Soldotna Coronavirus Nonprofit Response Fund

*Alaska Community Foundation*

# Organization Name\*

*Character Limit: 250*

# Amount Awarded

*Character Limit: 20*

*Question Group*

## Financial Accounting

Please input the total CNRF grant funding spent in each of the spending categories below. If you did not spend any grant funds in a category, please enter 0. The total of the categories below should not exceed the total grant award amount.

[Click here for an explanation of each category of funding.](http://alaskacf.org/wp-content/uploads/2020/10/DHSS-COVID-Spending-Categories.pdf)

# Medical\*

*Character Limit: 20*

# Public Health\*

*Character Limit: 20*

# Payroll\*

*Character Limit: 20*

# Compliance\*

*Character Limit: 20*

# Economic Support\*

*Character Limit: 20*

# Other\*

*Character Limit: 20*

# Total\*

*Character Limit: 20*

# Final Accounting Form\*

Please complete and upload the [Final Accounting Form](http://alaskacf.org/wp-content/uploads/2020/10/CNRF-Final-Accounting-Form.xlsx) to categorize the expenses associated with this grant. Please include a line item for each invoice or expense from each funding

category.

Please do not attach this document in .numbers format, as we cannot read these documents.

*File Size Limit: 2 MB*

# Evidence of Expenditures\*

Please upload a detailed profit and loss income statement (also called an income statement) for this grant as evidence of your expenditures.

*File Size Limit: 10 MB*

# Maintenance of Records\*

Per the State and Federal assurances contained in your grant agreement, you must retain for a minimum of three (3) years, all records, receipts, and evidence for all expenditures under this grant in order to establish that all funds spent under this grant have been used in accordance with the terms and conditions of the grant, and solely for the purposes of the grant, the CARES act, and all referenced State and Federal Regulations and statutes. These records should be accessible to ACF or its agents for purposes of audit for the three (3) year period. This financial record-keeping must be kept to a level that would permit “the tracing of funds to a level of expenditure adequate to establish that such funds have been used according to the Federal statutes, regulations, and the terms and conditions of the Federal award.” 2 C.F.R. § 200.302(a).

## Choices

I certify that we will meet this requirement.

# Narrative Description of Expenses\*

Please describe how the CNRF funds were used by your organization to respond to the COVID- 19 public health crisis.

*Character Limit: 10000*

# Impact of Funding\*

What was the impact of these funds on your organization and/or the people you serve?

*Character Limit: 10000*

# Collaboration and Innovation\*

In what ways did this funding allow your organization to be collaborative and /or innovative in how your services are delivered or how you support your staff or clients?

*Character Limit: 5000*

You are strongly encouraged to upload photos or additional documents, such as press releases, to help us better understand the impact of this funding, please do so here.

Please include any pictures that can be shared with the general public.

# Photo or related materials

*File Size Limit: 2 MB*

# Photo or related materials

*File Size Limit: 2 MB*

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*File Size Limit: 2 MB*

Thank you! Please contact ACF with any questions at jlavoie@alaskacf.org or kstjohn@alaskacf.orgmailto:pchampney@alaskacf.org.

# Mark for Use in Reporting

## Choices

Yes