



Recipient Profile

Expenditure Summary

Revenue Replacement

Certification

Interim Report



Step 1

Verify Recipient Profile



Step 2

Complete Expenditure
Summary

Step 3

Complete Revenue
Replacement

Step 4

Complete Certification

Recipient Profile

Instructions

Please verify that you are an authorized user of the prime recipient and confirm the accuracy of your organization's program profile.

Recipient Information	
Recipient DUNS	010396687
Recipient DUNS (+4)	<input type="text"/>
Recipient TIN	636001318
Recipient Legal Entity Name	Mobile, Alabama
Recipient Type	
FAIN	
CFDA No./Assistance Listing	
Recipient Address	205 Government Street
Recipient Address 2	

Account Users	
Account Administrator	Laura Angle
Account Administrator Title	Grants Compliance Manager
Account Administrator Email Address	laura.angle@cityofmobile.org (mailto:laura.angle@cityofmobile.org)
Account Administrator Phone	251-208-6854 (tel:251-208-6854)
Point of Contact for Reporting	Laura Angle
Point of Contact for Reporting Title	Grants Compliance Manager

Recipient Address 3	
Recipient City	Mobile
Recipient State/Territory	AL
Recipient Zip5	36644
Recipient Zip+4	
Recipient Reporting Tier	

Point of Contact for Reporting Email Address	laura.angle@cityofmobile.org (mailto:laura.angle@cityofmobile.org)
Point of Contact for Reporting Phone	251-208-6854 (tel:251-208-6854)
Authorized Representative for Reporting	William Stimpson
Authorized Representative for Reporting Title	Mayor
Authorized Representative for Reporting Email Address	mayorstimpson@cityofmobile.org (mailto:mayorstimpson@cityofmobile.org)
Authorized Representative for Reporting Phone	251-208-7395 (tel:251-208-7395)

Please report discrepancies (if any) on the above information

Show Point of Contact List ✓

Point of Contact List

	Name	Title	Phone	Email
1	LAURA ANGLE	Grants Compliance ...	(251) 208-6854 (tel:...	✉ laura.angle@cityofmobile.org
2	William Stimpson	Mayor	(251) 208-7395 (tel:...	✉ mayorstimpson@cityofmobile.org

Save

Next

- Recipient Profile
- Expenditure Summary**
- Revenue Replacement
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Interim Report



Step 1

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EXPENDITURE SUMMARY LEVEL INFORMATION

Instructions

States, U.S. Territories, Metropolitan cities, Counties, and Tribes are required to submit a one-time interim report with expenditures by category at the summary level from the date of award to July 31, 2021. The recipient will be required to enter obligations and expenditures for each expenditure category.

Category Funding Information

1. Expenditure Category: Public Health

Category	Cumulative Obligations to date	Cumulative Expenditures to date
1.1 COVID-19 Vaccination	\$0.00	\$0.00
1.2 COVID-19 Testing	\$0.00	\$0.00
1.3 COVID-19 Contact Tracing	\$0.00	\$0.00
1.4 Prevention in Congregate Settings (Nursing Homes, Prisons/Jails, Dense Work Sites, Schools, etc.)	\$0.00	\$0.00

1.5 Personal Protective Equipment <small>Your changes have been saved.</small>	\$0.00	\$0.00
1.6 Medical Expenses (including Alternative Care Facilities)	\$0.00	\$0.00
1.7 Capital Investments or Physical Plant Changes to Public Facilities that respond to the COVID-19 public health emergency	\$0.00	\$0.00
1.8 Other COVID-19 Public Health Expenses (including Communications, Enforcement, Isolation/Quarantine)	\$0.00	\$0.00
1.9 Payroll Costs for Public Health, Safety, and Other Public Sector Staff Responding to COVID-19	\$0.00	\$0.00
1.10 Mental Health Services	\$0.00	\$0.00
1.11 Substance Use Services	\$0.00	\$0.00
1.12 Other Public Health Services	\$0.00	\$0.00

2. Expenditure Category: Negative Economic Impacts

Category	Cumulative Obligations to date	Cumulative Expenditures to date
2.1 Household Assistance: Food Programs	\$0.00	\$0.00
2.2 Household Assistance: Rent, Mortgage, and Utility Aid	\$0.00	\$0.00
2.3 Household Assistance: Cash Transfers	\$0.00	\$0.00
2.4 Household Assistance: Internet Access Programs	\$0.00	\$0.00
2.5 Household Assistance: Eviction Prevention	\$0.00	\$0.00
2.6 Unemployment Benefits or Cash Assistance to Unemployed Workers	\$0.00	\$0.00
2.7 Job Training Assistance (e.g., Sectoral job-training, Subsidized Employment, Employment Supports or Incentives)	\$0.00	\$0.00

2.8 Contributions to UI Trust Funds <small>Your changes have been saved.</small>	\$0.00	\$0.00
2.9 Small Business Economic Assistance (General)	\$0.00	\$0.00
2.10 Aid to nonprofit organizations	\$0.00	\$0.00
2.11 Aid to Tourism, Travel, or Hospitality	\$0.00	\$0.00
2.12 Aid to Other Impacted Industries	\$0.00	\$0.00
2.13 Other Economic Support	\$0.00	\$0.00
2.14 Rehiring Public Sector Staff	\$0.00	\$0.00

3. Expenditure Category: Services to Disproportionately Impacted Communities

Category	Cumulative Obligations to date	Cumulative Expenditures to date
3.1 Education Assistance: Early Learning	\$0.00	\$0.00
3.2 Education Assistance: Aid to High-Poverty Districts	\$0.00	\$0.00
3.3 Education Assistance: Academic Services	\$0.00	\$0.00
3.4 Education Assistance: Social, Emotional, and Mental Health Services	\$0.00	\$0.00
3.5 Education Assistance: Other	\$0.00	\$0.00
3.6 Healthy Childhood Environments: Child Care	\$0.00	\$0.00
3.7 Healthy Childhood Environments: Home Visiting	\$0.00	\$0.00
3.8 Healthy Childhood Environments: Services to Foster Youth or Families Involved in Child Welfare System	\$0.00	\$0.00
3.9 Healthy Childhood Environments: Other	\$0.00	\$0.00
3.10 Housing Support: Affordable Housing	\$0.00	\$0.00
3.11 Housing Support: Services for Unhoused persons	\$0.00	\$0.00

3.12 Housing Support: Community Housing Assistance	\$0.00	\$0.00
3.13 Social Determinants of Health: Other	\$0.00	\$0.00
3.14 Social Determinants of Health: Community Health Workers or Benefits Navigators	\$0.00	\$0.00
3.15 Social Determinants of Health: Lead Remediation	\$0.00	\$0.00
3.16 Social Determinants of Health: Community Violence Interventions	\$0.00	\$0.00

4. Expenditure Category: Premium Pay

Category	Cumulative Obligations to date	Cumulative Expenditures to date
4.1 Public Sector Employees	\$0.00	\$0.00
4.2 Private Sector: Grants to other employers	\$0.00	\$0.00

5. Expenditure Category: Infrastructure

Category	Cumulative Obligations to date	Cumulative Expenditures to date
5.1 Clean Water: Centralized wastewater treatment	\$0.00	\$0.00
5.2 Clean Water: Centralized wastewater collection and conveyance	\$0.00	\$0.00
5.3 Clean Water: Decentralized wastewater	\$0.00	\$0.00
5.4 Clean Water: Combined sewer overflows	\$0.00	\$0.00
5.5 Clean Water: Other sewer infrastructure	\$0.00	\$0.00
5.6 Clean Water: Stormwater	\$0.00	\$0.00
5.7 Clean Water: Energy conservation	\$0.00	\$0.00
5.8 Clean Water: Water conservation	\$0.00	\$0.00

5.9 Clean Water: Nonpoint source <small>Your changes have been saved.</small>	<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>
5.10 Drinking water: Treatment	<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>
5.11 Drinking water: Transmission & distribution	<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>
5.12 Drinking water: Transmission & distribution: lead remediation	<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>
5.13 Drinking water: Source	<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>
5.14 Drinking water: Storage	<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>
5.15 Drinking water: Other water infrastructure	<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>
5.16 Broadband: "Last Mile" projects	<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>
5.17 Broadband: Other projects	<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>

6. Expenditure Category: Revenue Replacement

Category	Cumulative Obligations to date	Cumulative Expenditures to date
6.1 Provision of Government Services	<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>

7. Expenditure Category: Administrative and Other

Category	Cumulative Obligations to date	Cumulative Expenditures to date
7.1 Administrative Expenses	<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>
7.2 Evaluation and data analysis	<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>
7.3 Transfers to Other Units of Government	<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>

Cumulative Amounts to Date, excluding NEU and Non-UGLG transfers.

Saving...
Your changes have been saved.

Total Cumulative Obligations to Date	Total Cumulative Expenditures to Date
\$0.00	\$0.00

7. Expenditure Category: Recipient Allocation

Category	Cumulative Obligations to date	Cumulative Expenditures to date
7.5 Transfers to Non-UGLGs	\$0.00	\$0.00

Cumulative Amounts to Date, for NEU and Non-UGLG transfers only.

Total Cumulative Obligations to Date	Total Cumulative Expenditures to Date
\$0.00	\$0.00

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Contacts (/cares/s/contact/Contact/00Bt000000165Q8EAI)



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Interim Report



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REVENUE REPLACEMENT

Instructions

Please provide identifying information for revenue replacement funding. Recipients must calculate the reduction in their general revenue using information as-of December 31, 2020 for loss due to the Covid-19 public health emergency. The formula for calculation is found in the Interim Final Rule as of May 17, 2021.

Revenue Replacement Key Inputs

* (required) Base Year Revenue ●

* (required) Fiscal Year End Date ●

* (required) Growth Adjustment Used ●

* (required) Actual General Revenue as of 12 months ended December 31, 2020

* (required) Estimated Revenue Loss Due to Covid-19 Public Health Emergency as of December 31, 2020

*(required) Were Fiscal Recovery Funds used to make a deposit into a pension fund?

No ▼

*(required) Please provide an explanation of how revenue replacement funds were allocated to government services

Explanation

Salesforce Sans

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Official Certification

I certify that the information provided is accurate and complete after reasonable inquiry of people, systems, and other information available to the SLFRF recipient. The undersigned acknowledges that any materially false, fictitious, fraudulent statement, or representation (or concealment or omission of a material fact) in this submission may be the subject of criminal prosecution under the False Statements Accountability Act of 1996, as amended, 18 USC 1001, and also may subject me and the SLFRF Recipient to civil penalties, damages, and administrative remedies for false claims or otherwise (including under 31 USC 3729 et seq.) The undersigned is an authorized representative of the SLFRF Recipient with authority to make the above certifications and representations on behalf of the SLFRF Recipient.

By signing this report, the Authorized Representative for Reporting acknowledges in accordance with 31 CFR 35.4(c) that recipients shall provide to the Secretary periodic reports providing detailed accounting of the uses of funds, as applicable, all modifications to a State's or Territory's tax revenue sources, and such other information as the Secretary may require for the administration of this program. In addition to regular reporting requirements, the Secretary may request other additional information as may be necessary or appropriate, including as may be necessary to prevent evasions of the requirements of this program. False statements or claims made to the Secretary may result in criminal, civil, or administrative sanctions, including fines, imprisonment, civil damages and penalties, debarment from participating in Federal awards or contracts, and/or any other remedy available by law.

Name and Title of Certifying Official

Name:

LAURA ANGLE

Telephone:

(251) 208-6854 (tel:(251) 208-6854)

Introduction

Submissions & Compliance Forms

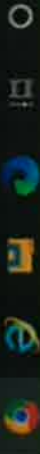
Submissions

Submission ID	Submission Type	Recipient Name	Status
SLI-0994	SLT	City of Mobile	Submitted

Compliance

No current forms.

Type here to search



HAF Plan Submissions

Submission ID Recipient Name Recipient Type Status

Report Selection

No.	Report Type	Assistance Listing No./ CFTA No.	Report Name	Report Period	Submission Deadline	Status
1	SLFRF - In-terim Report	21.027	SLT-0994 - Interim Re-port - 2021		8/31/2021	Submitted

