



Application for Boone County COVID-19 ARPA Funding
State and Local Fiscal Recovery Funds, SLFRF

General Information

Organization Name: _____

Organization Mailing Address: _____

Entity Type: _____

Point of Contact Information

Name: _____

Phone Number: _____

Email Address: _____

Mailing Address: _____

Summary Project Information

Name of Proposed Project: _____

Project Category: _____

Amount of Funding Requested: _____

Application for Boone County COVID-19 ARPA Funding

State and Local Fiscal Recovery Funds, SLFRF

Applicant Name:

Name of proposed Project or Program/Services: _____

Estimated TOTAL COST of proposed Project or Program/Services: _____

Amount of Boone County ARPA Funds Requested: _____

Boone County Percentage of total Project cost: _____

Section 1 – Applicant Information

- Legal Name: _____
 - Entity type (i.e., government, not-for-profit, business, etc.): _____
 - Provide a copy of the organizational chart (**Attachment 1**) and a completed W-9 form (**Attachment 2**).
 - Provide a copy of the Missouri Secretary of State organizational documents (Copies Articles of Incorporation, Articles of Organization, most recent annual report, etc.) (**Attachment 3**).
 - Provide a copy of the most recent annual financial statements (including a copy of the financial audit report) (**Attachment 4**).
 - Physical address of the entity's home office: _____
 - Do the entity's operations encompass permanent physical locations other than the home office?
 - If yes, provide a brief overview of the various physical locations and the nature of operations conducted at each location:

 - Identify the individual responsible for financial and grant reporting for the entity. Describe their level of experience and expertise: _____
 - Identify the individual designated as your entity's **single point of contact** for all questions and information pertaining to this application and/or award. Include name and contact information: _____
- _____

Section 2 – Applicant’s experience with government-funded grant awards and/or non-government funded grant awards

- Has your organization received grant awards from one or more governmental entities or one or more *non-governmental* entities, as either a direct awardee or as a subrecipient awardee? _____
 - If yes, describe your entity’s experience over the past 3 years. Identify grantor agencies/entities, purpose of award(s), dollar amount of award(s), and reporting requirements.

 - If yes, describe completion status of awards (i.e., completed and closed out; completed but awaiting close out, ongoing, etc.).

- Within the past 3 years, has your entity been required to obtain a single audit (i.e., an audit of an entity’s Schedule of Expenditure of Federal Awards (SEFA))? _____
 - If yes, for which years were single audits obtained? _____
 - If yes, provide a copy of the most recent Single Audit report (**Attachment 5**).

- Within the past 3 years, has your organization been subject to sub-recipient monitoring activities for federal monies passed through to your entity? _____
 - If so, describe. Include any monitoring visits, remote desk audits, and/or official communications from the monitoring agency.

- Within the past 3 years, has your organization been subject to grant monitoring activities by a *non-governmental* entity? _____
 - If so, describe. Include any monitoring visits, remote desk audits, and/or official communications from the monitoring entity.

Section 3 – Project Information

- Briefly describe the proposed Project or Program/Services. An expanded description may be provided in **Attachment 6**.

- Explain how the proposed Project or Program/Services responds to the COVID-19 public health emergency or its negative economic impacts. **Include specific references to ARPA Final Rule FAQs** (<https://home.treasury.gov/system/files/136/SLFRF-Final-Rule-FAQ.pdf>), Final Rule Overview (<https://home.treasury.gov/system/files/136/SLFRF-Final-Rule-Overview.pdf>), or other guidance issued by US Treasury on eligible uses of ARPA funds.

- The federal funding authorization governing Boone County’s ARPA monies identifies seven (7) Eligible Expenditure Categories (EC) which are shown in **Appendix 1** of this application. Identify the appropriate EC for the requested Project or Program/Services funding request. If more than one Expenditure Category potentially applies, identify the single category that is *most* applicable.

- Briefly describe the methodology and sources used to determine the estimated total cost of the Project or Program/Services. Provide additional supporting documentation as needed (**Attachment 7**).

