State of California Department of Finance

Coronavirus Relief Fund Reporting

Review and Finalize

General Information

DUNS Number

37559127

Project Information

Project Name

Distance Learning (Community Colleges)

Entity Name Santa Clarita Community College District

Status of Project Completion

Fully completed

Total Allocated \$ 801,150 Total Interest Earned on CRF \$ 0

Total Estimated Pandemic Response Costs \$ 10,000,000 **Reporting Cycle/Period** Cycle 3: 10/1/2020 -12/31/2020

Transfer Information

Transfer Type Advance Transfer **Date of Transfer** 08/31/2020

Amounts by Category

		Cycle 3: 10/1/2020 - 12/31/2020					
	Expenses By Category	Cumulative Expenditures (Prior Cycles)	Expenditure Adjustments (+/-) (Prior Cycles)	Expenditures (Accrual basis - liability)	Total, Cumulative Expenditures		
A	Administrative Expenses	\$0	\$0	\$0	\$(
В	Budgeted Personnel and Services Diverted to a Substantially Different Use	\$0	\$0	\$0	\$(
С	COVID-19 Testing and Contact Tracing	\$0	\$0	\$0	\$(
D	Economic Support (Other than Small Business, Housing, and Food Assistance)	\$5,275	\$0	\$0	\$5,27		
E	Expenses Associated with the Issuance of Tax Anticipation Notes	\$0	\$0	\$0	\$(
F	Facilitating Distance Learning	\$337,135	\$0	\$67,898	\$405,033		
G	Food Programs	\$0	\$0	\$200,000	\$200,000		
Н	Housing Support	\$0	\$0	\$100,000	\$100,000		
I	Improve Telework Capabilities of Public Employees	\$0	\$0	\$0	\$(
J	Medical Expenses	\$0	\$0	\$0	\$(
К	Nursing Home Assistance	\$0	\$0	\$0	\$		
L	Payroll for Public Health and Safety Employees	\$0	\$0	\$0	\$		
М	Personal Protective Equipment	\$0	\$0	\$0	\$(
N	Public Health Expenses	\$90,842	\$0	\$0	\$90,842		
0	Small Business Assistance	\$0	\$0	\$0	\$		
Ρ	Unemployment Benefits	\$0	\$0	\$0	\$		
Q	Workers Compensation	\$0	\$0	\$0	\$		

Amounts by Category (Continued)

					Obligations: \$0 Total: \$801,150 Max Spend: \$801,150
	Grand Total A-R	\$433,252	\$0	\$367,898	\$801,150 Remaining
	Subtotal R1 - R10	\$0	\$0	\$0	\$C
	Subtotal A - Q	\$433,252	\$0	\$367,898	\$801,150
R10		\$0	\$0	\$0	\$0
R9		\$0	\$0	\$0	\$(
R8		\$0	\$0	\$0	\$(
R7		\$0	\$0	\$0	\$(
R6		\$0	\$0	\$0	\$0
R5		\$0	\$0	\$0	\$0
R4		\$0	\$0	\$0	\$0
R3		\$0	\$0	\$0	\$0
R2		\$0	\$0	\$0	\$0
R1		\$0	\$0	\$0	\$(

 \boxdot I am authorized by my employer, a recipient of federal Coronavirus Relief Funds (CRF) allocated by the State, to submit this expenditure report to the State. I have reviewed the data in the CRF Reporting portal. I certify this report is accurate and consistent with U.S. Treasury Guidance for expenditure of these funds.

Certify and Submit Record Back to Home Page

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