

## American Recovery and Reinvestment Act Monthly Report

**Deadline:** The 3<sup>rd</sup> of each month, starting November 3, 2009.

Submit completed report via email to [elaine.mariner@state.co.us](mailto:elaine.mariner@state.co.us)

**Grantee Information:**

Organization Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Contact Name \_\_\_\_\_

Contact Title \_\_\_\_\_ Telephone \_\_\_\_\_

Contact Email \_\_\_\_\_

Month \_\_\_\_\_

Total ARRA-supported hours worked this month \_\_\_\_\_

ARRA-supported Job and Contract Position titles this month (e.g. 1 Executive Director, 3 Musicians, 1 Administrator)

\_\_\_\_\_

Amount of ARRA Grant expended this month \$ \_\_\_\_\_

**Narrative:**

Briefly describe employee/contractor's duties during this month. Specifically name activities the organization was able to continue or undertake because this position was restored or retained.

**CERTIFICATION** of Authorized Official

The undersigned certifies that the information contained in this report is true and correct to the best of his or her knowledge and that all expenditures were incurred solely for the purpose of this grant.

Name \_\_\_\_\_ Title \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_