug-free workplace through implementation of this section.

As the person authorized to sign the statement, I certify that this firm complies fully with the above requirements.

Signature of Respondent

Witness



APPENDIX A – Eligible Uses

The following is not an exhaustive list of potential projects or programs, but are provided as examples of eligibility, based upon the City of Pahokee Public Survey Response. Any questions regarding eligibility of projects or programs, please contact Peggy Boule, Director of Community & Economic Development arpa@cityofpahokee.com.

COMMUNITY ASSESSMENT PRIORITIES	ELIGIBLE PROJECTS/PROGRAMS
Economic Stability & Resilience	<ul style="list-style-type: none"> • Small business grants and loans • Target hardest hit industries, ex. fishing and art industries • Supporting businesses that did not qualify for federal programs • Technical assistance support • Job training assistance • Direct payments to households • Food assistance • Prioritize low-to-moderate income families
Housing Affordability & Home Ownership	<ul style="list-style-type: none"> • Rental and mortgage assistance • Affordable housing • Utility assistance • Housing counseling • Home rehabilitation • Homelessness services
Educational Opportunities & Job Skills Development	<ul style="list-style-type: none"> • Broadband infrastructure • Internship and mentorship programs • Literacy programs • Art/Enrichment programs • Prioritizing children that experienced at-home learning challenges • Entrepreneurship training
Healthcare Access and Health Outcomes	<ul style="list-style-type: none"> • Mental health services • Vaccine programs • Supporting Physical Education programs at schools • Public Health Clinics • Childcare • Home visiting programs • Substance and domestic abuse • Community health workers



APPENDIX B - Evidenced-Based Intervention Additional Information

What is evidence-based?

For the purposes of the SLFRF, evidence-based refers to interventions with strong or moderate evidence as defined below:

Strong evidence means the evidence base that can support causal conclusions for the specific program proposed by the applicant with the highest level of confidence. This consists of one or more well-designed and well-implemented experimental studies conducted on the proposed program with positive findings on one or more intended outcomes.

Moderate evidence means that there is a reasonably developed evidence base that can support causal conclusions. The evidence base consists of one or more quasi-experimental studies with positive findings on one or more intended outcomes OR two or more nonexperimental studies with positive findings on one or more intended outcomes. Examples of research that meets the standards include well-designed and well-implemented quasi-experimental studies that compare outcomes between the group receiving the intervention and a matched comparison group (i.e., a similar population that does not receive the intervention).

Preliminary evidence means that the evidence base can support conclusions about the program's contribution to observed outcomes. The evidence base consists of at least one nonexperimental study. A study that demonstrates improvement in program beneficiaries over time on one or more intended outcomes OR an implementation (process evaluation) study used to learn and improve program operations would constitute preliminary evidence.

Examples of research that meet the standards include: (1) outcome studies that track program beneficiaries through a service pipeline and measure beneficiaries' responses at the end of the program; and (2) pre- and post-test research that determines whether beneficiaries have improved on an intended outcome.

[Coronavirus State and Local Fiscal Recovery Funds
Compliance and Reporting Guidance](#)



APPENDIX C – Expenditure Categories (For Treasury Reporting)

The Expenditure Categories (EC) listed below must be used to categorize each project for Quarterly Reporting to the US Treasury. The term "Expenditure Category" refers to the detailed level (e.g., 1.1 COVID-19 Vaccination). When referred to at the summary level (e.g., EC 1) it includes all Expenditure Categories within that summary level. For example, EC 1 at the summary level is Public Health.

(*) Denotes areas where recipients must identify the amount of the total funds that are allocated to evidence-based interventions (see Use of Evidence section above for details)

(^) Denotes areas where recipients must report on whether projects are primarily serving disadvantaged communities (see Project Demographic Distribution section above for details)

Public Health

- 1.1 COVID-19 Vaccination ^
- 1.2 COVID-19 Testing ^
- 1.3 COVID-19 Contact Tracing
- 1.4 Prevention in Congregate Settings (Nursing Homes, Prisons/Jails, Dense Work Sites, Schools, etc.) *
- 1.5 Personal Protective Equipment
- 1.6 Medical Expenses (including Alternative Care Facilities)
- 1.7 Capital Investments or Physical Plant Changes to Public Facilities that respond to the COVID-19 public health emergency
- 1.8 Other COVID-19 Public Health Expenses (including Communications, Enforcement, Isolation/Quarantine)
- 1.9 Payroll Costs for Public Health, Safety, and Other Public Sector Staff Responding to COVID-19
- 1.10 Mental Health Services*
- 1.11 Substance Use Services*
- 1.12 Other Public Health Services

Negative Economic Impacts

- 2.1 Household Assistance: Food Programs* ^
- 2.2 Household Assistance: Rent, Mortgage, and Utility Aid* ^
- 2.3 Household Assistance: Cash Transfers* ^
- 2.4 Household Assistance: Internet Access Programs* ^
- 2.5 Household Assistance: Eviction Prevention* ^
- 2.6 Unemployment Benefits or Cash Assistance to Unemployed Workers*
- 2.7 Job Training Assistance (e.g., Sectoral job-training, Subsidized Employment, Employment Supports or Incentives) * ^
- 2.8 Contributions to UI Trust Funds
- 2.9 Small Business Economic Assistance (General)* ^
- 2.10 Aid to Nonprofit Organizations*
- 2.11 Aid to Tourism, Travel, or Hospitality
- 2.12 Aid to Other Impacted Industries
- 2.13 Other Economic Support* ^
- 2.14 Rehiring Public Sector Staff

Services to Disproportionately Impacted Communities

- 3.1 Education Assistance: Early Learning* ^
- 3.2 Education Assistance: Aid to High-Poverty Districts ^



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3.3 Education Assistance: Academic Services ^

3.4 Education Assistance: Social, Emotional, and Mental Health Services ^

3.5 Education Assistance: Other* ^

3.6 Healthy childhood environments: Child Care* ^

3.7 Healthy Childhood environments Home Visiting* ^

3.8 Healthy Childhood Environments: Services to Foster Youth or Families Involved in Child Welfare System* ^

3.9 Healthy Childhood Environments: Other* ^

3.10 Housing Support: Affordable Housing* ^

3.11 Housing Support: Services for Unhoused Persons* ^

3.12 Housing Support: Other Housing Assistance* ^

3.13 Social Determinants of Health: Other* ^

3.14 Social Determinants of Health: Community Health Workers or Benefits Navigators* ^

3.15 Social Determinants of Health: Lead Remediation ^

3.16 Social Determinants of Health: Community Violence Interventions* ^

Administrative

7.1 Administrative Expenses

7.2 Evaluation and Data Analysis

7.3 Transfers to Other Units of Government

7.4 Transfers to Non-entitlement Units (States and territories only)

Coronavirus State and Local Fiscal Recovery Funds

[Compliance and Reporting Guidance](#)