



HEALTHCARE INFRASTRUCTURE GRANT PROGRAM Semi-Annual Report and Payment Request Form

Section 1.1 Required.

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|---------------------|-------------|------------------------------|--|
| Date | | Project ID (ARPA-HCI-###) | |
| Grantee Name | | | |
| Contact Person | Name: | Title: | |
| Contact Information | Phone: | Email: | |
| Reporting Period | Select one: | | |

Section 1.2 Semi-Annual Report and Payment Request Schedule and Guidelines

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|------------|---|
| Guidelines | <ul style="list-style-type: none"> Grantee shall submit Semi-Annual Report and Payment Request Forms every 6 (six) months for the duration of the Period of Performance for all activities, unless otherwise directed by the Department. Grantees can use this report as a request for reimbursement for costs incurred or as an advance for expected costs, or as a combination request using both options. The initial Semi-Annual Report and Payment Request Form will cover both past (if any) and future eligible expenses incurred from the start of the Period of Performance (March 3, 2021) through December 31, 2022 (the "Initial Payment Request Period"). Semi-annual reports and payment requests will be required thereafter per the table below. In no event shall grantee submit a request for payment to DOA later than 90 days after the end of the Program's Performance Period. Please contact program staff at HealthcareInfrastructureGrantProgram@wisconsin.gov with any questions about this process or with any requests to amend your budget, scope of work, or timeline. |
|------------|---|

| | Reporting Period | Form Submission Opens | Form Due Date |
|--|---|---------------------------------|--|
| Schedule of Reports and Disbursements | Initial Request Period March 3, 2021 – December 31, 2022 | After Grant Agreement execution | Due within 30 days after Grant Agreement execution |
| <i>DOA processes reports on a rolling basis within 30 days of submission</i> | January 1 through June 30 | Opens December 1 | Due by July 31 |
| | July 1 through December 31 | Opens June 1 | Due by January 31 |

Section 2.1 Semi-Annual Payment Request. Required.

Semi-Annual Payment Request - Budget

(1) Enter Grant Amount from Executed Agreement Attachment B – Budget for each line item. (2) For each line item, enter the total amount of grant funds previously received. (3) For each line item, enter the total actual incurred expenditures from all previously received grant funds, as of the date of this report and payment request. (4) For each line item, enter the carryover total (i.e., currently unused amount) of grant funds. (5) For each line item, enter the amount being requested as part of this report and payment request. (6) If you identified cost share in your executed agreement, Attachment B-Budget, enter the total amount of expenditure on each line as of the date of this report and payment request.

| Cost Category | | (1) Budgeted Grant Amount | (2) Total Funds Previously Received | (3) Total Actual ARPA Grant Expenditures Incurred to Date | (4) Carryover Funds <i>(Column 2 – Column 3)</i> | (5) New Requested Amount | (6) Cost Share Contributed to Date |
|---------------|---|---------------------------------|--|---|--|--------------------------------|---|
| A | Advertising | | | | | | |
| B | Construction – New | | | | | | |
| C | Construction – Remodel/Renovation | | | | | | |
| D | Construction – Utility | | | | | | |
| E | Construction - Remediation | | | | | | |
| F | Construction – Contingency | | | | | | |
| G | Depreciation | | | | | | |
| H | Equipment | | | | | | |
| I | Insurance | | | | | | |
| J | Participant Support Costs | | | | | | |
| K | Personnel - Salaries | | | | | | |
| L | Personnel – Fringe Benefits | | | | | | |
| M | Professional Services | | | | | | |
| N | Real Property Acquisition | | | | | | |
| O | Rental of Real Property & Equipment | | | | | | |
| P | Supplies | | | | | | |
| Q | Travel | | | | | | |
| R | Vehicle Acquisition | | | | | | |
| S | Other | | | | | | |
| T | Other | | | | | | |
| U | Other | | | | | | |
| V | Other | | | | | | |
| W | Program Income | | | | | | |
| X | Administrative Costs (Indirect) | | | | | | |
| Y | Total Direct (Sum rows A through V) | | | | | | |
| Z | Project Total (gross) (Sum rows W, X and Y) | | | | | | |
| AA | Project Total (net) (Subtract row W from Z) | | | | | | |

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| Section 2.2 Budget Table Financial Summary | | |
|--|--|--|
| A. | Total Award Amount <i>(from Grant Agreement)</i> | |
| B. | Total Payment Amount Received To-Date | |
| C. | Total Actual Expenditures Incurred To-Date | |
| D. | Carryover Funds (Lines B – C = D) (funds received but not expended as of reporting) | |
| E. | New Requested Amount | |
| F. | Award Amount Remaining (Lines A – B – E = F) | |

| Section 2.3 Reporting Period Narratives | |
|---|--|
| <p>A. Describe Project Activities for the Previous Reporting Period.</p> <ul style="list-style-type: none"> • Explain and confirm dates and details of actual activities, expenses and cost share previously reported to the program on the last report. • Provide an explanation for any requested but unspent funds in the previous reporting period (i.e. carryover funds). Identify any activities that did not occur as proposed. | |
| <p style="text-align: center; font-size: 48px; opacity: 0.3; transform: rotate(-30deg);">CONVENIENCE COPY</p> | |

B. Describe Expected Project Activities for the Next Reporting Period

- Information should include expected activities and expenses or those completed at the time of filing.
- If you are using this report to request advance funds for activities expected to occur during the next reporting period, identify those expected activities and expenses.
- Provide explanations and date ranges of expenses listed in the budget table and, where applicable, include specifics such as dates, outcomes, census tract information, etc.
- If this is your Final Payment Request, identify remaining grant-related activities and expenses.

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Section 3 CIVIL RIGHTS COMPLIANCE. Required.

1. Has grantee received any complaints of discrimination on the grounds of race, color, national origin, or limited English proficiency covered by Title VI of the Civil Rights Act of 1964 and implementing regulations?
 Yes No
2. If the answer to question 1 is “yes,” grantee must provide a copy of the log of any such complaints covered by Title VI of the Civil Rights Act of 1964. Such log shall include a list of all reviews or proceedings based on the complaint, pending or completed, including complaint outcome for the grant performance period.
 - Grantee agrees to provide the Department of Administration a copy of their Civil Rights complaint log. The Department’s Division of Legal Services will contact you to gather the required Civil Rights Act documentation.
 - Not applicable as grantee has not received any Civil Rights complaints.

Section 4. LOBBYING REPORTING & DISCLOSURE. Required.

If the amount of the grant award is greater than \$100,000.00, grantee is required to answer the following questions:

1. Has grantee, or the undersigned by or on behalf of grantee, paid or does it expect to pay any funds, other than Federal appropriated funds, to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress, in connection with this Federal grant?

Yes No

2. If the answer to question 1 is "yes," has grantee complied with the disclosure requirements set forth in 31 C.F.R. Part 21? If grantee answered "no" to question 1, check the box marked "N/A."

Yes No N/A

Section 5. MONITORING ACKNOWLEDGEMENT. Required.

- Grantee acknowledges that pursuant to Sections 18 and 19 of the grant agreement, grantee is required to provide, upon request, any financial documentation or other information related to expenditures funded with the Grant Award or other compliance obligations to the Department of Administration, or its designee, as part of routine financial and program monitoring. Documentation may include but is not limited to invoices, contracts, evidence of services provided, policies and procedures, etc.

Section 6. CERTIFICATION. Required.

Grantee must certify to all conditions listed below before a payment request will be processed. Failure to do so may result in delayed payment to the grantee.

The signatory below certifies to the best of his/her/their knowledge and belief that:

- the information contained in this Semi-Annual Report and Payment Request Form is true, accurate and complete;
- any funds sought for reimbursement are for eligible goods and services, the costs of which have been incurred and paid for;
- any advance funds sought are limited to eligible expenses for the payment request period selected on this form;
- there is no duplication of payment or reimbursement from another funding source for the funds being requested; and
- use of any funds is in accordance with applicable law, regulations, and the terms and conditions of the grant agreement.

Section 7. Required.

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| Authorized Representative Signature <i>(typed signature acceptable)</i> | |
| Print Name | |
| Title | |
| Date | |

| | | |
|---------------------------|----------------|----------------|
| OFFICE USE ONLY | Date Received: | Date Reviewed: |
| Approved, amount | | |
| Approved, with conditions | | |
| Denied, reason | | |