

Quarterly Budget and Expenditure Reporting under CARES Act Sections 18004(a)(1) Institutional Portion, 18004(a)(2), and 18004(a)(3), if applicable

Institution Name: _____ Date of Report: _____ Covering Quarter Ending: _____

Total Amount of Funds Awarded: Section (a)(1) Institutional Portion: _____ Section (a)(2): _____ Section (a)(3): _____ Final Report? _____

Category	Amount in (a)(1) institutional dollars	Amount in (a)(2) dollars, if applicable	Amount in (a)(3) dollars, if applicable	Explanatory Notes
----------	--	---	---	-------------------

\$ 0	\$ 0	\$ 0
	\$ 0	\$ 0
	\$ 0	\$ 0
\$ 0	\$ 0	\$ 0
\$ 64,013	\$ 2,289	\$ 0
\$ 4,383		
	\$ 230	\$ 0
\$ 82,588	\$ 2,519	\$ 0
\$ 85,107		

The (a)(1) total includes a -\$105 correction for Dec. hot spot fees that should have been reported as technology provided to students, on the previous report.

Mileage for transporting Covid test samples to lab, meals for staff during SHIELD Illinois (Covid testing) training, food for a student in quarantine.

OU" #o t ol Vu e t #AkESA t fu
Se tio s a I stitutio al Po tio , a , a d a , if appli a le. Se tio a fu dsi ludes #7DAs . J Histo i all " la k
#olleges a d U i e sites H" #Us , . K T i all #o t olled #olleges a d U i e sites T##Us , . L U i o it Se i gl stitutio s USs , . U
St e gthe i gl stitutio s P og a SIP ; Se tio a fu dsa e fo #7DA . V 7u d fo the l p o e e t of Postse o da Edu atio 7IPSE
7o ula 8 a t . Ea h atego is deli e atel oada d a ot aptu espe ifi ga t p og a e ui e e ts. E pla ato foot otes help la if e tai
epo ti g atego ies ‡ hile so e ite si the ha ta e lo ked out, please ote that the lo ki gof su hite sis o siste t A As a Ai the
ha t fu dsi the j ua te l E pe ditu es fo ea h P og a o , a d the g posted. It a e posted page fo ato as ali k to a PD7. A e sepa ate fo us
Septe e , De e e , Ua h , Ju e , o ludi ga fte eithe posti g the ua te l e
hase pe ded a d li uidated all a I stitutio al Po tio , a , a d a fu dsa d he kfi i g/
7o the fi st epo t usi g this fo , i stitutio s ust po ide thei u ulati e e pe ditu es fo the d
. Ea h ua te l epo t ust e sepa atel ai tai ed o a IHE's e site o i a PD7 do u e t

Paperwork Burden Statement

A o di g to the Pape o k ked u tio A t of PkA , o pe so s
OU" o t ol u e . The alid OU" o t ol u e fo thisi fo a
esti ated to a e age hou spe espo se, i ludi g ti e fo e ie
eeded, a d o pleti ga d e ie i g the olle tio of i fo atio .
e efit. If ou ha ea o e ts o e i g the a ua of the ti
o o e s ega di g the status of ou i di idual fo , appli atio ,
S‡ , ‡ ashi gto , D# .