

ARPA Fiscal Recovery Fund (FRF) Obligation Questionnaire Checklist

Please fill out this checklist and submit all referenced documentation to [XXXX](#) by Month, Date, 2024

Grant Information and Amounts

<i>Agency Name</i>	
<i>Grant Project Code/Project Name</i>	
<i>Project Beginning and Ending Dates (including any extension/amendment)</i>	
<i>Amount Distributed to Agency</i>	
<i>Total Expenditures to date</i>	
<i>Total Obligations to date</i>	

Questions – Recipient Agency/Organization to Complete

1. Please describe how funds have been obligated for this project (grant agreement, subrecipient agreement, beneficiary agreement, contract, purchase order, interagency agreement, etc).		
2. Have all grant, subaward, beneficiary agreements been executed?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If not, please describe award timeline.
3. Describe monitoring of recipients (reports, communications, etc). Provide your monitoring plan for this funding.		
4. Have all contracts funded with this award been executed?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If not, please describe procurement timeline.
5. If obligations have been made using interagency agreements, have they been reviewed to insure they meet the standards established by Treasury FAQ 17.6	Yes <input type="checkbox"/> No <input type="checkbox"/>	If not, please describe process and timeline for completion.

6.. Are there administrative costs associated with this award?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	If yes, please provide total administrative costs budgeted.
7. Do you anticipate having unspent funds, either programmatic or administrative?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, please estimate amount of unspent funds.

Name of Agency/Organization Staff Completing Form _____

E-Mail _____

Telephone # _____