## Quarterly Budget and Expenditure Reporting ford-thEERF I, II, and III P () w š.

Institution Name:	Date of Report:	Covering Quarter Ending: W Z
Award Number(s): P425E z z z z z z z z z z z z z z z z z	z z zP2422555z z z z z z z z z z z z z z z	z z z z z z z z z ł ł 25 k z z z z z z z z z z z W ð î ñ > z z z z z z z
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Final Report?• (Only if you have exhausted ALL HEERF Grants)		
Total Amount of InstitutionaFunds Awarded: Section (a)(1): Total Amount of Student Funds Awarded: Section (a)(1):	^ š]}v ~ • ~ î • W § Section (a)(4):	Section (a)(3):
1) Please povide a link to your annual eport located on the BFtrans	sparency prtal so the public ca	an review the ful details of your HEER grant usageover

the last calendr year, including methodologies sed to award HEER Finds to students, academic success of HEER Figerets, and

î∙	What percentage of students	received emergency ar	ants and how much	did students receive b	y student type and fund type?

- How much of your HEERF student funds remain left to be disbursed at the end of the reporting period?
- Complete the following table.

EmergencyFinancialAid GrantsAwardedto Students this quarter report only disbursements related to Emergency Financial Aid Grants including using those grants to satisfy outstanding accounts. Any disbursements unrelated to Emergency Financial Aid Grants should not be included in the reported ependitures

	Total	Undergraduates	Graduates
	students		

Number of HEERF Student Recipients – Emergency Grants to Students What was the amount of Emergency Financial Aid

student's outstanding account balance upon receiving affirmative written consent from students to do so? If funds were not used for this purpose, report \$0. Include only amounts that benefited students who b ic 0.003 3.44 re f EMC BT /P <rpmolu cy Financial Aid

## 3) Institutional expenditures

a) Has your istitution designated HEERF program funds for a specific purpose or budget objective in future quarters (for example, operation and

OMBControlNumber 1840-849

c) Estimate

Leaserevenue		
Royalties		
Otheroperatingrevenue	I	I

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## FormInstructions

<u>Completing the Forn</u>On each form, fill out the institution of higher education (IHE or institution) name, the date of the report, the appropriate quarter the report covers \$/31/22, 6/30/22, 9/30/22, 12/31/22), the 14digit PR/Award Number (number is found in Box 2 of your Grant Award Notific(£iteN)) for each HEER Frantfundingstream asapplicable, the total amount of funds awarded by the Department (including reserve funds if awarded), and check the box if the report is a "final report." Institutions that expended HEERF grant funds during the calendar quarter from Jan Marych 30, 2021 are required post the quarterly report that involved the expenditure of HEERF II CRRSAA and HEERF I CARES Act funds. The Department **dily adfirmation** yindicate this reporting requirement was in place for HEERF II CRRSAA As such, institutions may have until the end of the second calendar quarter, Ju2023 popost these retroactive reports if they have not already dones o.

In the charts, an institution must specify the amount of expended HEERF I, II, and IIst from each funding category: (a)(1) Institutional Portion; (a)(2), and (a)(3), if applicable.(a)(2)fundsincludeAssistance.istingNumbers(ALNs)84.425J(Historically

needed, and completing ad reviewing the collection of information. Under the PRA, participants are required to respond to this collection to obtain or retain benefit. If you have any comments concerning the concerning the comments of the time estimate or suggestions of rimproving this individual collection, bif you have comments or concerns regarding the status of your individual form, application, or survey, lease ontact HERF reporting@ed.gov,SJDepartment bEducation, 40 Maryland Avenue, SV, Washington, D 20202.