# **Recipient Profile**

#### **Recipient Information**

|  | 1   |
|--|---|
| Recipient UEI  | P3ZVJZH8P1M2  |
| Recipient TIN  | 516000279   |
| Recipient Legal Entity Name                                    | State Of Delaware   |
| Recipient Type   | State or Territory  |
| FAIN   |   |
| CFDA No./Assistance Listing                                    |   |
| Recipient Address  | 122 Martin Luther King, Jr. Blvd. S   |
| Recipient Address 2  |   |
| Recipient Address 3  |   |
| Recipient City   | Dover   |
| Recipient State/Territory                                      | DE  |
| Recipient Zip5   | 19901   |
| Recipient Zip+4  |   |
| Recipient Reporting Tier                                       | Tier 1. States, U.S. territories, metropolitan cities and counties with a population that exceeds 250,000 residents |
| Base Year Fiscal Year End Date                                 | 6/30/2019   |
| Discrepancies Explanation                                      |   |
| Who approves the budget in your jurisdiction?                  | Legislature   |
| Is your budget considered executed at the point of obligation? | Yes   |
| Is the Recipient Registered in SAM.Gov?                        | Yes   |

# **Project Overview**

# Project Name: DOJ GVI Safer Delaware

| Project Identification Number   | 20126  |
|---|--|
| Project Expenditure Category  | 1-Public Health  |
| Project Expenditure Subcategory   | 1.11-Community Violence Interventions  |
| Status To Completion  | Completed less than 50%  |
| Adopted Budget  | \$280,314.00   |
| Total Cumulative Obligations  | \$117,196.85   |
| Total Cumulative Expenditures   | \$117,196.85   |
| Current Period Obligations  | \$22,041.07  |
| Current Period Expenditures   | \$22,041.07  |
| Project Description   | Safer Delaware Fund ARPA funding will be used to respond<br>to the public health emergency of community gun violence,<br>exacerbated across the State of Delaware by the<br>co-occurring and ongoing COVID-19 pandemic. The Safer<br>Delaware Fund is a proposed grant program to be<br>administered statewide through a partnership between the<br>Governor's Family Services Cabinet Council, including the<br>Department of Health and Social Services, and the Delaware<br>Criminal Justice Council. |
| Does this project include a capital expenditure?  | No   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$280,314.00   |
| Is a program evaluation of the project being conducted?   | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 3 Imp HHs that experienced unemployment  |
| Secondary Impacted and/or Disproportionately Impacted populations   | 4 Imp HHs that experienced increased food or housing insecurity  |
| Tertiary Impacted and/or Disproportionately Impacted populations  | 1 Imp General Public   |
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Safer Delaware Fund ARPA funding will be used to respond<br>to the public health emergency of community gun violence,<br>exacerbated across the State of Delaware by the<br>co-occurring and ongoing COVID-19 pandemic. The Safer<br>Delaware Fund is a proposed grant program to be<br>administered statewide through a partnership between the<br>Governor's Family Services Cabinet Council, including the<br>Department of Health and Social Services, and the Delaware<br>Criminal Justice Council. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Department of Justice review of the project and proposals<br>contained within to ensure the outcomes and focus is related<br>to the pandemic.  |

### Project Name: DOC GVI Safer Delaware

| Project Identification Number   | 20121   |
|---|---|
| Project Expenditure Category  | 1-Public Health   |
| Project Expenditure Subcategory   | 1.11-Community Violence Interventions   |
| Status To Completion  | Completed 50% or more   |
| Adopted Budget  | \$84,025.00   |
| Total Cumulative Obligations  | \$49,175.60   |
| Total Cumulative Expenditures   | \$49,175.60   |
| Current Period Obligations  | \$15,039.80   |
| Current Period Expenditures   | \$15,039.80   |
| Project Description   | The project, Safer Delaware Fund, will use ARPA funding<br>to respond to the public health emergency of community gun<br>violence, exacerbated across the State of Delaware by the<br>co-occurring and ongoing COVID-19 pandemic. The Safer<br>Delaware Fund is a proposed grant program to be<br>administered statewide through a partnership between the<br>Governors Family Services Cabinet Council, including the<br>Department of Health and Social Services, and the Delaware<br>Criminal Justice Council. |
| Does this project include a capital expenditure?  | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$84,025.00   |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Addressing causes and motivations for gun violence in prison populations.   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Delaware's Department of Justice reviews all projects for<br>eligibility. Projects are then awarded based on quantifiable<br>needs and deficiencies of service within the State. Busing:<br>Will assist offenders in the community by providing<br>transportation to probation appointments and treatment<br>sessions/appointments, thus increasing compliance and<br>reducing violations of probation. Hotel: Will be able to<br>provide emergency housing which can reduce the possibility<br>of incarceration. |

#### Project Name: DSCYF GVI Safer Delaware

| Project Identification Number   | 20125                                 |
|---------------------------------|---------------------------------------|
| Project Expenditure Category    | 1-Public Health                       |
| Project Expenditure Subcategory | 1.11-Community Violence Interventions |
| Status To Completion            | Completed less than 50%               |
| Adopted Budget                  | \$166,310.00                          |
|                                 |                                       |

| Total Cumulative Obligations  | \$108,678.58   |
|---|--|
| Total Cumulative Expenditures   | \$108,678.58   |
| Current Period Obligations  | \$34,749.05  |
| Current Period Expenditures   | \$34,749.05  |
| Project Description   | The project, Safer Delaware Fund, will use ARPA funding<br>to respond to the public health emergency of community gun<br>violence, exacerbated across the State of Delaware by the<br>co-occurring and ongoing COVID-19 pandemic. The Safer<br>Delaware Fund is a proposed grant program to be<br>administered statewide through a partnership between the<br>Governor's Family Services Cabinet Council, including the<br>Department of Health and Social Services, and the Delaware<br>Criminal Justice Council. |
| Does this project include a capital expenditure?  | No   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$73,929.53  |
| Is a program evaluation of the project being conducted?   | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Secondary Impacted and/or Disproportionately Impacted populations   | 2 Imp Low or moderate income HHs or populations  |
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | To respond to the public health emergency of community<br>gun violence, exacerbated across the State of Delaware by<br>the co-occurring and ongoing COVID-19 pandemic. The<br>Safer Delaware Fund is a proposed grant program to be<br>administered statewide through a partnership between the<br>Governor¿s Family Services Cabinet Council, including the<br>Department of Health and Social Services, and the Delaware<br>Criminal Justice Council.  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Thorough department of justice review to ensure the project<br>scope is eligible in relation to ARPA regulations and that it<br>addresses a need within the community.   |
| Does the project prioritize local hires?  | No   |
| Does the project have a Community Benefit Agreement, with a description of any such agreement?  | No   |

# Project Name: DHSS Emer Housing Adams St.

| Project Identification Number   | 20366   |
|---------------------------------|---|
| Project Expenditure Category    | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory | 2.17-Housing Support: Housing Vouchers and Relocation<br>Assistance for Disproportionately Impacted Communities |
| Status To Completion            | Completed   |
| Adopted Budget                  | \$179,975.00  |
| Total Cumulative Obligations    | \$178,875.00  |
| Total Cumulative Expenditures   | \$178,875.00  |
|                                 |   |

| Current Period Obligations  | \$0.00  |
|---|---|
| Current Period Expenditures   | \$0.00  |
| Project Description   | During the pandemic, Delaware citizens including many<br>families with children became homeless because of a variety<br>of reasons including eviction, inability to pay rent or<br>utilities, lack of available housing stock, lack of shelter<br>space, and lack of other state or federal supports to enter<br>permanent housing. |
| Does this project include a capital expenditure?  | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00  |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 4 Imp HHs that experienced increased food or housing insecurity   |
| Secondary Impacted and/or Disproportionately Impacted populations   | 2 Imp Low or moderate income HHs or populations   |
| Tertiary Impacted and/or Disproportionately Impacted populations  | 7 Imp Other HHs or populations that experienced a negative economic   |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | During the pandemic, Delaware citizens including many<br>families with children became homeless because of a variety<br>of reasons including eviction, inability to pay rent or<br>utilities, lack of available housing stock, lack of shelter<br>space, and lack of other state or federal supports to enter<br>permanent housing. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Families became unable to find permanent or even<br>temporary housing as a result of conditions created or<br>exacerbated by the pandemic.  |

### Project Name: OGOV MH DE Psychological

| Project Identification Number   | 19953   |
|---------------------------------|---|
| Project Expenditure Category    | 1-Public Health   |
| Project Expenditure Subcategory | 1.12-Mental Health Services   |
| Status To Completion            | Completed less than 50%   |
| Adopted Budget                  | \$350,000.00  |
| Program Income Earned           | \$0.00  |
| Program Income Expended         | \$0.00  |
| Total Cumulative Obligations    | \$350,000.00  |
| Total Cumulative Expenditures   | \$233,334.00  |
| Current Period Obligations      | \$0.00  |
| Current Period Expenditures     | \$116,667.00  |
|                                 | This project seeks to Improve Post COVID Mental Health<br>Care. The ARPA DPA project includes two components.<br>The first part of the project will be to increase mental health<br>awareness and promote resilience, by creating a series of<br>podcasts/prerecorded webinars on the impact of stress, how |

| Project Description   | to deal with anxious and depressed feelings, and recognizing<br>anxiety, depression, and PTSD, along with some basic<br>self-help strategies. These would be recorded by<br>psychologists, social workers, counselors, and psychiatrists<br>through the DPA program and advertised through 211 and<br>through other mechanisms. Content would be based on some<br>of the programs that have already been developed by DPA in<br>the past year. The second part of the program is to improve<br>the skills of mental health clinicians in providing treatment<br>for post covid stress. Over the three-year period, we propose<br>offering a series of 1 to 3 hour continuing education<br>programs for all mental health clinicians and minimal or no<br>cost to all professions. |
|---|---|
| Does this project include a capital expenditure?  | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$350,000.00  |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Secondary Impacted and/or Disproportionately Impacted populations   | 7 Imp Other HHs or populations that experienced a negative economic   |
| Tertiary Impacted and/or Disproportionately Impacted populations  | 8 Imp SBs that experienced a negative economic impact   |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | This project seeks to Improve Post COVID Mental Health<br>Care. The ARPA DPA project includes two components.<br>The project will firstly increase mental health awareness and<br>promote resilience. The second part of the program is to<br>improve the skills of mental health clinicians in providing<br>treatment for post covid stress.   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Delaware DOJ review of all projects and their relation to the pandemic.   |

# Project Name: OGOV Todmorden Foundation

| Project Identification Number   | 20462  |
|---------------------------------|--|
| Project Expenditure Category    | 2-Negative Economic Impacts  |
| Project Expenditure Subcategory | 2.15-Long-Term Housing Security: Affordable Housing  |
| Status To Completion            | Completed less than 50%  |
| Adopted Budget                  | \$2,750,000.00   |
| Total Cumulative Obligations    | \$2,500,000.00   |
| Total Cumulative Expenditures   | \$850,000.00   |
| Current Period Obligations      | \$0.00   |
| Current Period Expenditures     | \$0.00   |
|                                 | The Todmorden Founation grant is directed to two projects;<br>the Bennett Street Affordable Housing Project (\$2,000,000)<br>and the Flats Phase V Construction Project (\$500,000). The<br>Bennett Street Project is the demolition of 30 |

| Project Description   | vacant/substandard homes and the new construction of 20<br>homes on the East Side of Wilmington. Twelve of these new<br>homes will be available for sale to affordable housing<br>owners, and eight will be rentals for affordable housing<br>tenants. The Flats Phase V Construction Project is the<br>building of 72 new affordable housing apartmenst for rental<br>to senior citizens. This project is located on the<br>Wilmington's west side. |
|---|--|
| Does this project include a capital expenditure?  | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$2,500,000.00   |
| Type of capital expenditures, based on the following enumerated uses  | Affordable housing, supportive housing, or recovery housing  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00   |
| Is a program evaluation of the project being conducted?   | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 2 Imp Low or moderate income HHs or populations  |
| Secondary Impacted and/or Disproportionately Impacted populations   | 14 Dis Imp Low income HHs and populations  |
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Lack of affordable housing is the primary objective of this project.   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA projects are reviewed by the Delaware DOJ for grant eligibility.  |

# Project Name: OGOV MH Limen Recovery

| Project Identification Number  | 20145   |
|--|---|
| Project Expenditure Category   | 1-Public Health   |
| Project Expenditure Subcategory  | 1.12-Mental Health Services   |
| Status To Completion   | Completed   |
| Adopted Budget   | \$1,200,000.00  |
| Total Cumulative Obligations   | \$1,200,000.00  |
| Total Cumulative Expenditures  | \$1,200,000.00  |
| Current Period Obligations   | \$0.00  |
| Current Period Expenditures  | \$0.00  |
| Project Description  | ARPA mental health project for the Purchase of Building for<br>Outpatient Expansion |
| Does this project include a capital expenditure?   | Yes   |
| What is the Total expected capital expenditure, including pre-development costs, if applicable | \$1,200,000.00  |
| Type of capital expenditures, based on the following enumerated uses                           | Behavioral health facilities and equipment  |
|  |   |

| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00  |
|---|---|
| Is a program evaluation of the project being conducted?   | No  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 2 Imp Low or moderate income HHs or populations   |
| Secondary Impacted and/or Disproportionately Impacted populations   | 4 Imp HHs that experienced increased food or housing insecurity   |
| Tertiary Impacted and/or Disproportionately Impacted populations  | 1 Imp General Public  |
| Is a program evaluation of the project being conducted?   | No  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Purchase a building for expanded services   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Delaware DOJ review of all projects for eligiblity and review of service deficiencies within the state. |

# Project Name: OGOV MH BEEBE MOBILE HEALTH

| Project Identification Number  | 19952   |
|--|---|
| Project Expenditure Category   | 1-Public Health   |
| Project Expenditure Subcategory  | 1.12-Mental Health Services   |
| Status To Completion   | Completed less than 50%   |
| Adopted Budget   | \$3,500,000.00  |
| Program Income Earned  | \$219,374.00  |
| Program Income Expended  | \$219,374.00  |
| Total Cumulative Obligations   | \$3,500,000.00  |
| Total Cumulative Expenditures  | \$1,057,846.00  |
| Current Period Obligations   | \$0.00  |
| Current Period Expenditures  | \$0.00  |
| Project Description  | Beebe Healthcare is developing a dynamic program: Mobile<br>Health Clinic with a focus on Mental Health and Addiction<br>Medicine within a Framework of Trauma Informed Care.<br>The initiative aims to expand access to addiction services<br>through mobile health. This mobile health program provides<br>low-threshold, low barrier clinical care and harm reduction<br>services aimed at increasing access to addiction services for<br>people at high risk. |
| Does this project include a capital expenditure?   | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions | \$3,500,000.00  |
| Is a program evaluation of the project being conducted?  | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?                                | 2 Imp Low or moderate income HHs or populations   |
| Secondary Impacted and/or Disproportionately Impacted  | 4 Imp HHs that experienced increased food or housing  |

| populations   | insecurity  |
|---|---|
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | In responding to the public health impacts of the public<br>health emergency, Beebe Healthcare, with the DE ARPA<br>grant support, is implementing an expanded Mental Health<br>and Substance Use Disorder program to expand services<br>available in Sussex County. The COVID-19 pandemic has<br>had a significant impact on the mental health and well-being<br>of our communities, particularly among community<br>members who have been disproportionaly impacted due to<br>economic and social conditions. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Delaware DOJ review of all ARPA project applications.   |

### Project Name: OGOV MH Supporting Kidds

| Project Identification Number   | 20178  |
|---|--|
| Project Expenditure Category  | 1-Public Health  |
| Project Expenditure Subcategory   | 1.12-Mental Health Services  |
| Status To Completion  | Completed less than 50%  |
| Adopted Budget  | \$150,000.00   |
| Total Cumulative Obligations  | \$150,000.00   |
| Total Cumulative Expenditures   | \$150,000.00   |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$70,900.00  |
| Project Description   | Individual counseling and grief support groups at The Center<br>for Grieving Children and community site locations.<br>Training for staff. |
| Does this project include a capital expenditure?  | No   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$150,000.00   |
| Is a program evaluation of the project being conducted?   | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Individual Grief Counseling Sustainability & Expansion and<br>Grief<br>Groups in schools.  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Delaware DOJ review of all ARPA project submissions for eligibility.   |
|   |  |

# Project Name: OGOV MH Hope Commission

| Project Identification Number | 20460           |
|-------------------------------|-----------------|
| Project Expenditure Category  | 1-Public Health |
|                               |                 |

| Project Expenditure Subcategory   | 1.12-Mental Health Services  |
|---|--|
| Status To Completion  | Completed less than 50%  |
| Adopted Budget  | \$1,000,000.00   |
| Total Cumulative Obligations  | \$1,000,000.00   |
| Total Cumulative Expenditures   | \$918,700.00   |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | o The HOPE Commission (HC) is Delaware's premier<br>correctional reentry program. It provides comprehensive<br>reentry support services that target crime-causing factors,<br>shown to be predictors of recidivism, for formerly<br>incarcerated high-risk men leaving prison and returning to<br>distressed communities. HC provides rehabilitative<br>treatment services and programs designed to promote<br>successful reentry based on research-informed solutions.<br>Risk and needs assessments, cognitive-behavioral therapies,<br>vocational readiness training, educational peer support,<br>behavioral health services, and family–reunification<br>programs are utilized to reduce recidivism and improve<br>safety in the State of Delaware. |
| Does this project include a capital expenditure?  | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$870,000.00   |
| Type of capital expenditures, based on the following enumerated uses  | Affordable housing, supportive housing, or recovery housing  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00   |
| Is a program evaluation of the project being conducted?   | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Secondary Impacted and/or Disproportionately Impacted populations   | 2 Imp Low or moderate income HHs or populations  |
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Renovation of exisiting building to establish the Dover Hope<br>Zone initative   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All projects are reviewed by Delaware Department of Justice of rEligibility  |

# Project Name: OGOV MH Love & Hope Rescue

| Project Identification Number   | 20490                       |
|---------------------------------|-----------------------------|
| Project Expenditure Category    | 1-Public Health             |
| Project Expenditure Subcategory | 1.12-Mental Health Services |
| Status To Completion            | Completed less than 50%     |
| Adopted Budget                  | \$500,000.00                |
|                                 |                             |

| Total Cumulative Obligations  | \$500,000.00   |
|---|--|
| Total Cumulative Expenditures   | \$250,000.00   |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | Still Hope Mental Health Program   |
| Does this project include a capital expenditure?  | No   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$250,000.00   |
| Is a program evaluation of the project being conducted?   | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 2 Imp Low or moderate income HHs or populations  |
| Secondary Impacted and/or Disproportionately Impacted populations   | 1 Imp General Public   |
| Tertiary Impacted and/or Disproportionately Impacted populations  | 4 Imp HHs that experienced increased food or housing insecurity  |
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Develop curriculum for community classes on the topics of<br>mental health, educational training, medication control,<br>self-confidence, and rehabilitation. Deploy services to<br>underserved communities with mobile vans. Complete<br>baseline assessment of community courses (re)design. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Delaware DOJ review of all ARPA projects for eligibility.  |

# Project Name: OGOV MH Gamma Theta Lambda

| Project Identification Number  | 19951  |
|--|--|
| Project Expenditure Category   | 1-Public Health  |
| Project Expenditure Subcategory  | 1.12-Mental Health Services  |
| Status To Completion   | Not Started  |
| Adopted Budget   | \$200,000.00   |
| Total Cumulative Obligations   | \$200,000.00   |
| Total Cumulative Expenditures  | \$100,000.00   |
| Current Period Obligations   | \$0.00   |
| Current Period Expenditures  | \$0.00   |
| Project Description  | Gamma Theta Lambda Education Foundation, Inc. is<br>looking to purchase a property that will act as a resource<br>center to provide mental health and other community<br>services. This center will bring great support for those in<br>need, especially those impacted by the pandemic. |
| Does this project include a capital expenditure?   | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable | \$200,000.00   |
| Type of capital expenditures, based on the following   |  |

#### Project Name: OGOV Wilmington Land Bank

| Project Identification Number   | 19942   |
|---|---|
| Project Expenditure Category  | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory   | 2.15-Long-Term Housing Security: Affordable Housing   |
| Status To Completion  | Completed less than 50%   |
| Adopted Budget  | \$4,500,000.00  |
| Total Cumulative Obligations  | \$4,500,000.00  |
| Total Cumulative Expenditures   | \$3,000,000.00  |
| Current Period Obligations  | \$0.00  |
| Current Period Expenditures   | \$0.00  |
| Project Description   | The Wilmington Neighborhood Conservancy Land Bank's<br>(WNCLB) East Side Initiative consists of an aggressive plan<br>to address the significant blight surrounding the Bancroft<br>School. With a combination of vacant property rehabs for<br>homeownership, strategic acquisitions, and demolition of<br>unsafe structures, WNCLB will revitalize the East Side<br>neighborhood and restore safety to the community. WNCLB<br>has also established sound partnerships and project<br>coordination with the City of Wilmington, Habitat for<br>Humanity, Woodlawn Trustees, Wilmington Housing<br>Authority and Central Baptist CDC-an unprecedented level<br>of nonprofit and public entity cooperation. |
| Does this project include a capital expenditure?  | Yes   |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$4,500,000.00  |
| Type of capital expenditures, based on the following enumerated uses  | Affordable housing, supportive housing, or recovery housing   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00  |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 14 Dis Imp Low income HHs and populations   |
| Secondary Impacted and/or Disproportionately Impacted populations   | 15 Dis Imp HHs and populations residing in Qualified<br>Census Tracts   |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Approximately 12 utilizing SLFRF funds and an additional 40 with WNCLB's supplemental East Side project.  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Delaware Department of Justice review of all ARPA project applications.   |

#### **Project Name: DSHA Accelerator Fund**

Project Identification Number 20159

| Project Expenditure Category   | 2-Negative Economic Impacts   |
|--|---|
| Project Expenditure Subcategory  | 2.15-Long-Term Housing Security: Affordable Housing   |
| Status To Completion   | Not Started   |
| Adopted Budget   | \$10,300,000.00   |
| Total Cumulative Obligations   | \$0.00  |
| Total Cumulative Expenditures  | \$0.00  |
| Current Period Obligations   | \$0.00  |
| Current Period Expenditures  | \$0.00  |
| Project Description  | ARPA funding for its Affordable Housing Accelerator Fund (AHAF) to fund the Mixed Income Market Fund and costs related thereto, (the "MIMF"). The project will provide subsidy to encourage market rate developers to provide units affordable to residents at 65% AMI in market rate rental developments that have been approved by local jurisdictions or are already under construction. Specifically, DSHA will offer with the MIMF a subsidy of up to \$150,000/unit for an agreement to income restrict the units for 15 years from the issuance of the certificate of occupancy, with rents restricted to no greater than 30% of 65% of AMI. |
| Does this project include a capital expenditure?   | Yes   |
| What is the Total expected capital expenditure, including pre-development costs, if applicable | \$9,000,000.00  |
| Type of capital expenditures, based on the following enumerated uses                           | Affordable housing, supportive housing, or recovery housing   |

# Project Name: DSHA Catalyst Fund

| Project Identification Number                             | 20172   |
|---|---|
| Project Expenditure Category                              | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory                           | 2.15-Long-Term Housing Security: Affordable Housing   |
| Status To Completion                                      | Completed less than 50%   |
| Adopted Budget  | \$13,025,000.00   |
| Total Cumulative Obligations                              | \$225,000.00  |
| Total Cumulative Expenditures                             | \$225,000.00  |
| Current Period Obligations                                | \$0.00  |
| Current Period Expenditures                               | \$0.00  |
| Project Description                                       | The CF will be available to provide subsidy to rehabilitate<br>vacant and blighted properties for sale to homebuyers,<br>focusing on Qualified Census Tracts and DSHA's identified<br>Strong Neighborhood Housing Fund communities. CF will<br>be available statewide in selected communities on a rolling<br>application basis in partnership with Cinnaire, a non-profit<br>Loan Fund Service Provider ("LFSP"), which will issue<br>construction loans to developers rehabilitating vacant and<br>blighted properties. |
| Does this project include a capital expenditure?          | Yes   |
| What is the Total expected capital expenditure, including |   |

| pre-development costs, if applicable  | \$23,000,000.00   |
|---|---|
| Type of capital expenditures, based on the following enumerated uses  | Affordable housing, supportive housing, or recovery housing   |
| Capital Expenditure Justification   | The CF will be available to provide subsidy to rehabilitate<br>vacant and blighted properties for sale to homebuyers,<br>focusing on Qualified Census Tracts and DSHA's identified<br>Strong Neighborhood Housing Fund communities. CF will<br>be available statewide in selected communities on a rolling<br>application basis in partnership with Cinnaire, a non-profit<br>Loan Fund Service Provider ("LFSP"), which will issue<br>construction loans to developers rehabilitating vacant and<br>blighted properties. |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00  |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 2 Imp Low or moderate income HHs or populations   |
| Secondary Impacted and/or Disproportionately Impacted populations   | 1 Imp General Public  |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | \$20 million in ARPA funding to fund the Catalyst Fund (the "CF") vacancy and blight homeownership initiative.  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA project proposals are reviewed by Delaware's<br>Dept of Justice to determine ARPA SLFRF eligibility based<br>on SLFRF guidance and final rule. All projects are reviewed<br>and selected based on service needs or limits within the<br>state.   |
| Does the project prioritize local hires?  | Yes   |
| Does the project have a Community Benefit Agreement, with a description of any such agreement?  | No  |

### Project Name: DSHA Market Pressure Relief

| Project Identification Number   | 20263   |
|---------------------------------|---|
| Project Expenditure Category    | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory | 2.15-Long-Term Housing Security: Affordable Housing   |
| Status To Completion            | Completed less than 50%   |
| Adopted Budget                  | \$9,900,000.00  |
| Total Cumulative Obligations    | \$9,900,000.00  |
| Total Cumulative Expenditures   | \$9,900,000.00  |
| Current Period Obligations      | \$0.00  |
| Current Period Expenditures     | \$0.00  |
|                                 | DSHA ARPA funds to support Market Pressure Relief Fund<br>created by the Delaware Division of Small Business and<br>Office of Management and Budget that will provide |
| Project Description             |   |

|   | assistance to state contractors who are working on affordable<br>housing projects and facing increased construction costs due<br>to the COVID-19 pandemic.  |
|---|---|
| Does this project include a capital expenditure?  | Yes   |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$8,000,000.00  |
| Type of capital expenditures, based on the following enumerated uses  | Affordable housing, supportive housing, or recovery housing   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00  |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 2 Imp Low or moderate income HHs or populations   |
| Secondary Impacted and/or Disproportionately Impacted populations   | 1 Imp General Public  |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | \$9,908,842 to support the Market Pressure Relief Fund (the MPRF).  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA project proposals are reviewed by Delaware's<br>Dept of Justice to determine ARPA SLFRF eligibility based<br>on SLFRF guidance and final rule. All projects are reviewed<br>and selected based on service needs or limits within the<br>state. |

### Project Name: DSHA Rent Reporting

| Project Identification Number  | 20158   |
|--|---|
| Project Expenditure Category   | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory  | 2.2-Household Assistance: Rent, Mortgage, and Utility Aid   |
| Status To Completion   | Completed less than 50%   |
| Adopted Budget   | \$220,000.00  |
| Total Cumulative Obligations   | \$220,000.00  |
| Total Cumulative Expenditures  | \$220,000.00  |
| Current Period Obligations   | \$0.00  |
| Current Period Expenditures  | \$0.00  |
| Project Description  | ARPA funding for a Tenant Rent-Reporting Pilot Program<br>("Program") in the amount of \$200,000. The Program will<br>subsidize the cost to report low-income tenants' and housing<br>assistance recipients' rent payments to the major credit<br>bureaus, with the goal of increasing credit scores. The<br>increase in tenants' credit scores will, in turn, position them<br>to purchase homes or move from public housing assistance. |
| Does this project include a capital expenditure?   | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions | \$0.00  |

| Is a program evaluation of the project being conducted?   | Yes   |
|---|---|
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 2 Imp Low or moderate income HHs or populations   |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | ARPA funding for a Tenant Rent-Reporting Pilot Program (Program) in the amount of \$200,000.  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA project proposals are reviewed by Delaware's<br>Dept of Justice to determine ARPA SLFRF eligibility based<br>on SLFRF guidance and final rule. All projects are reviewed<br>and selected based on service needs or limits within the<br>state. |
| Number of households served (by program if recipient establishes multiple separate household assistance programs)   | 0   |

#### **Project Name: DSHA Preservation Fund**

|  | 1   |
|--|---|
| Project Identification Number  | 20163   |
| Project Expenditure Category   | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory  | 2.15-Long-Term Housing Security: Affordable Housing   |
| Status To Completion   | Not Started   |
| Adopted Budget   | \$8,300,000.00  |
| Total Cumulative Obligations   | \$0.00  |
| Total Cumulative Expenditures  | \$0.00  |
| Current Period Obligations   | \$0.00  |
| Current Period Expenditures  | \$0.00  |
| Project Description  | ARPA funding to fund the Affordable Housing Preservation<br>Fund, (the "AHPF"), predominantly in Kent and Sussex<br>Counties. AHPF funds will be used for capital costs of<br>preserving Delaware's existing aging affordable housing<br>portfolio, including acquisition costs of developments,<br>necessary capital expenditure repairs of developments,<br>including but not limited to major systems, structural,<br>environmental, and efficiency improvements. AHPF will<br>also be used to financially restructure developments,<br>including refinancing existing public, private, and/or DSHA<br>debt on developments as necessary to ensure financial<br>sustainability. By utilizing AHPF to pay existing debt on<br>developments as part of acquisition or restructuring, AHPF<br>will promote long term stability of affordable housing<br>projects. |
| Does this project include a capital expenditure?   | Yes   |
| What is the Total expected capital expenditure, including pre-development costs, if applicable | \$9,000,000.00  |
| Type of capital expenditures, based on the following enumerated uses                           | Affordable housing, supportive housing, or recovery housing   |

### **Project Name: DOL Marketing & Communications**

| Project Identification Number | 20802 |
|-------------------------------|-------|
|                               | T     |

| Project Expenditure Category  | 2-Negative Economic Impacts   |
|---|---|
| Project Expenditure Subcategory   | 2.10-Assistance to Unemployed or Underemployed Workers<br>(e.g. job training, subsidized employment, employment<br>supports or incentives)  |
| Status To Completion  | Completed less than 50%   |
| Adopted Budget  | \$2,500,000.00  |
| Total Cumulative Obligations  | \$874,600.00  |
| Total Cumulative Expenditures   | \$344,416.00  |
| Current Period Obligations  | \$487,400.00  |
| Current Period Expenditures   | \$155,686.00  |
| Project Description   | The Delaware Department of Labor, Division of<br>Employment and Training (DET) seeks ARPA funding for<br>Department of Labor seeks \$2.5 million through the<br>American Rescue Plan Act (2021) to assist with the<br>promotion and marketing of the agency's workforce-related<br>programming, in order to help decrease unemployment and<br>focus attention on the resources DOL has to be able to help<br>workers find employment in Delaware. DOL, primarily<br>through its Division of Employment & Training, will<br>highlight the one stop nature of its resources and programs<br>that make assistance much more accessible to individuals<br>seeking help finding career guidance or employment. |
| Does this project include a capital expenditure?  | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00  |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 3 Imp HHs that experienced unemployment   |
| Secondary Impacted and/or Disproportionately Impacted populations   | 2 Imp Low or moderate income HHs or populations   |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | The Delaware Department of Labor, Division of<br>Employment and Training (DET) seeks ARPA funding for<br>Department of Labor seeks \$2.5 million through the<br>American Rescue Plan Act (2021) to assist with the<br>promotion and marketing of the agency's workforce-related<br>programming, in order to help decrease unemployment and<br>focus attention on the resources DOL has to be able to help<br>workers find employment in Delaware. DOL, primarily<br>through its Division of Employment & Training, will<br>highlight the one sto  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA project proposals are reviewed by Delaware's<br>Dept of Justice to determine ARPA SLFRF eligibility based<br>on SLFRF guidance and final rule. All projects are reviewed<br>and selected based on service needs or limits within the<br>state.   |

### Project Name: DEMA Comprehensive School Safety Plan

| Project Identification Number | 20650 |
|-------------------------------|-------|
|                               |       |

| Project Expenditure Category  | 2-Negative Economic Impacts  |
|---|--|
| Project Expenditure Subcategory   | 2.22-Strong Healthy Communities: Neighborhood Features that Promote Health and Safety  |
| Status To Completion  | Completed less than 50%  |
| Adopted Budget  | \$750,000.00   |
| Total Cumulative Obligations  | \$478,700.00   |
| Total Cumulative Expenditures   | \$133,000.00   |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | The Comprehensive School Safety Plan (CSSP) seeks to<br>enhance public safety in all of Delaware's public and charter<br>schools. This funding will be used for the implementation<br>and onboarding of (1) an anonymous reporting system, (2) a<br>behavioral threat model and risk assessment training, and (3)<br>a case management program at all two-hundred and thirty<br>(230) Delaware public and charter schools. |
| Does this project include a capital expenditure?  | No   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Create a reporting system and behavioral threat model and<br>risk assessment. Case management at all 230 public and<br>charter schools throughout Delaware.  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Mental health/behavioral health was a major impact of the COVID-19 pandemic. Reporting and monitoring services will collect data to ensure reasonable responses to the negative economic impact of COVID-19. This program was reviewed by our DOJ to ensure eligibility.   |

# Project Name: DHSS Gun Violence Safer Delaware

| Project Identification Number   | 20129  |
|---------------------------------|--|
| Project Expenditure Category    | 1-Public Health  |
| Project Expenditure Subcategory | 1.11-Community Violence Interventions  |
| Status To Completion            | Completed less than 50%  |
| Adopted Budget                  | \$1,223,720.00   |
| Total Cumulative Obligations    | \$328,035.53   |
| Total Cumulative Expenditures   | \$95,226.15  |
| Current Period Obligations      | \$300,202.88   |
| Current Period Expenditures     | \$67,393.50  |
| Project Description             | Safer Delaware Fund, seeks approval to use ARPA funding<br>to respond to the public health emergency of community gun<br>violence, exacerbated across the State of Delaware by the<br>co-occurring and ongoing COVID-19 pandemic. The Safer<br>Delaware Fund is a proposed grant program to be<br>administered statewide through a partnership between the<br>Governor's Family Services Cabinet Council, including the<br>Department of Health and Social Services, and the Delaware<br>Criminal Justice Council. |

| Does this project include a capital expenditure?  | No   |
|---|--|
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00   |
| Is a program evaluation of the project being conducted?   | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | GVI will address gun violence in Delaware communities exacerbated by the pandemic.                       |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All SLFRF project proposals are reviewed by Delaware's Department of Justice for ARPA grant eligibility. |

### **Project Name: DTI Email Phishing Tools**

| Project Identification Number   | 20647  |
|---|--|
| Project Expenditure Category  | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity  |
| Project Expenditure Subcategory   | 3.4-Public Sector Capacity: Effective Service Delivery   |
| Status To Completion  | Completed less than 50%  |
| Adopted Budget  | \$1,500,000.00   |
| Total Cumulative Obligations  | \$324,104.50   |
| Total Cumulative Expenditures   | \$324,104.50   |
| Current Period Obligations  | \$7,950.00   |
| Current Period Expenditures   | \$7,950.00   |
| Project Description   | ARPA funding for Digital Government. With the increase in<br>public exposure through a digital government platform, so<br>too comes an increase in attacks to these systems. State<br>employees also need to be protected from scams that could<br>compromise state systems and Personally Identifiable<br>Information.  |
| Does this project include a capital expenditure?  | No   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | ARPA funding for Digital Government. This request<br>contains the following sub-requests: Digital Government<br>Platform, Digital Accessibility, ServiceNow, Email Phishing<br>Tools, GIS Geospatial Datasets, and Citrix Remote Work.<br>DTI¿s ARPA Worksheet notes the drastic increase in<br>phishing attacks since the pandemic began. With the<br>increase in public exposure through a digital government<br>platform, so too comes an increase in attacks to these<br>systems. State employees also need to be protected from<br>scam |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Delaware's Department of Justice reviews all projects for<br>eligibility. Projects are then awarded based on quantifiable<br>needs and deficiencies of service within the State.   |

# Project Name: DIAMOND STATE PORT CORPORATION

| Project Identification Number   | 20441   |
|---------------------------------|---|
| Project Expenditure Category    | 6-Revenue Replacement   |
| Project Expenditure Subcategory | 6.1-Provision of Government Services  |
| Status To Completion            | Completed 50% or more   |
| Adopted Budget                  | \$50,000,000.00   |
| Total Cumulative Obligations    | \$30,760,000.00   |
| Total Cumulative Expenditures   | \$30,760,000.00   |
| Current Period Obligations      | \$0.00  |
| Current Period Expenditures     | \$0.00  |
| Project Description             | ARPA Funding for the Diamond State Port Corporation<br>("DSPC"). These funds would primarily be used to support<br>costs associated with the development of a new,<br>state-of-the-art containre terminal at the Edgemoor property,<br>which is owned by DSPC and is to be operated under a<br>Concession Agreement with a 3rd party operator (hereafter<br>Gulftainer USA, or "GT USA"). Anticipated expenditures<br>associated with such development include, but are not<br>limited to, "early works construction costs" for the<br>bulkhead/seawall, which will enable dredging to commence<br>in compliance with federal and state permits/approvals, as<br>well as the beneficial re-use of dredged materials to level the<br>site. More specifically, these expenditures will include the<br>costs to secure steel sheet pilings, the test pile program, and<br>related engineering costs. |

### Project Name: OGOV MH SUN Behavioral

| Project Identification Number  | 20493  |
|--|--|
| Project Expenditure Category   | 1-Public Health  |
| Project Expenditure Subcategory  | 1.12-Mental Health Services  |
| Status To Completion   | Completed less than 50%  |
| Adopted Budget   | \$3,500,000.00   |
| Total Cumulative Obligations   | \$3,500,000.00   |
| Total Cumulative Expenditures  | \$3,500,000.00   |
| Current Period Obligations   | \$0.00   |
| Current Period Expenditures  | \$200,000.00   |
| Project Description  | Sun Behavioral Delaware, LLC (Sun) for \$3.5 million in<br>capital funding of the American Rescue Plan Act (ARPA) to<br>partially fund an expansion of its substance abuse outpatient<br>operations in Georgetown. |
| Does this project include a capital expenditure?   | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable                               | \$3,500,000.00   |
| Type of capital expenditures, based on the following enumerated uses   | Behavioral health facilities and equipment   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions | \$0.00   |

| Is a program evaluation of the project being conducted?   | Yes  |
|---|--|
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | SUN Behavioral Delaware's proposed project will include<br>the construction of a new Outpatient Building within<br>walking distance of our main facility in Georgetown. Please<br>see attached proforma that details the revenue and expenses<br>as it relates to our current program combined with expected<br>revenue and expenses of this expansion.<br>We will build a freestanding two-story building which<br>would encompass all of SUN's Outpatient Services,<br>including Adult PHP, Adult IOP, and Adult MAT Services<br>programs. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA project proposals are reviwed by Delaware's Department of Justice for ARPA eligibility determination based on the ARPA SLFRF final rule and gudiance.   |

# Project Name: OGOV MH University of Delaware MSW

| Project Identification Number  | 20495   |
|--|---|
| Project Expenditure Category   | 1-Public Health   |
| Project Expenditure Subcategory  | 1.12-Mental Health Services   |
| Status To Completion   | Completed less than 50%   |
| Adopted Budget   | \$700,000.00  |
| Total Cumulative Obligations   | \$700,000.00  |
| Total Cumulative Expenditures  | \$145,620.00  |
| Current Period Obligations   | \$0.00  |
| Current Period Expenditures  | \$0.00  |
| Project Description  | ARPA funding for exploration of a Master's in Social Work<br>program. The request is for funds to allow UD CEHD to<br>develop, plan and begin a Master's in Social Work (MSW)<br>program to complement the existing Human Services<br>Bachelor's degrees. |
| Does this project include a capital expenditure?   | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions | \$0.00  |
| Is a program evaluation of the project being conducted?  | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?                                | 2 Imp Low or moderate income HHs or populations   |
| Secondary Impacted and/or Disproportionately Impacted populations  | 7 Imp Other HHs or populations that experienced a negative economic   |
| Tertiary Impacted and/or Disproportionately Impacted populations   | 1 Imp General Public  |
| Is a program evaluation of the project being conducted?  | Yes   |
|  | ARPA funding for exploration of a Master's in Social Work   |

| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced | program. The request is for funds to allow UD CEHD to<br>develop, plan and begin a Master's in Social Work (MSW)<br>program to complement the existing Human Services<br>Bachelor's degrees ,which has a social work concentration as<br>well as other Master's and Doctoral degrees. The university<br>will hire personnel and consultants as needed to inform<br>planning and implementation of the program. |
|---|--|
| Brief description of recipient's approach to ensuring that  | All ARPA project proposals are reviewed by Delaware's  |
| response is reasonable and proportional to a public health or   | Dept of Justice to determine ARPA SLFRF eligibility based  |
| negative economic impact of Covid-19  | on SLFRF guidance and final rule   |

#### Project Name: OGOV MH SOAR

| Project Identification Number   | 20753   |
|---|---|
| Project Expenditure Category  | 1-Public Health   |
| Project Expenditure Subcategory   | 1.12-Mental Health Services   |
| Status To Completion  | Completed less than 50%   |
| Adopted Budget  | \$50,000.00   |
| Total Cumulative Obligations  | \$50,000.00   |
| Total Cumulative Expenditures   | \$37,500.00   |
| Current Period Obligations  | \$0.00  |
| Current Period Expenditures   | \$12,500.00   |
| Project Description   | ARPA funding to support a grant to SOAR to pay for certain professional services related to the supervision of 6-10 pre-licensed post-graduate educated mental health clinicians.   |
| Does this project include a capital expenditure?  | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$50,000.00   |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Secondary Impacted and/or Disproportionately Impacted populations   | 2 Imp Low or moderate income HHs or populations   |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Training and Supervision for licensed clinicians to provide<br>1:1 supervision of pre-licensed supervisees. 4 Masters level<br>clinicians. 1 doctoral level clinician supervision for one year.<br>Advanced training and certification in trauma therapy. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA project proposals are reviewed by Delaware's<br>Dept of Justice to determine ARPA SLFRF eligibility based<br>on SLFRF guidance and final rule. All projects are reviewed<br>and selected based on service needs or limits within the<br>state.   |

### Project Name: OGOV Delaware Technology Park

| Project Identification Number | 20921                       |
|-------------------------------|-----------------------------|
| Project Expenditure Category  | 2-Negative Economic Impacts |

| Project Expenditure Subcategory   | 2.32-Business Incubators and Start-Up or Expansion<br>Assistance  |
|---|---|
| Status To Completion  | Completed less than 50%   |
| Adopted Budget  | \$250,000.00  |
| Total Cumulative Obligations  | \$250,000.00  |
| Total Cumulative Expenditures   | \$111,500.00  |
| Current Period Obligations  | \$0.00  |
| Current Period Expenditures   | \$80,000.00   |
| Project Description   | ARPA funding for its Business Accelerator project. The<br>Request is for funds to launch a Business Accelerator that<br>will support the recovery of COVID impacted financial<br>technology (fintech) startups.   |
| Does this project include a capital expenditure?  | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00  |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 2 Imp Low or moderate income HHs or populations   |
| Secondary Impacted and/or Disproportionately Impacted populations   | 1 Imp General Public  |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | ARPA funding for its Business Accelerator project. The<br>Request is for funds to launch a Business Accelerator that<br>will support the recovery of COVID impacted financial<br>technology (fintech) startups.   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA project proposals are reviewed by Delaware's<br>Dept of Justice to determine ARPA SLFRF eligibility based<br>on SLFRF guidance and final rule. All projects are reviewed<br>and selected based on service needs or limits within the<br>state. |
| Number of small businesses served (by program if recipient<br>establishes multiple separate small businesses assistance<br>programs)                                | 20  |

### Project Name: OGOV Code Differently

| Project Identification Number   | 20984  |
|---------------------------------|--|
| Project Expenditure Category    | 2-Negative Economic Impacts  |
| Project Expenditure Subcategory | 2.10-Assistance to Unemployed or Underemployed Workers<br>(e.g. job training, subsidized employment, employment<br>supports or incentives) |
| Status To Completion            | Completed 50% or more  |
| Adopted Budget                  | \$750,000.00   |
| Total Cumulative Obligations    | \$750,000.00   |
| Total Cumulative Expenditures   | \$750,000.00   |
| Current Period Obligations      | \$0.00   |

| Current Period Expenditures   | \$325,000.00  |
|---|---|
| Project Description   | Code Differently, a diversity, equity and inclusion<br>technology education and workforce solutions company in<br>the State of Delaware, seeks ARPA funding for a workforce<br>development initiative for adult training and employment for<br>technology skills. Code Differently indicates in its ARPA<br>Worksheet that it designs and delivers technology career<br>focused training products and services to address the<br>educational divide and strengthen the economic outlook of<br>the most under-served and under-represented populations. It<br>aims to help learners overcome personal and communal<br>barriers that impede the completion of technology education<br>and workforce training. The result is education advancement<br>and employability, income stability, and more sustainable<br>communities. The Request is for a total of \$2,008,800.00<br>(\$1,620,000.00 in workforce training, and \$388,800.00 in<br>stipends to participants). |
| Does this project include a capital expenditure?  | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00  |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 3 Imp HHs that experienced unemployment   |
| Secondary Impacted and/or Disproportionately Impacted populations   | 2 Imp Low or moderate income HHs or populations   |
| Tertiary Impacted and/or Disproportionately Impacted populations  | 1 Imp General Public  |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | funding to provide two software development training<br>programs that align to the local and remote market needs:<br>Software Development 20 Week Java Program and Software<br>Development 14 Week ServiceNow Program. Its narrative<br>states that both program curriculums are inspired and/or<br>designed by hiring partners to include the technical skills<br>needed to fill entry level software development related<br>positions. The program design and delivery integrates work<br>based learning from the start of training.  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA project proposals are reviewed by Delaware's<br>Dept of Justice to determine ARPA SLFRF eligibility based<br>on SLFRF guidance and final rule. All projects are reviewed<br>and selected based on service needs or limits within the<br>state.   |

# Project Name: OGOV DDL MH Libraries

| Project Identification Number   | 19941                       |
|---------------------------------|-----------------------------|
| Project Expenditure Category    | 1-Public Health             |
| Project Expenditure Subcategory | 1.12-Mental Health Services |
| Status To Completion            | Completed less than 50%     |
| Adopted Budget                  | \$1,250,000.00              |
|                                 |                             |

| Total Cumulative Obligations  | \$175,000.00  |
|---|---|
| Total Cumulative Expenditures   | \$25,000.00   |
| Current Period Obligations  | \$166,000.00  |
| Current Period Expenditures   | \$16,000.00   |
| Project Description   | The Delaware Division of Libraries seeks ARPA funding for<br>a program that will afford 2,500 Delawareans with 24/7<br>access to behavioral healthcare and licensed therapists over<br>three years, at an amount of \$1,250,000, through DDLs<br>existing telehealth initiative.  |
| Does this project include a capital expenditure?  | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00  |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 2 Imp Low or moderate income HHs or populations   |
| Secondary Impacted and/or Disproportionately Impacted populations   | 1 Imp General Public  |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | The objective is to increase access to mental health services<br>via TalkSpace (24/7 texting + 1 virtual counseling<br>session/month). Since COVID, the need for mental health<br>services has increased. The structure is a virtual format via<br>TalkSpace. It is anticipated that this will make mental health<br>services more accessible to some Delaware residents. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA project proposals are reviewed by Delaware's<br>Dept of Justice to determine ARPA SLFRF eligibility based<br>on SLFRF guidance and final rule. All projects are reviewed<br>and selected based on service needs or limits within the<br>state.   |

#### Project Name: DHSS ARP Admin & Oversight

| Project Identification Number   | 19036  |
|---------------------------------|--|
| Project Expenditure Category    | 7-Administrative   |
| Project Expenditure Subcategory | 7.1-Administrative Expenses  |
| Status To Completion            | Completed 50% or more  |
| Adopted Budget                  | \$360,000.00   |
| Total Cumulative Obligations    | \$209,102.20   |
| Total Cumulative Expenditures   | \$209,102.20   |
| Current Period Obligations      | \$22,366.95  |
| Current Period Expenditures     | \$22,366.95  |
| Project Description             | Department of Health and Social Services Administration line for ARPA project oversight. |

#### **Project Name: OGOV Faithful Friends**

| Project Expenditure Category  | 2-Negative Economic Impacts  |
|---|--|
| Project Expenditure Subcategory   | 2.10-Assistance to Unemployed or Underemployed Workers<br>(e.g. job training, subsidized employment, employment<br>supports or incentives)   |
| Status To Completion  | Completed less than 50%  |
| Adopted Budget  | \$250,000.00   |
| Total Cumulative Obligations  | \$250,000.00   |
| Total Cumulative Expenditures   | \$85,000.00  |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | The Delaware Faithful Friends Animal Society (FFAS)<br>seeks ARPA funding for a joint initiative between FFAS and<br>the New Castle County Vocational Technical School system<br>(NCCVT). FFAS is requesting \$825,820 to establish an<br>animal welfare and career training program within the<br>NCCVT system at St. George's Technical High School (St.<br>Georges) (the Program). The Program would create a<br>partnership between the two entities that would enable<br>students to receive school on animal welfare and participate<br>in a practical training program at FFAS. |
| Does this project include a capital expenditure?  | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$25,000.00  |
| Type of capital expenditures, based on the following enumerated uses  | Improvements to existing facilities  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00   |
| Is a program evaluation of the project being conducted?   | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 2 Imp Low or moderate income HHs or populations  |
| Secondary Impacted and/or Disproportionately Impacted populations   | 1 Imp General Public   |
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | The Delaware Faithful Friends Animal Society (FFAS) seeks ARPA funding for a joint initiative between FFAS and the New Castle County Vocational Technical School system (NCCVT).   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA project proposals are reviewed by Delaware's<br>Dept of Justice to determine ARPA SLFRF eligibility based<br>on SLFRF guidance and final rule. All projects are reviewed<br>and selected based on service needs or limits within the<br>state.  |

### Project Name: OGOV Food Bank Assistance

| Project Identification Number | 21031                       |
|-------------------------------|-----------------------------|
| Project Expenditure Category  | 2-Negative Economic Impacts |
|                               |                             |

| Project Expenditure Subcategory | 2.1-Household Assistance: Food Programs  |
|---------------------------------|--|
| Status To Completion            | Completed  |
| Adopted Budget                  | \$3,247,890.00   |
| Total Cumulative Obligations    | \$3,247,890.00   |
| Total Cumulative Expenditures   | \$3,247,890.00   |
| Current Period Obligations      | \$0.00   |
| Current Period Expenditures     | \$0.00   |
|                                 | The Food Banks Mass Distribution events includes<br>scheduling food drives in April, May and June 2023 with<br>support from DelDOT and the Delaware State Police. The<br>Food Bank of Delaware reports that since the COVID-19<br>pandemic started in March 2020, its food distribution effort<br>have increased 91%.  |
| Project Description             | The primary objective of The Food Banks Community Food<br>Distribution Program includes the following three programs<br>1. Backpack Program: The program fills a gap left by the<br>free and reduced-price lunch program when children do not<br>have access to school meals, such as on weekends, school<br>breaks and over the summer. Each week, participating<br>students take home a kit that contains four meals and two<br>snacks, comprised of easy-to-prepare, child-friendly items t<br>provide nourishment until school resumes. Children receive<br>backpack food kits inserted in their own backpacks by the<br>onsite program coordinator in order to reduce any type of<br>stigma associated with participating in the program.<br>2. School and Healthy Pantry Program: School-based schood<br>pantries serve as a safe space for families to access food<br>assistance at a place they normally frequent. This first pantr<br>was opened to complement the Backpack Program with the<br>goal of ensuring that participating families have access to<br>enough food to meet their ongoing needs. In these pantries,<br>families are discreetly identified by school officials and are<br>able to select food from the pantry to meet their household<br>needs each week. Each pantry is reflective of the needs of<br>their school setting and pantries are designed based on the<br>space available in each location.<br>3. Home Delivery Program: The Food Bank of Delaware<br>provides home delivery of food staples to Delaware<br>residents. This service is provided to residents who live<br>within a 15-mile radius of one of its established DoorDash<br>hubs. Currently, the FBD has a DoorDash hub at its Newarf<br>facility (222 Lake Drive, Newark) and at the Lutheran<br>Community Services - St. Stephens Lutheran Church Food<br>Pantry (1301 N. Broom Street, Wilmington). Individuals ar<br>offered the ability to select one of two unique food boxes<br>that are delivered to their door. We know that so many<br>individuals and families are still hesitant to venture out with<br>the COVID case increases and there are many in our<br>community who are permanently homebound. As the Food<br>Ba |

|   | distribution efforts have increased 91%. Given the significant increase, the Food Bank of Delaware is currently experiencing a shortage of approximately \$3,000,000 statewide.   |
|---|---|
| Does this project include a capital expenditure?  | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00  |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 2 Imp Low or moderate income HHs or populations   |
| Secondary Impacted and/or Disproportionately Impacted populations   | 4 Imp HHs that experienced increased food or housing insecurity   |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | To further support the Food Banks Community Food<br>Distribution Program and provide funding to supplement the<br>Backpack, Mobile Pantry, and Home Delivery programs and<br>extend mass food distribution.   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA project proposals are reviewed by Delaware's<br>Dept of Justice to determine ARPA SLFRF eligibility based<br>on SLFRF guidance and final rule. All projects are reviewed<br>and selected based on service needs or limits within the<br>state. |
| Number of households served (by program if recipient establishes multiple separate household assistance programs)   | 0   |

# Project Name: OGOV NHA George Read Village

| Project Identification Number   | 21099  |
|---------------------------------|--|
| Project Expenditure Category    | 2-Negative Economic Impacts  |
| Project Expenditure Subcategory | 2.15-Long-Term Housing Security: Affordable Housing  |
| Status To Completion            | Not Started  |
| Adopted Budget                  | \$3,000,000.00   |
| Total Cumulative Obligations    | \$0.00   |
| Total Cumulative Expenditures   | \$0.00   |
| Current Period Obligations      | \$0.00   |
| Current Period Expenditures     | \$0.00   |
| Project Description             | The Delaware Office of the Governor(OGOV), on behalf<br>of the Delaware Emergency Management Agency, seeks<br>ARPA funding to support a grant to the Newark Housing<br>Authority to pay for certain professional and construction<br>services related to the redevelopment of the George Read<br>Village (GRV) located in Newark, Delaware and operated<br>by the Newark Housing Authority (NHA). We have been<br>advised that the full amount of the proposed \$3,000,000.00<br>grant will be used to assist in ¿the demolition and the new<br>construction of affordable housing units which will be used<br>to respond to the disproportionate negative impacts of<br>the pandemic to low income families and seniors. In<br>support of its request, OGOV provided a completed ARPA |

|  | worksheet, the facts of which are presumed truthful and<br>incorporated herein by reference. OGOV provided the<br>following in its ARPA worksheet at pp. 5-6: |
|--|---|
| Does this project include a capital expenditure?   | Yes   |
| What is the Total expected capital expenditure, including pre-development costs, if applicable | \$3,000,000.00  |
| Type of capital expenditures, based on the following enumerated uses                           | Affordable housing, supportive housing, or recovery housing   |

### Project Name: OGOV Newark Senior Center

| Project Identification Number   | 21100   |
|---------------------------------|---|
| Project Expenditure Category    | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory | 2.22-Strong Healthy Communities: Neighborhood Features that Promote Health and Safety   |
| Status To Completion            | Completed less than 50%   |
| Adopted Budget                  | \$250,000.00  |
| Total Cumulative Obligations    | \$250,000.00  |
| Total Cumulative Expenditures   | \$250,000.00  |
| Current Period Obligations      | \$0.00  |
| Current Period Expenditures     | \$125,000.00  |
| Project Description             | The Newark Senior Centers request identifies their clientele<br>as being disproportionately harmed by the pandemic. The<br>request begins by citing the COVID-related death totals<br>since the pandemic began. Senior citizens have been and<br>continue to be vastly more likely to succumb to COVID that<br>any other age group in the population. Thus, seniors and<br>their caregivers have had to take increased precautions<br>against contracting COVID, including diligent physical<br>spacing. The Addendum notes other precautions as well.<br>With only so much physical space, COVID limited the<br>Senior Center; sability to care for as many elders as it would<br>have pre-pandemic. New facilities would allow the Center to<br>resume services and expand their reach to those seniors who<br>may have lost contact with the Center and their peers during<br>the pandemic.<br>The FR requires that, as a condition to using funding under §<br>602(c)(1)(A), a recipient must identify a harm or impact to a<br>beneficiary or class of beneficiaries caused or exacerbated<br>by the public health emergency or its negative economic<br>impacts, and how its program, service, or capital expenditure<br>responds to such harm. FR at page 415. Responses must be<br>reasonably designed to benefit the individual or class that<br>experienced the negative economic impact or harm and be<br>related and reasonably proportional to the extent and type of<br>harm experienced. FR 24-26. This project responds to the<br>pandemic, as that phrase is defined in the FR, and thus this<br>threshold requirement is satisfied. The FR addresses the<br>senior citizen population and identifies its eligibility multiple<br>ways. The Center; s proposal has identified a harm/impact to<br>a class of beneficiaries (senior citizens) that was both caused<br>and exacerbated by the pandemic. FR 415. Prior to COVID,<br>the Center surely did not need extra space for physical |

|   | distancing. Besides this defined eligibility, the Final Rules<br>also note several other presumptive qualifiers that would<br>likely apply to the senior population serviced by the Center.<br>They include qualification for Medicaid, Medicare Part D<br>Low-income subsidies, and Supplemental Security Income. |
|---|--|
| Does this project include a capital expenditure?  | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$250,000.00   |
| Type of capital expenditures, based on the following enumerated uses  | Improvements to existing facilities  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Secondary Impacted and/or Disproportionately Impacted populations   | 2 Imp Low or moderate income HHs or populations  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Funding for expanding its facilities to better service senior clientele. Specifically, the Center is requesting \$250,000 to increase the capacity of the ¿Meeting of the Minds; physical space by 40%. The program seeks to combat social isolation.  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All project proposals are reviewed by the Delaware Department of Justice for eligibility.  |

# Project Name: OGOV LTG Stop the Violence

| Project Identification Number  | 21157   |
|--|---|
|  | 1-Public Health   |
| Project Expenditure Category   |   |
| Project Expenditure Subcategory  | 1.11-Community Violence Interventions   |
| Status To Completion   | Completed   |
| Adopted Budget   | \$35,000.00   |
| Total Cumulative Obligations   | \$35,000.00   |
| Total Cumulative Expenditures  | \$35,000.00   |
| Current Period Obligations   | \$0.00  |
| Current Period Expenditures  | \$0.00  |
| Project Description  | The Delaware Office of Lt. Governor seeks to use American<br>Rescue Plan Act (ARPA) funding from its Recovery<br>Management Support Services Grant to support a grant to<br>Stop the Violence Prayer Chain Foundation, Inc. for its Life<br>Skills Program (Program). The Life Skills Program serves<br>at-risk low-income children in Wilmington and surrounding<br>areas who have lost family members to gun or domestic<br>violence. |
| Does this project include a capital expenditure?   | Yes   |
| What is the Total expected capital expenditure, including pre-development costs, if applicable                               | \$35,000.00   |
| Type of capital expenditures, based on the following enumerated uses   | Behavioral health facilities and equipment  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions | \$0.00  |

| Is a program evaluation of the project being conducted?   | Yes   |
|---|---|
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 2 Imp Low or moderate income HHs or populations   |
| Secondary Impacted and/or Disproportionately Impacted populations   | 1 Imp General Public  |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | The Delaware Office of Lt. Governor seeks to use American<br>Rescue Plan Act (ARPA) funding from its Recovery<br>Management Support Services Grant to support a grant to<br>Stop the Violence Prayer Chain Foundation, Inc. for its Life<br>Skills Program (Program). |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA project proposals are reviewed by Delaware's<br>Dept of Justice to determine ARPA SLFRF eligibility based<br>on SLFRF guidance and final rule. All projects are reviewed<br>and selected based on service needs or limits within the<br>state.               |

### Project Name: OGOV LTG Beautiful Gate Outreach

| Project Identification Number   | 21158  |
|---------------------------------|--|
| Project Expenditure Category    | 1-Public Health  |
| Project Expenditure Subcategory | 1.13-Substance Use Services  |
| Status To Completion            | Completed less than 50%  |
| Adopted Budget                  | \$35,000.00  |
| Total Cumulative Obligations    | \$35,000.00  |
| Total Cumulative Expenditures   | \$35,000.00  |
| Current Period Obligations      | \$0.00   |
| Current Period Expenditures     | \$0.00   |
| Project Description             | The Delaware Office of Lt. Governor seeks to use American<br>Rescue Plan Act (ARPA) funding from its Recovery<br>Management Support Services Grant to support a \$35,000<br>grant to the Beautiful Gate Outreach Center to purchase a<br>new vehicle to transport Wilmington inner-city residents,<br>who are living with HIV/AIDS, to their medical and<br>work-related appointments.<br>The attached ARPA Worksheet provides the following<br>support for its request:<br>The total amount requested was \$35,000. These funds will<br>be used to help purchase a vehicle to assist with the<br>transportation of inner-city clients who are currently living<br>with HIV/AIDS to their medically and work-related<br>appointments. There are approximately 100 transportation<br>trips monthly to transport these Beautiful Gate Outreach<br>Center clients. Most of the medical transportation trips are<br>for substance abuse recovery and behavioral health medical<br>visits. This free service helps to bring the gap for clients who<br>have limited transportation options. It also reduces the need<br>for clients to have to pay for public/ride-share transportation<br>and or ask family and friends for a ride(s). This type of<br>transportation helps to reduce their exposure as well as the<br>client fear of COVID-19 exposure in more crowded public<br>transportation vehicles. |

|   | The entities that are involved include the Beautiful Gate<br>Outreach Center staff, including the Transportation<br>Coordinator and drivers (2), Delaware HIV Consortium<br>Transportation Grant (which pays for staff salaries) and the<br>Christiana Care HIV Program (which provide medical care<br>and referrals).<br>The measures of success will be the data tracking of each<br>safe transportation trip for clients. Daily and monthly reports<br>are entered into our database for funders and data tracking.<br>Annual program satisfaction surveys are also given to<br>transportation clients to assist with program evaluation. |
|---|--|
| Does this project include a capital expenditure?  | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$35,000.00  |
| Type of capital expenditures, based on the following enumerated uses  | Behavioral health facilities and equipment   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00   |
| Is a program evaluation of the project being conducted?   | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 2 Imp Low or moderate income HHs or populations  |
| Secondary Impacted and/or Disproportionately Impacted populations   | 1 Imp General Public   |
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | To support a \$35,000 grant to the Beautiful Gate Outreach<br>Center to purchase a new vehicle to transport Wilmington<br>inner-city residents, who are living with HIV/AIDS, to their<br>medical and work-related appointments.   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA projects are reviewed for eligibility by the Delaware Department of Justice.  |

# Project Name: OGOV LTG Vision to Learn

| Project Identification Number   | 21159  |
|---------------------------------|--|
| Project Expenditure Category    | 1-Public Health  |
| Project Expenditure Subcategory | 1.6-Medical Expenses (including Alternative Care Facilities)   |
| Status To Completion            | Completed less than 50%  |
| Adopted Budget                  | \$50,000.00  |
| Total Cumulative Obligations    | \$50,000.00  |
| Total Cumulative Expenditures   | \$25,000.00  |
| Current Period Obligations      | \$0.00   |
| Current Period Expenditures     | \$0.00   |
|                                 | The Delaware Office of Lt. Governor seeks to use American<br>Rescue Plan Act (ARPA) funding from its Recovery<br>Management Support Services Grant to support a grant to<br>the Vision to Learn (VTL) mobile vision clinic to provide<br>eye exams and glasses to students in underserved elementary |

| Project Description   | schools in Indian River School District in Sussex County.<br>According to the attached ARPA Worksheet, the proposed<br>\$50,000 grant will be used by VTL to provide 333 eye<br>exams and 266 pairs of glasses during the 2022-2023 school<br>year, as shown in the following table:<br>East Millsboro Elementary 69 Long Neck Elementary 58<br>Phillip C Showell Elementary 24 North Georgetown<br>Elementary 67 Georgetown Elementary 70 John M Clayton<br>Elementary 41 Frederick Douglass Elementary 51<br>VTL employs mobile optometric clinics, staffed by licensed<br>doctors and opticians, to provide eye exams and glasses at<br>no cost to the students' families to help bridge gaps in<br>healthcare access and educational achievement. |
|---|---|
| Does this project include a capital expenditure?  | No  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Secondary Impacted and/or Disproportionately Impacted populations   | 2 Imp Low or moderate income HHs or populations   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | To support a grant to the Vision to Learn (VTL) mobile<br>vision clinic to provide eye exams and glasses to students in<br>underserved elementary schools in Indian River School<br>District in Sussex County.  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA projects are reviewed for eligibility by the Delaware Department of Justice.   |

### **Project Name: DHSS DERSS**

| Project Identification Number   | 21188   |
|---------------------------------|---|
| Project Expenditure Category    | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity   |
| Project Expenditure Subcategory | 3.4-Public Sector Capacity: Effective Service Delivery  |
| Status To Completion            | Not Started   |
| Adopted Budget                  | \$7,000,000.00  |
| Total Cumulative Obligations    | \$4,083,449.00  |
| Total Cumulative Expenditures   | \$0.00  |
| Current Period Obligations      | \$324,744.00  |
| Current Period Expenditures     | \$0.00  |
|                                 | This project focuses on supporting public health<br>expenditures by replacing Delawares current outdated<br>infectious disease surveillance system (the Delaware<br>Electronic Reporting Surveillance System (DERSS)) that<br>faced challenges addressing the demands for managing daily<br>near real time infectious disease surveillance during the<br>COVID-19 pandemic. It is the primary system for<br>COVID-19 surveillance as well as over 100 other infectious<br>diseases reportable to the state and nationally notifiable. The<br>new system will be able to integrate with the Division of<br>Public Healths (DPH) vital data across the DPH ecosystem<br>as well as other interoperable data systems like the Delaware<br>Vaccination Registry (DelVAX) and the Delaware Vital<br>Event Registration System (DELVERS). DPH completed a |

| Project Description  | request for proposals (RFP) to replace DERSS with the<br>Centers for Disease Control and Prevention (CDC) NEDSS<br>Base(d) System (NBS). The CDC NBS is currently used by<br>26 health departments (20 states and other jurisdictions).<br>Currently, a vendor has been selected and a review of the   |
|--|--|
|  | Statement of Work (SOW) is being completed by both<br>parties; final approval and sign-off of the SOW is projected<br>to begin by April 24, 2023. DPH is completing updates to<br>the Service Level Agreement (SLA) to present to the vendor,<br>and the anticipated vendor approval and sign-off is April 26,<br>2023. The Professional Services Agreement (PSA) has been<br>reviewed and is going through legal review; finalization and<br>signatures are imminent. |
|  | DHSS seeks to use an additional \$3,000,000 in ARPA<br>funding for this project. These funds were previously<br>considered for a DelVAX project which is no longer moving<br>forward. The additional funds will be used for integration<br>costs.  |
| Does this project include a capital expenditure?   | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable | \$7,000,000.00   |
| Type of capital expenditures, based on the following enumerated uses                           | Public health data systems   |

### Project Name: LTG Community Housing & Empower - BreathLife

| Project Identification Number                    | 21252   |
|--|---|
| Project Expenditure Category                     | 1-Public Health   |
| Project Expenditure Subcategory                  | 1.14-Other Public Health Services   |
| Status To Completion                             | Completed less than 50%   |
| Adopted Budget                                   | \$60,000.00   |
| Total Cumulative Obligations                     | \$60,000.00   |
| Total Cumulative Expenditures                    | \$30,000.00   |
| Current Period Obligations                       | \$0.00  |
| Current Period Expenditures                      | \$0.00  |
| Project Description                              | Delaware shall provide the Subrecipient with a grant in the<br>amount of \$60,000.00. The distribution of funds will be<br>dependent on the progress and needs of the project, as<br>agreed upon between parties. The Government will reassess<br>the funding needs and additional disbursements on a regular<br>basis. The Subrecipient is receiving these funds for a<br>specific project, other eligible projects, or eligible purchases<br>solely in relation to the COVID pandemic. This specific<br>project or purchase description to support the proposed<br>Community BreatheLife Campaign, an adaptation of the<br>World Health Organization (WHO) program, to increase the<br>awareness of the effects of air pollution on health,<br>exasperated by COVID-19, in disproportionately impacted<br>communities of color in Delaware. |
| Does this project include a capital expenditure? | No  |

| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
|---|---|
| Secondary Impacted and/or Disproportionately Impacted populations   | 2 Imp Low or moderate income HHs or populations   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | This specific project or purchase description to support the proposed Community BreatheLife Campaign, an adaptation of the World Health Organization (WHO) program. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA projects are reviewed for eligibility by the Delaware Department of Justice.   |

### Project Name: OGOV LTG BlackMothers In Power

| Project Identification Number   | 21254   |
|---|---|
| Project Expenditure Category  | 1-Public Health   |
| Project Expenditure Subcategory   | 1.13-Substance Use Services   |
| Status To Completion  | Completed 50% or more   |
| Adopted Budget  | \$40,000.00   |
| Total Cumulative Obligations  | \$40,000.00   |
| Total Cumulative Expenditures   | \$20,000.00   |
| Current Period Obligations  | \$0.00  |
| Current Period Expenditures   | \$0.00  |
| Project Description   | This program seeks to eradicate racial health disparities for<br>Black birthing people and Black babies by helping to<br>eliminate barriers to a healthy birthing process. The program<br>will do so by recruiting and training birthing persons who<br>have overcome substance abuse issues into a Doula program<br>educating and empowering through the creation of<br>partnerships with state and local agencies that provide<br>substance abuse programming, and addressing substance<br>abuse. |
| Does this project include a capital expenditure?  | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions                  | \$0.00  |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Secondary Impacted and/or Disproportionately Impacted populations   | 2 Imp Low or moderate income HHs or populations   |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced | This program seeks to eradicate racial health disparities for<br>Black birthing people and Black babies by helping to<br>eliminate barriers to a healthy birthing process. The program<br>will do so by recruiting and training birthing persons who<br>have overcome substance abuse issues into a Doula program<br>educating and empowering through the creation of   |

|   | partnerships with state and local agencies that provide<br>substance abuse programming, and addressing substance<br>abuse. |
|---|--|
| response is reasonable and proportional to a public health or | All ARPA projects are reviewed for eligibility by the Delaware Department of Justice.                                      |

# Project Name: OGOV LTG DHEC

| Project Identification Number   | 21255  |
|---|--|
| Project Expenditure Category  | 1-Public Health  |
| Project Expenditure Subcategory   | 1.6-Medical Expenses (including Alternative Care Facilities)   |
| Status To Completion  | Completed less than 50%  |
| Adopted Budget  | \$490,000.00   |
| Total Cumulative Obligations  | \$490,000.00   |
| Total Cumulative Expenditures   | \$70,000.00  |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | The Delaware Health Equality Coalition plans to engage the<br>community through its patient centered medical home,<br>providing comprehensive primary care and mental health<br>services. The DHEC will focus on regions shown by the<br>health communities data to be the most disadvantaged. |
| Does this project include a capital expenditure?  | No   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Secondary Impacted and/or Disproportionately Impacted populations   | 2 Imp Low or moderate income HHs or populations  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | The Delaware Health Equality Coalition plans to engage the community through its patient centered medical home, providing comprehensive primary care and mental health services. The DHEC will focus on regions shown by the health communities data to be the most disadvantaged.             |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA projects are reviewed for eligibility by the Delaware Department of Justice.  |

# Project Name: OMB DEMA EOC Upgrades

| 8 |
|---|
|   |
|   |
|   |
|   |
|   |
|   |

| Current Period Expenditures   | \$9,923.63   |
|---|--|
| Project Description   | DEMA seeks ARPA funding for modifications to the States<br>EOC. This investment would update the DEMA Emergency<br>Service Coordinator Area (ESC) to make it configurable to<br>include conferencing capabilities for workstations so critical<br>work partners could be in the building but still access<br>partners working remotely. DEMA will replace the existing<br>ESC screens with smart technology to increase display<br>adaptability for improved situational awareness during<br>pandemic and other disaster events. DEMA will upgrade the<br>current training rooms to include ceiling-embedded<br>microphones to allow DEMA to offer virtual training.<br>Additionally, DEMA will consolidate staff to the second<br>floor to enable the use of the entire floor. The modifications<br>would also include obtaining LEED Certification to include<br>water re-use, low use/high efficiency motion lighting, high<br>efficiency windows, waterless urinals, solar panels, and/or<br>wind turbine to reduce energy costs as close to zero as<br>possible. These changes would allow DEMA to do its part<br>toward positive climate change and make it more resilient to<br>a long-term response operation when external power is not<br>available. The estimated costs of the upgrades to the EOC is<br>\$2 million. |
| Does this project include a capital expenditure?  | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$450,000.00   |
| Type of capital expenditures, based on the following enumerated uses  | Emergency operations centers and acquisition of emergency response equipment   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | DEMA seeks ARPA funding for modifications to the States<br>EOC. This investment would update the DEMA Emergency<br>Service Coordinator Area (ESC) to make it configurable to<br>include conferencing capabilities for workstations so critical<br>work partners could be in the building but still access<br>partners working remotely. DEMA will replace the existing<br>ESC screens with smart technology to increase display<br>adaptability for improved situational awareness during<br>pandemic and other disaster events.   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA projects are reviewed by the Delaware Department of Justice for eligibility.  |

## Project Name: OGOV DRA Workforce 2.0

| Project Identification Number   | 20994  |
|---------------------------------|--|
| Project Expenditure Category    | 2-Negative Economic Impacts  |
| Project Expenditure Subcategory | 2.10-Assistance to Unemployed or Underemployed Workers<br>(e.g. job training, subsidized employment, employment<br>supports or incentives) |
| Status To Completion            | Completed less than 50%  |
| Adopted Budget                  | \$550,000.00   |
| Total Cumulative Obligations    | \$550,000.00   |
|                                 |  |

| Total Cumulative Expenditures   | \$185,000.00  |
|---|---|
| Current Period Obligations  | \$0.00  |
| Current Period Expenditures   | \$0.00  |
| Project Description   | The Delaware Restaurant Association (DRA) seeks ARPA<br>funding for a three-pronged project aimed at bolstering<br>Delaware's hospitality workforce and returning industry<br>employment levels to pre-pandemic statuses. More<br>specifically, the DRA is requesting the funds to expand<br>subsidized certifications, implement a workforce expansion<br>and retention credit, and create a transportation assistance<br>program for hospitality workers. |
| Does this project include a capital expenditure?  | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00  |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 2 Imp Low or moderate income HHs or populations   |
| Secondary Impacted and/or Disproportionately Impacted populations   | 1 Imp General Public  |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | The Delaware Restaurant Association (DRA) seeks ARPA<br>funding for a three-pronged project aimed at bolstering<br>Delaware's hospitality workforce and returning industry<br>employment levels to pre-pandemic statuses.   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA project proposals are reviewed by Delaware's<br>Dept of Justice to determine ARPA SLFRF eligibility based<br>on SLFRF guidance and final rule. All projects are reviewed<br>and selected based on service needs or limits within the<br>state.   |

## Project Name: OGOV GVI Wilmington PD

| Project Identification Number   | 20993   |
|---------------------------------|---|
| Project Expenditure Category    | 1-Public Health   |
| Project Expenditure Subcategory | 1.11-Community Violence Interventions   |
| Status To Completion            | Completed less than 50%   |
| Adopted Budget                  | \$853,168.00  |
| Total Cumulative Obligations    | \$853,168.00  |
| Total Cumulative Expenditures   | \$300,000.00  |
| Current Period Obligations      | \$0.00  |
| Current Period Expenditures     | \$0.00  |
|                                 | "Safer Delaware Fund, seeks approval to use ARPA funding<br>to respond to the public health emergency of community gun<br>violence, exacerbated across the State of Delaware by the<br>co-occurring and ongoing COVID-19 pandemic. The Safer<br>Delaware Fund is a proposed grant program to be<br>administered statewide through a partnership between the<br>Governors Family Services Cabinet Council, including the |

| Project Description   | Department of Health and Social Services, and the Delaware<br>Criminal Justice Council.<br>According to the submitted worksheet, Delaware¿s violent<br>crime and gun violence problem is severe and growing.<br>Violence intervention professionals have suggested the<br>pandemic caused a lack of access to social supports,<br>diversions in these supporting organizations¿ activities to<br>support the pandemic response, elevated emotional stressors,<br>the impact of social isolation, and the increase in guns<br>purchased during 2020 as possible reasons for the trend of<br>increases shootings and homicides seen across the country in<br>2021. The Safer Delaware Fund responds to the effects of<br>the pandemic by resourcing evidence-based public health<br>and public safety approaches to gun violence, focused on<br>two main goals: 1) the reduction of shooting incidents and<br>homicides and 2) changing community norms related to<br>violence. The grant program prioritizes three evidence-based<br>methods to attain these goals. It will prioritize funding for<br>the operation, enhancement, and expansion of Group<br>Violence Intervention (GVI) (a law-enforcement violence<br>reduction strategy), hospital-based violence intervention<br>programs. Additionally, funds will be made available to<br>enhance the capacity of Victim Services organizations,<br>resilience and community healing work, and to support<br>improved victim and Trauma-Informed community services<br>in the areas most impacted by community gun violence<br>across Delaware. " |
|---|---|
| Does this project include a capital expenditure?  | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00  |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Safer Delaware Fund is a proposed grant program to be<br>administered statewide through a partnership between the<br>Governor¿s Family Services Cabinet Council, including the<br>Department of Health and Social Services, and the Delaware<br>Criminal Justice Council  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA project proposals are reviewed by Delaware's<br>Dept of Justice to determine ARPA SLFRF eligibility based<br>on SLFRF guidance and final rule. All projects are reviewed<br>and selected based on service needs or limits within the<br>state.   |

## Project Name: OGOV GVI Dover PD

| 20998                                 |
|---------------------------------------|
| 1-Public Health                       |
| 1.11-Community Violence Interventions |
| Completed 50% or more                 |
| \$1,038,576.00                        |
|                                       |

| Total Cumulative Obligations Total Cumulative Expenditures   | \$1,038,576.00<br>\$968,602.00  |
|--|---|
| L  |   |
| Current Period Obligations   | \$0.00  |
| Current Period Expenditures  | \$0.00  |
| Project Description  | "Safer Delaware Fund, seeks approval to use ARPA funding<br>to respond to the public health emergency of community gur<br>violence, exacerbated across the State of Delaware by the<br>co-occurring and ongoing COVID-19 pandemic. The Safer<br>Delaware Fund is a proposed grant program to be<br>administered statewide through a partnership between the<br>Governors Family Services Cabinet Council, including the<br>Department of Health and Social Services, and the Delaware<br>Criminal Justice Council. According to the submitted<br>worksheet, Delaware;s violent crime and gun violence<br>problem is severe and growing. Violence intervention<br>professionals have suggested the pandemic caused a lack of<br>access to social supports, diversions in these supporting<br>organizations; activities to support the pandemic response,<br>elevated emotional stressors, the impact of social isolation,<br>and the increase in guns purchased during 2020 as possible<br>reasons for the trend of increases shootings and homicides<br>seen across the country in 2021. The Safer Delaware Fund<br>responds to the effects of the pandemic by resourcing<br>evidence-based public health and public safety approaches to<br>gun violence, focused on two main goals: 1) the reduction of<br>shooting incidents and homicides and 2) changing<br>community norms related to violence. The grant program<br>prioritizes three evidence-based methods to attain these<br>goals. It will prioritize funding for the operation,<br>enhancement, and expansion of Group Violence Interventior<br>(GVI) (a law-enforcement violence reduction strategy),<br>hospital-based violence intervention programs.<br>Additionally, funds will be made available to enhance the<br>capacity of Victim Services organizations, resilience and<br>community-based violence intervention programs. |
| Does this project include a capital expenditure?   | Yes   |
| What is the Total expected capital expenditure, including pre-development costs, if applicable                               | \$968,602.00  |
| Type of capital expenditures, based on the following enumerated uses   | Emergency operations centers and acquisition of emergency response equipment  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions | \$0.00  |
| Is a program evaluation of the project being conducted?  | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?                                | 1 Imp General Public  |
| Is a program evaluation of the project being conducted?  | Yes   |
| Brief description of structure and objectives of assistance program(s), including public health or negative economic         | Safer Delaware Fund is a proposed grant program to be<br>administered statewide through a partnership between the   |

| impact experienced  | Governor¿s Family Services Cabinet Council, including the<br>Department of Health and Social Services, and the Delaware<br>Criminal Justice Council   |
|---|---|
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA project proposals are reviewed by Delaware's<br>Dept of Justice to determine ARPA SLFRF eligibility based<br>on SLFRF guidance and final rule. All projects are reviewed<br>and selected based on service needs or limits within the<br>state. |

## Project Name: OMB DNG 12 Penns Way Land Purc

| Project Identification Number  | 18822  |
|--|--|
| Project Expenditure Category   | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity          |
| Project Expenditure Subcategory  | 3.4-Public Sector Capacity: Effective Service Delivery                       |
| Status To Completion   | Not Started  |
| Adopted Budget   | \$7,000,000.00   |
| Total Cumulative Obligations   | \$5,701,750.00   |
| Total Cumulative Expenditures  | \$200,000.00   |
| Current Period Obligations   | \$0.00   |
| Current Period Expenditures  | \$0.00   |
| Project Description  | Land Purchase  |
| Does this project include a capital expenditure?   | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable | \$7,000,000.00   |
| Type of capital expenditures, based on the following enumerated uses                           | Emergency operations centers and acquisition of emergency response equipment |

## Project Name: OGOV LTG DCRAC

| Project Identification Number   | 21395   |
|---------------------------------|---|
| Project Expenditure Category    | 1-Public Health   |
| Project Expenditure Subcategory | 1.14-Other Public Health Services   |
| Status To Completion            | Completed less than 50%   |
| Adopted Budget                  | \$100,000.00  |
| Program Income Earned           | \$0.00  |
| Program Income Expended         | \$0.00  |
| Total Cumulative Obligations    | \$100,000.00  |
| Total Cumulative Expenditures   | \$50,000.00   |
| Current Period Obligations      | \$0.00  |
| Current Period Expenditures     | \$0.00  |
|                                 | The Delaware Community Reinvestment Action Council<br>Inc. seeks ARPA funding that will fund pro bono legal<br>services for elderly homeowners. The DCRACs plan aims to<br>ensure those who own their homes are able to keep their<br>homes, and pass them to their next generation upon death. |

| Project Description   | DCRAC ARPA Worksheet, Page 5. A portion of the funding<br>may go toward publicity and marketing. Beyond that, funds<br>will go towards legal services, with the possibility of<br>simultaneous referrals being made to other non-profit<br>service providers when appropriate.   |
|---|--|
| Does this project include a capital expenditure?  | No   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Secondary Impacted and/or Disproportionately Impacted populations   | 2 Imp Low or moderate income HHs or populations  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | The Delaware Community Reinvestment Action Council<br>Inc. seeks ARPA funding that will fund pro bono legal<br>services for elderly homeowners. The DCRACs plan aims to<br>ensure those who own their homes are able to keep their<br>homes, and pass them to their next generation upon death.<br>DCRAC ARPA Worksheet, Page 5. A portion of the funding<br>may go toward publicity and marketing. Beyond that, funds<br>will go towards legal services, with the possibility of<br>simultaneous referrals being made to other non-profits. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA projects are reviewed for eligibility by the Delaware Department of Justice.  |

## Project Name: OGOV LTG Choir School of DE

| Project Identification Number                    | 21397   |
|--|---|
| Project Expenditure Category                     | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory                  | 2.37-Economic Impact Assistance: Other  |
| Status To Completion                             | Completed less than 50%   |
| Adopted Budget                                   | \$75,000.00   |
| Program Income Earned                            | \$0.00  |
| Program Income Expended                          | \$0.00  |
| Total Cumulative Obligations                     | \$75,000.00   |
| Total Cumulative Expenditures                    | \$75,000.00   |
| Current Period Obligations                       | \$0.00  |
| Current Period Expenditures                      | \$37,500.00   |
| Project Description                              | CSD's request appropriately identifies their clientele as<br>being disproportionately impacted by the harms and impacts<br>brought on by the COVID-19 pandemic. CSD provides<br>choral training and a variety of other positive avenues of<br>instruction to youth between the ages of seven and<br>seventeen. Much, if not all, of their student body comes from<br>historically disadvantaged subsections of the population.<br>Funding this request would allow for CSD to hire a trauma<br>informed FSC whose primary focus would be working with<br>disadvantaged youth. The FSC would be able to help CSD<br>students with the isolation, lack of socialization, loss of<br>instructional time, and other related problems that the<br>pandemic generated or exacerbated. |
| Does this project include a capital expenditure? | No  |

| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00   |
|---|--|
| Is a program evaluation of the project being conducted?   | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | ARPA funding that will fund most of the salary for a Family<br>Services Coordinator (FSC) for two years. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA projects are reviewed for eligibility by the Delaware Department of Justice.                    |

## Project Name: OGOV LTG Delaware Art Museum

| Project Identification Number  | 21398  |
|--|--|
| Project Expenditure Category   | 2-Negative Economic Impacts  |
| Project Expenditure Subcategory  | 2.37-Economic Impact Assistance: Other   |
| Status To Completion   | Completed less than 50%  |
| Adopted Budget   | \$125,000.00   |
| Program Income Earned  | \$0.00   |
| Program Income Expended  | \$0.00   |
| Total Cumulative Obligations   | \$125,000.00   |
| Total Cumulative Expenditures  | \$62,500.00  |
| Current Period Obligations   | \$15,000.00  |
| Current Period Expenditures  | \$0.00   |
| Project Description  | The Delaware Art Museum (DAM) seeks \$110,000 in<br>ARPA funding that will fund its new Healing Through the<br>Arts (HTA) programs. The DAM's plan is to offer "specific<br>programs with topics around processing and healing from<br>the ongoing effects of the pandemic, alongside addressing<br>various social detriments of health within our communities<br>such as substance use and behavioral health." A portion of<br>the funding may go toward trauma-informed certification for<br>instructors. Beyond that, funds will go towards supplies,<br>administrative fees, instructor wages, and other related costs.<br>DAM's HTA programs deliberately aim to target their<br>services at children and other parties similarly impacted by<br>the COVID emergency. The programs expect to be able to<br>help HTA students with the isolation, loss of instructional<br>time, and other related problems that the pandemic generated<br>or exacerbated. These activities will provide an important<br>creative outlet for these individuals to both process their<br>health and experience a form of personal healing through the<br>power of creativity and artistic expression. |
| Does this project include a capital expenditure?   | No   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions | \$0.00   |

| Is a program evaluation of the project being conducted?   | Yes   |
|---|---|
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Secondary Impacted and/or Disproportionately Impacted populations   | 2 Imp Low or moderate income HHs or populations   |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | To offer "specific programs with topics around processing<br>and healing from the ongoing effects of the pandemic,<br>alongside addressing various social detriments of health<br>within our communities such as substance use and<br>behavioral health." |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA projects are reviewed for eligibility by the Delaware Department of Justice.   |

## Project Name: OGOV LTG Tech Impact

| 21401   |
|---|
| 1-Public Health   |
| 1.14-Other Public Health Services   |
| Completed 50% or more   |
| \$60,000.00   |
| \$0.00  |
| \$0.00  |
| \$60,000.00   |
| \$60,000.00   |
| \$0.00  |
| \$0.00  |
| Tech Impact seeks ARPA funding to respond to the public<br>health impacts of the COVID-19 public health emergency<br>for the purposes of forming a partnership with Brandywine<br>Counseling & Community Services to implement a<br>data-driven approach to identifying the riskiness of BCCS<br>patients failing to continue with their treatment plans, which<br>will serve to augment the knowledge of the counselors and<br>aid their ability to provide interventions for clients.           |
| No  |
| 1 Imp General Public  |
| Tech Impact seeks ARPA funding to respond to the public<br>health impacts of the COVID-19 public health emergency<br>for the purposes of forming a partnership with Brandywine<br>Counseling & Community Services (BCCS) to implement a<br>data-driven approach to identifying the riskiness of BCCS<br>patients failing to continue with their<br>treatment plans, which will serve to augment the knowledge<br>of the counselors and aid their ability to provide<br>interventions for clients. |
|   |

All ARPA projects are reviewed for eligibility by the Delaware Department of Justice.

## Project Name: OGOV LTG DETV

| Project Identification Number  | 21403   |
|--|---|
| Project Expenditure Category   | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory  | 2.37-Economic Impact Assistance: Other  |
| Status To Completion   | Completed less than 50%   |
| Adopted Budget   | \$150,000.00  |
| Program Income Earned  | \$0.00  |
| Program Income Expended  | \$0.00  |
| Total Cumulative Obligations   | \$150,000.00  |
| Total Cumulative Expenditures  | \$75,000.00   |
| Current Period Obligations   | \$0.00  |
| Current Period Expenditures  | \$0.00  |
| Project Description  | This specific project or purchase description is seeking to<br>increase access to information regarding treatment and<br>support services available to individuals in recovery and<br>their families, during and post, the COVID-19 pandemic.<br>Ensuring access to treatment and services that considers and<br>engages diversity and the representation of underrepresented<br>groups in the community through the media industry, will<br>improve outcomes for the state of Delaware as a whole.<br>Individuals seeking to enter recovery or remain in recovery<br>need reliable, consistent, and up-to-date information<br>regarding their treatment options and where to access<br>support services. While executing this media campaign<br>designed to engage difficult-to-reach populations, DETV<br>will seek to improve the pipeline of youth with skills and<br>interest in the multi-media production industry by offering a<br>workforce development opportunity for<br>youth in Delaware. Participants in the workforce<br>development aspect of this essential media campaign will<br>engage in industry-specific skills training in the field of mass<br>communications, "Introduction to Multi-Media Production."<br>Students will help with content creation and production to<br>ensure messaging to reach their peers. |
| Does this project include a capital expenditure?   | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions | \$0.00  |
| Is a program evaluation of the project being conducted?  | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?                                | 1 Imp General Public  |
| Secondary Impacted and/or Disproportionately Impacted populations  | 2 Imp Low or moderate income HHs or populations   |
| Is a program evaluation of the project being conducted?  | Yes   |
|  | DETV seeks to increase access to information regarding treatment and support services available to individuals in   |

| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | recovery and their families, during and post, the COVID-19<br>pandemic. Ensuring access to treatment and services that<br>considers and engages diversity and the representation of<br>underrepresented groups in the community through the<br>media industry, will improve outcomes for the state of<br>Delaware as a whole. |
|---|---|
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA projects are reviewed for eligibility by the Delaware Department of Justice.   |

## Project Name: OGOV LTG Wilmington Senior Center

| Project Identification Number   | 21404  |
|---------------------------------|--|
| Project Expenditure Category    | 2-Negative Economic Impacts  |
| Project Expenditure Subcategory | 2.37-Economic Impact Assistance: Other   |
| Status To Completion            | Completed 50% or more  |
| Adopted Budget                  | \$50,000.00  |
| Program Income Earned           | \$0.00   |
| Program Income Expended         | \$0.00   |
| Total Cumulative Obligations    | \$50,000.00  |
| Total Cumulative Expenditures   | \$50,000.00  |
| Current Period Obligations      | \$0.00   |
| Current Period Expenditures     | \$0.00   |
| Project Description             | The COVID-19 pandemic has been a key challenge for the<br>Wilmington Senior Center since March 2020. We were<br>closed to inperson activities from March 2020 until July<br>2021. To date, many participants and members have been<br>hesitant to return to in-person programming. While there<br>remains a need for our offerings, concerns about appropriate<br>social distancing continue to affect the older adults we serve.<br>This is of particular concern for those who need<br>transportation to the Wilmington Senior Center. The<br>Wilmington Senior Center's neighborhood is a Qualified<br>Opportunity Zone and identified as a promise community by<br>the United Way of Delaware. These designations highlight<br>the economic challenges facing neighborhood residents,<br>which include the diverse seniors we serve. Lifelong<br>economic and health disparities continue to challenge many<br>of the older adults we serve. The Wilmington Senior<br>Center's mission is to provide lifesustaining and<br>life-enriching services, opportunities, and partnerships that<br>have a positive impact on the physical, mental, and social<br>well-being of older adults and that contribute to future<br>generations. We provide programs that respond to critical<br>community needs and help older adults experience healthy<br>and independent aging, manage chronic disease effectively,<br>and reduce the economic insecurity plaguing one in three<br>older adults. The Wilmington Senior Center has a critical<br>need for a 12-15 passenger vehicle. Due to the current labor<br>market, we have been unable to hire a driver with a<br>Commercial Driver's License (CDL) with a passenger<br>endorsement because we cannot compete with private and<br>public bus companies offering higher wages, benefits, and |

|   | onboarding incentives. A 12-15 passenger vehicle does not<br>require a CDL. We currently have a staff member who is<br>transporting our members in a smaller six-passenger van that<br>does not require a CDL. However, using the small van<br>requires more time than a larger vehicle that can<br>accommodate more passengers per trip and allow for more<br>appropriate social distancing. A 12-15 passenger vehicle will<br>cut his transport time in half, reducing personnel expenses.<br>A newer, larger vehicle will provide more comfort,<br>accessibility, and safety for our older adult riders. |
|---|---|
| Does this project include a capital expenditure?  | Yes   |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$50,000.00   |
| Type of capital expenditures, based on the following enumerated uses  | Other (please specify)  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00  |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Secondary Impacted and/or Disproportionately Impacted populations   | 2 Imp Low or moderate income HHs or populations   |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Wilmington Senior Center to help purchase a new 12-15<br>passenger vehicle to transport older adults<br>to its facility for existing programs and to other locations for<br>anticipated new programming.  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA projects are reviewed for eligibility by the Delaware Department of Justice.   |

## Project Name: OGOV LTG Purpose PR

| Project Identification Number   | 21405   |
|---------------------------------|---|
| Project Expenditure Category    | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory | 2.37-Economic Impact Assistance: Other  |
| Status To Completion            | Not Started   |
| Adopted Budget                  | \$50,000.00   |
| Program Income Earned           | \$0.00  |
| Program Income Expended         | \$0.00  |
| Total Cumulative Obligations    | \$50,000.00   |
| Total Cumulative Expenditures   | \$50,000.00   |
| Current Period Obligations      | \$50,000.00   |
| Current Period Expenditures     | \$50,000.00   |
|                                 | PPRA seeks \$50,000 of ARP A funding to create a public relations and digital marketing campaign to create awareness of, and provide information concerning, resources that are |

| Project Description                              | available to individuals in underserved communities within<br>the State. The pandemic's role in worsening the ongoing<br>opioid crisis and the marked increase in the overdose death<br>rates among minorities. The Program's goal is to help<br>prevent overdose deaths by (a) increasing access and<br>reducing barriers to proven treatment and recovery support<br>services for people in underserved communities, and (b)<br>providing education about naloxone (a lifesaving overdose<br>reversal drug) and substance use risks in those populations. |
|--|---|
| Does this project include a capital expenditure? | No  |

## Project Name: OGOV LTG Safe United S.U.N.

| Project Identification Number   | 21560  |
|---|--|
| Project Expenditure Category  | 2-Negative Economic Impacts  |
| Project Expenditure Subcategory   | 2.37-Economic Impact Assistance: Other   |
| Status To Completion  | Completed less than 50%  |
| Adopted Budget  | \$60,000.00  |
| Program Income Earned   | \$0.00   |
| Program Income Expended   | \$0.00   |
| Total Cumulative Obligations  | \$60,000.00  |
| Total Cumulative Expenditures   | \$38,000.00  |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | Providing a larger facility to operate S.U.N. Park to<br>accommodate more youth and adults. The amount of<br>\$60,000 will allow SUN to provide a larger facility and<br>continue events daily. The goal is to serve 200-300 residents<br>monthly. |
| Does this project include a capital expenditure?  | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$60,000.00  |
| Type of capital expenditures, based on the following enumerated uses  | Improvements to existing facilities  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions                  | \$0.00   |
| Is a program evaluation of the project being conducted?   | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Secondary Impacted and/or Disproportionately Impacted populations   | 2 Imp Low or moderate income HHs or populations  |
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced | Create a targeted public relations and digital media<br>campaign to help prevent overdose deaths in underserved<br>communities   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or                   | All ARPA projects are reviewed for eligibility by the  |

#### Project Name: OGOV LTG Network Connect

| Project Identification Number   | 21562  |
|---|--|
| Project Expenditure Category  | 2-Negative Economic Impacts  |
| Project Expenditure Subcategory   | 2.37-Economic Impact Assistance: Other   |
| Status To Completion  | Completed less than 50%  |
| Adopted Budget  | \$100,000.00   |
| Program Income Earned   | \$0.00   |
| Program Income Expended   | \$0.00   |
| Total Cumulative Obligations  | \$100,000.00   |
| Total Cumulative Expenditures   | \$50,000.00  |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | To support the Community Well-Being Ambassador<br>(CWA), a community-driven, place based prevention<br>strategy to increase the capacity of targeted neighborhoods<br>in the City of Wilmington by promoting community<br>well-being and resiliency among their residents across the<br>life span. 24 Community Well-Being Ambassadors were<br>hired to join the initiative which is a community-driven,<br>place- based prevention strategy to increase the capacity of<br>targeted neighborhoods in Wilmington and Rt. 9 corridor by<br>promoting community wellbeing and resiliency among their<br>residents across the life span. Each Ambassador spends 10<br>hours a week at assigned host locations to provide services<br>to community members. Ambassadors attend and host<br>community meetings and events in their assigned zip codes.<br>Each provides 21st century care management to community<br>members tracked and evaluated monthly. |
| Does this project include a capital expenditure?  | No   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions                  | \$0.00   |
| Is a program evaluation of the project being conducted?   | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Secondary Impacted and/or Disproportionately Impacted populations   | 2 Imp Low or moderate income HHs or populations  |
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced | To support the Community Well-Being Ambassador<br>(CWA), a community-driven, place based prevention<br>strategy to increase the capacity of targeted neighborhoods<br>in the City of Wilmington by promoting community<br>well-being and resiliency among their residents across the<br>life span.   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or                   | All ARPA projects are reviewed for eligibility by the  |

## Project Name: OGOV LTG Life Community Church

| _   |   |
|---|---|
| Project Identification Number   | 21582   |
| Project Expenditure Category  | 1-Public Health   |
| Project Expenditure Subcategory   | 1.14-Other Public Health Services   |
| Status To Completion  | Completed 50% or more   |
| Adopted Budget  | \$30,000.00   |
| Program Income Earned   | \$0.00  |
| Program Income Expended   | \$0.00  |
| Total Cumulative Obligations  | \$30,000.00   |
| Total Cumulative Expenditures   | \$30,000.00   |
| Current Period Obligations  | \$0.00  |
| Current Period Expenditures   | \$0.00  |
| Project Description   | This specific project or<br>purchase description is Life Community Church will provide<br>counseling services in order to address health, economic,<br>educational, and social disparities that so many people are<br>suffering with issues due to the COVID-19 pandemic. |
| Does this project include a capital expenditure?  | No  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Secondary Impacted and/or Disproportionately Impacted populations   | 2 Imp Low or moderate income HHs or populations   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Provide counseling services in order to address health,<br>economic, educational, and social disparities related to the<br>COVID-19 pandemic.   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA projects are reviewed for eligibility by the Delaware Department of Justice.   |
|   |   |

#### Project Name: OGOV LTG Limen

| Project Identification Number   | 21583                             |
|---------------------------------|-----------------------------------|
| Project Expenditure Category    | 1-Public Health                   |
| Project Expenditure Subcategory | 1.14-Other Public Health Services |
| Status To Completion            | Completed less than 50%           |
| Adopted Budget                  | \$30,000.00                       |
| Program Income Earned           | \$0.00                            |
| Program Income Expended         | \$0.00                            |
| Total Cumulative Obligations    | \$30,000.00                       |
| Total Cumulative Expenditures   | \$30,000.00                       |
| Current Period Obligations      | \$0.00                            |
| Current Period Expenditures     | \$0.00                            |

| Project Description   | This specific project or purchase description is focused on<br>addressing the mental wellness and substance use disorder<br>that continue to challenge our community and has grown<br>during the pandemic. Our board and staff respectfully<br>request a \$30,000 grant to furnish our new treatment center<br>and renovation of the 2nd and 3rd floor to expand to Level<br>3.1 care, 24 hours a day center that will be part of our new<br>location at the Aloysius Butler & Clark (ABC) building<br>located at 819 Washington St, Wilmington, DE. This new<br>location will help Limen to expand Outpatient Counseling<br>and residential treatment services to meet the growing need<br>for support in our community. |
|---|---|
| Does this project include a capital expenditure?  | No  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 2 Imp Low or moderate income HHs or populations   |
| Secondary Impacted and/or Disproportionately Impacted populations   | 1 Imp General Public  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Limen Recovery + Wellness seeks additional ARPA funding<br>in the amount of \$30,000.00 to furnish its new treatment<br>center and renovate the second and third floors of a recently<br>purchased building at 819 Washington Street, Wilmington,<br>Delaware.  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA projects are reviewed for eligibility by the Delaware Department of Justice.   |

## Project Name: OGOV United Way SBM

| Project Identification Number   | 21588  |
|---------------------------------|--|
| Project Expenditure Category    | 1-Public Health  |
| Project Expenditure Subcategory | 1.12-Mental Health Services  |
| Status To Completion            | Completed less than 50%  |
| Adopted Budget                  | \$1,300,000.00   |
| Program Income Earned           | \$0.00   |
| Program Income Expended         | \$0.00   |
| Total Cumulative Obligations    | \$1,300,000.00   |
| Total Cumulative Expenditures   | \$867,000.00   |
| Current Period Obligations      | \$0.00   |
| Current Period Expenditures     | \$433,000.00   |
| Project Description             | Now in its 12th year, Stand by Me (SBM) is a public/private<br>partnership program lead by the Delaware Department of<br>Health and Social Services and United Way of Delaware<br>(UWDE). UWDE invests program funding directly into<br>local Community Based Organizations (CBOs) that hire<br>SBM Coaches to implement the program at no cost to<br>Delawareans as the program's customers. The SBM<br>Program coaches work one-on-one with customers to build<br>and/or rebuild their financial stability. Coaches work with<br>customers to increase their financial assets (i.e.,<br>creating/growing a savings account, reducing debt,<br>increasing credit score, purchasing car/home/etc.). United |

|   | Way of Delaware and multiple Delaware Community Based Organizations via contract.   |
|---|---|
| Does this project include a capital expenditure?  | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00  |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Secondary Impacted and/or Disproportionately Impacted populations   | 2 Imp Low or moderate income HHs or populations   |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | UWDE invests program funding directly into local<br>Community Based Organizations (CBOs) that hire SBM<br>Coaches to implement the program at no cost to<br>Delawareans as the program's customers. The SBM Program<br>coaches work one-on-one with customers to build and/or<br>rebuild their financial stability. Coaches work with<br>customers to increase their financial assets (i.e.,<br>creating/growing a savings account, reducing debt,<br>increasing credit score, purchasing car/home/etc.). |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All projects are reviewed by Delaware's DOJ for ARPA eligibility  |

## Project Name: OGOV LTG Women of Exception

| Project Identification Number  | 21589   |
|--|---|
| Project Expenditure Category   | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory  | 2.37-Economic Impact Assistance: Other  |
| Status To Completion   | Completed less than 50%   |
| Adopted Budget   | \$80,000.00   |
| Program Income Earned  | \$0.00  |
| Program Income Expended  | \$0.00  |
| Total Cumulative Obligations   | \$80,000.00   |
| Total Cumulative Expenditures  | \$60,000.00   |
| Current Period Obligations   | \$0.00  |
| Current Period Expenditures  | \$0.00  |
| Project Description  | This specific project or purchase description is different<br>services such as: door to door Narcan training, translation<br>services to the Haitians, Hispanics and Ivorian communities,<br>hired two outreach workers and a program director and<br>transportation services and weekly support group. |
| Does this project include a capital expenditure?   | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions | \$0.00  |
| Is a program evaluation of the project being conducted?  | Yes   |

| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 2 Imp Low or moderate income HHs or populations  |
|---|--|
| Secondary Impacted and/or Disproportionately Impacted populations   | 1 Imp General Public   |
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | The specific project is different services such as:door to door<br>Narcan training, translation services to the Haitians,<br>Hispanics and Ivorian communities, hired 2 outreach<br>workers and a program director and transportation services<br>and weekly support group |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA projects are reviewed for eligibility by the Delaware Department of Justice.  |

## Project Name: OGOV Milford Housing

| Project Identification Number  | 21500  |
|--|--|
| Project Identification Number  | 21590  |
| Project Expenditure Category   | 2-Negative Economic Impacts  |
| Project Expenditure Subcategory  | 2.15-Long-Term Housing Security: Affordable Housing  |
| Status To Completion   | Not Started  |
| Adopted Budget   | \$1,900,000.00   |
| Program Income Earned  | \$0.00   |
| Program Income Expended  | \$0.00   |
| Total Cumulative Obligations   | \$1,900,000.00   |
| Total Cumulative Expenditures  | \$650,000.00   |
| Current Period Obligations   | \$0.00   |
| Current Period Expenditures  | \$0.00   |
| Project Description  | This specific project or purchase description is to assist<br>approximately 70 individuals in achieving homeownership<br>through MHDC's homeownership programs and projects. |
| Does this project include a capital expenditure?   | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable | \$1,900,000.00   |
| Type of capital expenditures, based on the following enumerated uses                           | Affordable housing, supportive housing, or recovery housing  |

## Project Name: OGOV DANA Healthcare

| Project Identification Number   | 21636                             |
|---------------------------------|-----------------------------------|
| Project Expenditure Category    | 1-Public Health                   |
| Project Expenditure Subcategory | 1.14-Other Public Health Services |
| Status To Completion            | Completed 50% or more             |
| Adopted Budget                  | \$1,101,150.00                    |
| Program Income Earned           | \$0.00                            |
| Program Income Expended         | \$0.00                            |
|                                 |                                   |

| Total Cumulative Obligations  | \$1,101,150.00  |
|---|---|
| Total Cumulative Expenditures   | \$1,101,150.00  |
| Current Period Obligations  | \$0.00  |
| Current Period Expenditures   | \$0.00  |
| Project Description   | Will fund the setup of the healthcare plan to meet the<br>requirement as established through regulation and support<br>overhead and financial reporting costs. Funds will be spent<br>down by December 2024. Funds will support the start-up<br>costs, and participants in the plan will pay for the cost of the<br>insurance coverage for their employees.   |
| Does this project include a capital expenditure?  | No  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | DANA seeks the State¿s partnership to alleviate the biggest<br>cost driver nonprofits have and provide much needed relief<br>to the sector that contributes to Delawareans quality of life.<br>DANA is searching for a way to reduce some of the burden<br>on nonprofits. One option is an Association Health Plan<br>(AHP) which can also be termed a Multiple Employer<br>Welfare Arrangement (MEWA). The idea of these plans is<br>that they allow an umbrella organization (such as DANA) to<br>offer its members a health plan . |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All project proposals are reviewed by Delaware's DOJ for ARPA eligibility.  |

## Project Name: OGOV DANA Accelerator

| Project Identification Number   | 21637  |
|---------------------------------|--|
| Project Expenditure Category    | 2-Negative Economic Impacts  |
| Project Expenditure Subcategory | 2.37-Economic Impact Assistance: Other   |
| Status To Completion            | Not Started  |
| Adopted Budget                  | \$400,000.00   |
| Program Income Earned           | \$0.00   |
| Program Income Expended         | \$0.00   |
| Total Cumulative Obligations    | \$400,000.00   |
| Total Cumulative Expenditures   | \$0.00   |
| Current Period Obligations      | \$0.00   |
| Current Period Expenditures     | \$0.00   |
|                                 | During the pandemic small nonprofits that serve<br>marginalized communities were disproportionately<br>impacted. The demand for their services skyrocketed, while<br>the funding resources they traditionally relied on dried up<br>(such as program and event revenue) or were redirected to<br>Covid-relief efforts. We heard from government officials<br>that a desire to partner with these smaller agencies was not<br>possible because they did not have the sophistication in<br>systems and processes for them to engage or receive<br>government grants or contracts. They also struggled to |

| Project Description Projec | cure grant funding. DANA stepped in during the<br>indemic, offering free technical assistance to help these<br>ganizations secure PPP loans, get reimbursed for<br>ovid-related expenses through the CARES Act, or receive<br>ants through the Covid-19 Strategic Response Initiative<br>liministered by Delaware Community Foundation and<br>nilanthropy Delaware. But that support ended with the state<br>emergency. These organizations are caught in a loop<br>here they have staff to provide critical services, but they do<br>ot have the expertise or bandwidth for the administrative<br>dmanagement activities that are necessary to expand<br>rvices, partner with government, or secure diverse revenue<br>reams.<br>ne new DANA Nonprofit Accelerator Initiative would help<br>ese small, but impactful nonprofit organizations to<br>vercome the economic hardship they and their communities<br>dured. Through this program they can increase their<br>tential to scale, expand their services, and their impact in<br>eveloping new workforces, enhancing youth academic<br>ccess, improving health lifestyles, and quality of life in<br>elaware, and in particular within marginalized<br>ommunities. The program provides three years of support<br>rough training, technical assistance (including back-office<br>stems), coaching, and consulting in the operational areas<br>e organization needs to enhance. The operational areas<br>e organization needs to enhance. The operational areas<br>ould include board development, financial management,<br>ndraising, public policy, marketing, IT, to name a few.<br>ANA will have identified business and consultant partners<br>ho will work through DANA to provide education,<br>aching, consulting, and technical support. |
|--|--|
| Does this project include a capital expenditure? No  | 0  |

## Project Name: OGOV Perinatal Prana Extension

| Project Identification Number   | 21685   |
|---------------------------------|---|
| Project Expenditure Category    | 1-Public Health   |
| Project Expenditure Subcategory | 1.12-Mental Health Services   |
| Status To Completion            | Completed less than 50%   |
| Adopted Budget                  | \$751,367.00  |
| Program Income Earned           | \$0.00  |
| Program Income Expended         | \$0.00  |
| Total Cumulative Obligations    | \$751,367.00  |
| Total Cumulative Expenditures   | \$205,000.00  |
| Current Period Obligations      | \$0.00  |
| Current Period Expenditures     | \$0.00  |
| Project Description             | This specific project or purchase description is for the<br>continuation of the Josie's Grace* 4th trimester stress<br>program. Josie's Grace is a small group program for early<br>postpartum adjustment support, Perinatal Mood and Anxiety<br>Disorder (PMAD) screening, and evidenced-based<br>intervention. This program was launched in 2022 to reduce<br>the isolation, stigma, and guilt<br>of maternal mental illness postpartum/post pandemic, in |

|   | combination with improving rates of women with early<br>assessment and intervention for PMADs. This program also<br>sustains a new community-based location of care in Newark,<br>DE for perinatal mental health.   |
|---|---|
| Does this project include a capital expenditure?  | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00  |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | continuation of the Josie's Grace* 4th trimester stress<br>program. Josie's Grace is a small group program for early<br>postpartum adjustment support, Perinatal Mood and Anxiety<br>Disorder (PMAD) screening, and evidenced-based<br>intervention. This program was launched in 2022 to reduce<br>the isolation, stigma, and guilt of maternal mental illness<br>postpartum/post pandemic, in combination with improving<br>rates of women with early assessment and intervention for<br>PMADs. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All proprosals are reviwed by the Delaware Department of Justice for eligibility determination  |

## Project Name: OGOV Ministry of Caring

| Project Identification Number                    | 21686   |
|--|---|
| Project Expenditure Category                     | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory                  | 2.18-Housing Support: Other Housing Assistance  |
| Status To Completion                             | Completed less than 50%   |
| Adopted Budget                                   | \$500,000.00  |
| Program Income Earned                            | \$0.00  |
| Program Income Expended                          | \$0.00  |
| Total Cumulative Obligations                     | \$500,000.00  |
| Total Cumulative Expenditures                    | \$125,000.00  |
| Current Period Obligations                       | \$0.00  |
| Current Period Expenditures                      | \$0.00  |
| Project Description                              | \$500,000 to cover operating cost of House of Joseph II, a<br>permanent supportive housing project for individuals with<br>HIV/AIDS and Mary Mother of Hope Permanent Supportive<br>Housing, a project for formerly homeless women. These<br>projects lost funding during COVID-19 due to a reallocation<br>of funds by the Delaware Continuum of Care which resulted<br>in the defunding of these programs. State funding will allow<br>these programs to continue to provide residential services to<br>Delaware's most vulnerable citizens, while alternative<br>long-term funding solutions are sought. |
| Does this project include a capital expenditure? | No  |

| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00  |
|---|---|
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 14 Dis Imp Low income HHs and populations   |
| Secondary Impacted and/or Disproportionately Impacted populations   | 2 Imp Low or moderate income HHs or populations   |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | operating costs of House of Joseph II, a permanent<br>supportive housing project for individuals with HIV/AIDS<br>and Mary Mother of Hope Permanent Supportive Housing, a<br>project for formerly homeless women. These projects lost<br>funding during COVID-19 due to a reallocation of funds by<br>the Delaware Continuum of Care which resulted in the<br>defunding of these programs. State funding will allow these<br>programs to continue to provide residential services to<br>Delaware's most vulnerable citizens,. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All project proposals are reviewed by Delaware DOJ for ARPA eligibility.  |

## Project Name: OGOV LTG Dover Interfaith

| Project Identification Number   | 21689  |
|---------------------------------|--|
| Project Expenditure Category    | 2-Negative Economic Impacts  |
| Project Expenditure Subcategory | 2.18-Housing Support: Other Housing Assistance   |
| Status To Completion            | Completed 50% or more  |
| Adopted Budget                  | \$40,000.00  |
| Program Income Earned           | \$0.00   |
| Program Income Expended         | \$0.00   |
| Total Cumulative Obligations    | \$40,000.00  |
| Total Cumulative Expenditures   | \$40,000.00  |
| Current Period Obligations      | \$0.00   |
| Current Period Expenditures     | \$0.00   |
| Project Description             | The Delaware Department of Health and Social Services<br>will use the ARPA funding for the Dover Interfaith Mission<br>for Housing's (the "Mission") project for Opportunities for<br>the Displaced in Dover. The Request is for funds to employ<br>a case manager to assist with employment and housing for<br>individuals displaced by the COVID-19 pandemic and<br>experiencing homelessness. The ARPA funds will be used to<br>employ a case manager to complement the Mission's active<br>and established case management program. This will focus<br>on the employment of persons in the Greater Dover area<br>who have been displaced by the Covid-19 pandemic and wil<br>include guiding and assisting those who need housing to<br>obtain it. Individuals affected by job loss during the<br>pandemic will be coached and assisted to regain positions in<br>the local business community that pay a living wage. |

| Does this project include a capital expenditure?  | No  |
|---|---|
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00  |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 4 Imp HHs that experienced increased food or housing insecurity   |
| Secondary Impacted and/or Disproportionately Impacted populations   | 3 Imp HHs that experienced unemployment   |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | The Request is for funds to employ a case manager to assist<br>with employment and housing for individuals displaced by<br>the COVID-19 pandemic and experiencing homelessness.<br>The Request is for a total of \$40,000.00. As the Mission's<br>Worksheet indicates, the ARPA funds will be used to<br>employ a case manager to complement the Mission's active<br>and established case management program. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA projects are reviewed for eligibility by the Delaware Department of Justice.   |

\_

## Project Name: OGOV LTG The HOPE Commission

| Project Identification Number   | 21690  |
|---------------------------------|--|
| Project Expenditure Category    | 2-Negative Economic Impacts  |
| Project Expenditure Subcategory | 2.37-Economic Impact Assistance: Other   |
| Status To Completion            | Completed less than 50%  |
| Adopted Budget                  | \$100,000.00   |
| Program Income Earned           | \$0.00   |
| Program Income Expended         | \$0.00   |
| Total Cumulative Obligations    | \$100,000.00   |
| Total Cumulative Expenditures   | \$27,500.00  |
| Current Period Obligations      | \$0.00   |
| Current Period Expenditures     | \$0.00   |
| Project Description             | This specific project or purchase description is the intention<br>of the HOPE Commission to expand our evidenced based<br>re-entry program services to Kent County in Dover,<br>Delaware. Currently, there are limited services available in<br>the Greater Dover area for individuals returning to the<br>community. At the Hope Commission, our services in New<br>Castle County, DE have a three-pronged approach. We<br>provide case management services, job coaching and<br>employment support services, and peer services. The<br>combination of these three services help individuals<br>returning to the community improve their chance for finding<br>success and not returning to prison. Reentry services are not<br>just about keeping a person from returning to prison, but<br>helping an individual develop the necessary goals, plan, and<br>skills so that they can live a full and rich life, while being a<br>productive and accepted member of their community. |

| Does this project include a capital expenditure?  | No  |
|---|---|
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00  |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 2 Imp Low or moderate income HHs or populations   |
| Secondary Impacted and/or Disproportionately Impacted populations   | 1 Imp General Public  |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Dover Hope Zone program, which provides re-entry services<br>to justice-involved individuals in the greater Dover area of<br>Kent County, Delaware. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA projects are reviewed for eligibility by the Delaware Department of Justice.   |

## Project Name: OGOV LTG Amanacer Counseling

| Project Identification Number   | 21691  |
|---------------------------------|--|
| Project Expenditure Category    | 1-Public Health  |
| Project Expenditure Subcategory | 1.12-Mental Health Services  |
| Status To Completion            | Completed less than 50%  |
| Adopted Budget                  | \$96,525.00  |
| Program Income Earned           | \$0.00   |
| Program Income Expended         | \$0.00   |
| Total Cumulative Obligations    | \$96,525.00  |
| Total Cumulative Expenditures   | \$18,810.00  |
| Current Period Obligations      | \$0.00   |
| Current Period Expenditures     | \$0.00   |
|                                 | The Delaware Office of Lieutenant Governor seeks to use<br>American Rescue Plan Act (ARPA) funding from its<br>Recovery Management Support Services Grant to support a<br>\$96,525 grant to Family Counseling Center of St. Paul's<br>d/b/a Amanecer Counseling and Resource Center for the<br>project named "Strengthening the Continuum of Care:<br>Expanding the delivery of accessible & affordable bilingual,<br>culturally responsive behavioral healthcare in Delaware"<br>("the Project"). The Project serves Hispanic, African<br>American and Mixed-Race communities as follows: Therapy<br>Screenings. Legal Liaison, and Resource Navigation<br>Services: Up to seventy-five (75) sessions for uninsured and<br>under-insured clients @ \$45 per session = \$3,375 Therapy<br>Sessions: Up to one hundred twenty-five (125) sessions<br>(45-60 minutes per session) for uninsured and under-insured<br>clients at \$140 per session = \$17,500 Direct-Assistance:<br>Support to pay for rent, mortgage, and utilities for<br>individuals and families living below the poverty line who<br>are negatively affected by the pandemic – 25 to 50 clients at<br>\$500-\$1,000 per client (depending on their needs and |

| Project Description   | situation) = \$25,000<br>Physical space: Rental support for group therapy sessions –<br>based on \$85 per group session in the City of Wilmington at<br>two (2) sessions/week = \$8,840 Workforce Development:<br>Research, identification, recruitment, supervision, training,<br>hiring, and retention of clinical candidates. Personnel:<br>Deputy Director and Behavioral Health Manager,<br>Receptionist, Intake Coordinator, Finance Manager, and<br>Operations Manager. (2) Masters-level clinical fellows<br>working on their licensure (2) Clinical Interns working on<br>their master's degree – (mileage & laptops only) Laptops<br>and Professional Development for above program staff<br>Curriculum Consultant<br>Educational Assistance for two (2) masters-level clinical<br>fellows (post licensure) Expansion of services into southern<br>Delaware with increased fundraising efforts: Advertising:<br>Personnel: Resource Fund Development for Resource Fund<br>Development Manager, Funding/donor management<br>platform<br>Overhead (1.5%) \$41,810. TOTAL: \$96,525 |
|---|--|
| Does this project include a capital expenditure?  | No   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00   |
| Is a program evaluation of the project being conducted?   | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 2 Imp Low or moderate income HHs or populations  |
| Secondary Impacted and/or Disproportionately Impacted populations   | 1 Imp General Public   |
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | To support a grant to Amanecer Counseling and Resource<br>Center for the project named "Strengthening the Continuum<br>of Care: Expanding the delivery of accessible & affordable<br>bilingual, culturally responsive behavioral healthcare in<br>Delaware"  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All projects are reviewed by Delaware DOJ for ARPA eligibility.  |

## Project Name: OGOV LTG Shepherd Place

| Project Identification Number   | 21790  |
|---------------------------------|--|
| Project Expenditure Category    | 2-Negative Economic Impacts                    |
| Project Expenditure Subcategory | 2.18-Housing Support: Other Housing Assistance |
| Status To Completion            | Completed less than 50%                        |
| Adopted Budget                  | \$100,000.00                                   |
| Program Income Earned           | \$0.00   |
| Program Income Expended         | \$0.00   |
| Total Cumulative Obligations    | \$100,000.00                                   |
| Total Cumulative Expenditures   | \$25,000.00                                    |

| Current Period Obligations  | \$0.00  |
|---|---|
| Current Period Expenditures   | \$0.00  |
| Project Description   | This funding will be used for covid-19 mitigation and<br>prevention. It will allow us the capital gain to be able to<br>maintain the shelter and purchase the needed preventative<br>supplies to keep us a covid free shelter so that we can<br>continue to operate on a 365 day a year, 12 month, 7 day a<br>week, 24 hour a day schedule and be fully staffed. We will<br>also use this funding for housing related needs with the<br>shelter now being from 30-90 days it extends the time that is<br>needed to assure that our residents leave and be housed and<br>not leave to be homeless going into another facility, we will<br>be able to offer a more extended timeframe and try to work<br>with our residents to better accommodate them for moving<br>into their own housing. During the covid19 pandemic that<br>hit us all by surprise we had to navigate very tough financial<br>times and loss amounts of funding that we used to sustain<br>our administrative budget. We lost a great deal of our public<br>support during this time as well as some grant funding. We<br>are hoping that with inquiring from this grant that we will be<br>able to financial get to a place that we can support or<br>administrative costs as well as the staying on top of the<br>covid virus which is simply not going anywhere right now.<br>So that we can assure to have a safe environment for our<br>staff as well as for our residents. |
| Does this project include a capital expenditure?  | Yes   |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$100,000.00  |
| Type of capital expenditures, based on the following enumerated uses  | Improvements to existing facilities   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00  |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 4 Imp HHs that experienced increased food or housing insecurity   |
| Secondary Impacted and/or Disproportionately Impacted populations   | 1 Imp General Public  |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | To purchase the needed preventative supplies to maintain a covid free shelter so that they can continue to operate on a 365 day a year, 12 month, 7 day a week, 24 hour a day schedule and offer extended assistance to families without alternative housing.   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA projects are reviewed for eligibility by the Delaware Department of Justice.   |

## Project Name: OGOV LTG New Life Recovery

| Project Identification Number | 21807           |
|-------------------------------|-----------------|
| Project Expenditure Category  | 1-Public Health |
|                               |                 |

| Project Expenditure Subcategory                  | 1.13-Substance Use Services   |
|--|---|
| Status To Completion                             | Not Started   |
| Adopted Budget                                   | \$100,000.00  |
| Program Income Earned                            | \$0.00  |
| Program Income Expended                          | \$0.00  |
| Total Cumulative Obligations                     | \$100,000.00  |
| Total Cumulative Expenditures                    | \$58,760.00   |
| Current Period Obligations                       | \$0.00  |
| Current Period Expenditures                      | \$58,760.00   |
| Project Description                              | This specific project or purchase description is The NLFR<br>Program is designed to address the economic and financial<br>impact of opioid addiction and other forms of addiction on<br>Delawarean families and households by providing therapies<br>and education to mitigate the mental, emotional, and<br>psychological effects of addiction on the familyespecially<br>among family members who care and provide support to<br>their loved ones struggling with opioid addiction and other<br>forms of addiction. |
| Does this project include a capital expenditure? | No  |

#### Project Name: OGOV MH JFS Extension

| Project Identification Number   | 21841  |
|---------------------------------|--|
| Project Expenditure Category    | 1-Public Health  |
| Project Expenditure Subcategory | 1.12-Mental Health Services  |
| Status To Completion            | Completed less than 50%  |
| Adopted Budget                  | \$340,000.00   |
| Program Income Earned           | \$0.00   |
| Program Income Expended         | \$0.00   |
| Total Cumulative Obligations    | \$340,000.00   |
| Total Cumulative Expenditures   | \$170,000.00   |
| Current Period Obligations      | \$0.00   |
| Current Period Expenditures     | \$170,000.00   |
| Project Description             | As a result of funding from the ARPA 2022 award, JFS<br>Delaware hired a total of seven (7) therapists (two (2)<br>licensed and five (5) master level) to respond to the need for<br>the increased mental health support in the State of Delaware.<br>With this application, JFS is<br>requesting funding to continue the training and supervision<br>for the five (5) master level therapists, already hired, for an<br>additional year (Year 2) so they can complete their<br>requirements for licensure qualification and additionally,<br>prepare and take the licensure<br>examination at the end of their second year. The total<br>amount requested for the 5-master level therapist is<br>\$410,000. |
|                                 | Additional Direct Crisis Assistance funding for families and older adults within the community in the amount of \$50,000.  |

|   | Funding was requested and awarded from the ARPA 2022<br>award. The 2022 ARPA application requested money for<br>construction needs at the JFS Wilmington location. As<br>previously discussed, construction was completed but at a<br>savings of \$120,000. This<br>amount will be reallocated and will be used to offset our<br>ARPA 2023 request, resulting in the total amount to be<br>\$340,000.   |
|---|---|
| Does this project include a capital expenditure?  | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00  |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Through THERAPEUTIC COUNSELING, JFS provides<br>holistic outpatient and community base counseling services<br>with areas of expertise including, but not limited to 1)<br>Depression & Anxiety; 2) behavioral Issues; 3) Grief &<br>Loss; 4) Substance Use; 5) LGBTQIA+; 6)Marriage &<br>Family; and 7) Maternal Mental Health. In 2022, on average,<br>JFS served approximately 1200 individuals with Therapeutic<br>Counseling. This number continues to increase each year<br>since the start of the pandemic. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA projects are reviewed by the Delaware DOJ for eligibility determination.   |

# Project Name: OGOV LTG West End Neighborhood

| Project Identification Number   | 21858  |
|---------------------------------|--|
| Project Expenditure Category    | 2-Negative Economic Impacts  |
| Project Expenditure Subcategory | 2.18-Housing Support: Other Housing Assistance   |
| Status To Completion            | Completed less than 50%  |
| Adopted Budget                  | \$75,000.00  |
| Program Income Earned           | \$0.00   |
| Program Income Expended         | \$0.00   |
| Total Cumulative Obligations    | \$75,000.00  |
| Total Cumulative Expenditures   | \$50,000.00  |
| Current Period Obligations      | \$75,000.00  |
| Current Period Expenditures     | \$50,000.00  |
| Project Description             | This specific project or purchase description is The<br>Emergency Assistance for Fmmer Foster Care and Homeless<br>Individuals program offers case management services for<br>homeless youth earning 30% or less of Area Median<br>Income, aged 18-23. Funds cover foster care, emergency<br>assistance, food, rent, and temporary accommodations, and<br>support staff in facilitating access and utilizing public<br>benefits. |

| Does this project include a capital expenditure?  | No  |
|---|---|
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00  |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 2 Imp Low or moderate income HHs or populations   |
| Secondary Impacted and/or Disproportionately Impacted populations   | 1 Imp General Public  |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Purposes of providing emergency assistance including, food,<br>rent, and temporary accommodations via hotel vouchers) to<br>former foster care and other homeless individuals, and assist<br>these individuals with enrolling in and/or utilizing public<br>benefits. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA projects are reviewed for eligibility by the Delaware Department of Justice.   |

# Project Name: OGOV DOL Mobile Bus

| Project Identification Number                    | 21465   |
|--|---|
| Project Expenditure Category                     | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory                  | 2.37-Economic Impact Assistance: Other  |
| Status To Completion                             | Not Started   |
| Adopted Budget                                   | \$425,000.00  |
| Program Income Earned                            | \$0.00  |
| Program Income Expended                          | \$0.00  |
| Total Cumulative Obligations                     | \$235,945.00  |
| Total Cumulative Expenditures                    | \$0.00  |
| Current Period Obligations                       | \$0.00  |
| Current Period Expenditures                      | \$0.00  |
| Project Description                              | The Delaware Department of Labor and the and the Division<br>of Employment & Training (together, "DOL") seek<br>American Rescue Plan Act of 2021 ("ARPA") funding in the<br>amount of \$437,767.85 to purchase a mobile bus, lease a<br>van-sized vehicle, and purchase related items and equipment<br>to be able to conduct mobile recruitment and outreach<br>programs to unemployed and underemployed Delawareans<br>throughout the State of Delaware. |
| Does this project include a capital expenditure? | No  |

## Project Name: OGOV DOL DWDB

| Project Identification Number | 21784   |
|-------------------------------|---|
| Project Expenditure Category  | 2-Negative Economic Impacts   |
|                               | 2.10-Assistance to Unemployed or Underemployed Workers<br>(e.g. job training, subsidized employment, employment |

|   | supports or incentives)  |
|---|--|
| Status To Completion  | Completed less than 50%  |
| Adopted Budget  | \$3,000,000.00   |
| Program Income Earned   | \$0.00   |
| Program Income Expended   | \$0.00   |
| Total Cumulative Obligations  | \$728.19   |
| Total Cumulative Expenditures   | \$728.19   |
| Current Period Obligations  | \$728.19   |
| Current Period Expenditures   | \$728.19   |
| Project Description   | Funding for its Innovative Workforce Development<br>Programs, which will establish at least five new training<br>programs to help Delawareans find employment<br>opportunities in high growth, high demand, and emerging<br>industries (Training Programs).<br>The DWDB s Worksheet provides, in part, the following<br>support for the request: [DWDB] is seeking innovative<br>training programs and nontraditional training delivery<br>methods to help Delawareans find employment opportunities<br>in high growth, high demand and/or emerging industries.<br>The goal of this initiative is to establish at least 5 new<br>training programs, across all counties, within industries<br>identified as growth or emerging sectors. The target<br>audience for participation in the programs includes<br>unemployed or underemployed individuals, unemployed<br>women, and particularly those that may face barriers to<br>employment. |
| Does this project include a capital expenditure?  | No   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00   |
| Is a program evaluation of the project being conducted?   | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | DWDB] is seeking innovative training programs and<br>nontraditional training delivery methods to help<br>Delawareans find employment opportunities in high growth,<br>high demand and/or emerging industries. The goal of this<br>initiative is to establish at least 5 new training programs,<br>across all counties, within industries identified as growth or<br>emerging sectors.  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA projects are reviewed by the Delaware Department of Justice for eligibility.  |

## Project Name: OGOV DEMA Active Assailant

| Project Identification Number | 21629   |
|-------------------------------|---|
| Project Expenditure Category  | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity |
|                               |   |

| Project Expenditure Subcategory                  | 3.4-Public Sector Capacity: Effective Service Delivery  |
|--|---|
| Status To Completion                             | Not Started   |
| Adopted Budget                                   | \$1,500,000.00  |
| Program Income Earned                            | \$0.00  |
| Program Income Expended                          | \$0.00  |
| Total Cumulative Obligations                     | \$0.00  |
| Total Cumulative Expenditures                    | \$0.00  |
| Current Period Obligations                       | \$0.00  |
| Current Period Expenditures                      | \$0.00  |
| Project Description                              | The Delaware Emergency Management Agency ("DEMA")<br>seeks ARPA funding for an Active Assailant Training and<br>Response Program in the amount of \$1,500,000. This<br>program has two parts and includes assisting with training<br>police, fire and emergency medical service ("EMS") crews<br>with how to respond to incidents involving active assailants<br>as well as providing a hardened vehicle for the extraction of<br>patients and personnel. The training costs are estimated at<br>\$1,100,000 and will include the reimbursement of overtime<br>costs needed to attend the active assailant integrated<br>response training - an 8-hour class that all law enforcement,<br>fire and EMS crews will need. The estimated cost of the<br>hardened personnel carrier and extractor vehicle is \$400,000. |
| Does this project include a capital expenditure? | No  |

## Project Name: OGOV MH Cancer Support Com Ext

| Project Identification Number   | 21558  |
|---------------------------------|--|
| Project Expenditure Category    | 1-Public Health  |
| Project Expenditure Subcategory | 1.12-Mental Health Services  |
| Status To Completion            | Not Started  |
| Adopted Budget                  | \$30,000.00  |
| Program Income Earned           | \$0.00   |
| Program Income Expended         | \$0.00   |
| Total Cumulative Obligations    | \$30,000.00  |
| Total Cumulative Expenditures   | \$30,000.00  |
| Current Period Obligations      | \$0.00   |
| Current Period Expenditures     | \$0.00   |
|                                 | We plan to extend our Group Health Coaching program,<br>including sessions for caregivers as well as<br>cancer survivors. In addition, the in-person program<br>offerings at Cancer Support Community Delaware<br>(CSCDE), supporting participants in Group Health<br>Coaching, will be expanded. All programs at CSCDE<br>are offered at no cost to all participants.<br>Participants in Group Health Coaching meet for six sessions,<br>every other week, over a threemonth<br>period through a secure videoconferencing platform.<br>Sessions are led by health coaches trained |

|  | through a National Board for Health and Wellness Coaching<br>(NBHWC) accredited training program.<br>Cohorts consist of two to six cancer survivors or caregivers<br>each group. The first session is approximately<br>90 minutes in length, with subsequent sessions<br>approximately 45-60 minutes in length. The<br>program is completed in approximately 3 months.<br>Cancer survivors and caregivers will have separate sessions,<br>and cancer survivor's sessions will<br>include additional important information about follow-up<br>appointments, screenings and scans that are<br>needed in survivorship. Short educational modules, lasting<br>no more than 15 minutes, are utilized at<br>the beginning of each session to help raise awareness around<br>the topics of stress management, physical<br>activity, sleep, and diet. Health Coaches help facilitate<br>discussions, brainstorming activities, weekly   |
|--|---|
| Project Description                              | goal setting, action planning, and the development of coping<br>plans to address individual barriers to<br>behavior change.<br>The last session includes a "wrap up", allowing participants<br>to discuss some of their biggest<br>takeaways from the coaching process, and how they can<br>utilize the skills they learn to help reinforce<br>their behavior change moving forward. After each session,<br>the coach sends a follow-up email to each<br>participant with an overview of the session including<br>additional resources the participant could utilize<br>if they wanted more information on the topic. Overall<br>emphasis is placed on ensuring modules are client-<br>centered and client-directed per health coaching philosophy.<br>Pre and posttest will be given to each<br>participant, both cancer survivors and caregivers.<br>To support healthy lifestyle, change and the need for mental<br>health support as participants go<br>through the Group Health Coaching sessions, programs will<br>be added or expanded as needed at CSCDE.<br>These programs include the current offerings of support<br>groups, yoga, tai chi, nutrition, and art therapy<br>classes. Additional support would include support groups,<br>meditation and mindfulness classes, exercise<br>classes, and cooking sessions. All support groups are<br>facilitated by licensed mental health professionals,<br>and all Healthy Lifestyle classes are led by trained, licensed<br>experts in their field. Additional<br>training and experience in working with the cancer<br>population is required for all instructors, and the<br>Program Director carefully screens and monitors each<br>individual working with participants. |
| Does this project include a capital expenditure? | No  |

## Project Name: OGOV LTG Brandywine Counseling

| Project Identification Number   | 21402                             |
|---------------------------------|-----------------------------------|
| Project Expenditure Category    | 1-Public Health                   |
| Project Expenditure Subcategory | 1.14-Other Public Health Services |
| Status To Completion            | Completed less than 50%           |
|                                 |                                   |

| Adopted Budget  | \$65,000.00  |
|---|--|
| Program Income Earned   | \$0.00   |
| Program Income Expended   | \$0.00   |
| Total Cumulative Obligations  | \$65,000.00  |
| Total Cumulative Expenditures   | \$65,000.00  |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | This specific project or<br>purchase description is awarded amount (\$65,000), \$40,000<br>is allocated to the purchase,<br>usage (gas, insurance, etc.) and maintenance of this<br>project-specific vehicle. The balance<br>of \$25,000 will be allocated for medical supplies in the<br>project's efforts to increase access<br>to harm reduction services to reduce the transmission of HIV<br>and other blood-borne<br>infections associated with those who inject drugs in<br>hard-to-reach rural areas in Kent and<br>Sussex counties. Medical supplies will be distributed via<br>SSP services and can include –<br>but are not limited to - sterile syringes, xylazine testing<br>strips, first-aid/wound care<br>kits/supplies, and HIV testing kits. |
| Does this project include a capital expenditure?  | No   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Secondary Impacted and/or Disproportionately Impacted populations   | 2 Imp Low or moderate income HHs or populations  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Brandywine Counseling and Community Services (BCCS)<br>seeks ARPA funding to respond to the public health impacts<br>of the COVID-19 public health emergency for the<br>purposes of expanding access to harm reduction services to<br>reduce the transmission of HIV and other blood-borne<br>infections associated with those who inject drugs in<br>hard-to-reach rural areas in Kent and Sussex counties. The<br>total amount requested for the project is \$65,000.00  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA projects are reviewed for eligibility by the Delaware Department of Justice.  |

#### Project Name: OGOV Sussex Habitat Extension

| Project Identification Number   | 21943   |
|---------------------------------|---|
| Project Expenditure Category    | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory | 2.23-Strong Healthy Communities: Demolition and<br>Rehabilitation of Properties |
| Status To Completion            | Not Started   |
| Adopted Budget                  | \$500,000.00  |
| Total Cumulative Obligations    | \$500,000.00  |
| Total Cumulative Expenditures   | \$0.00  |

| Current Period Obligations                       | \$500,000.00  |
|--|---|
| Current Period Expenditures                      | \$0.00  |
| Project Description                              | <ul> <li>Funding to expand three SCHFH programs: Affordable<br/>Homeownership, Home Repairs, and ReStore Expansion.<br/>Background: COVID-19 made apparent the need for safe,<br/>stable and affordable housing. COVID-related job loss, low<br/>wages, and housing insecurity continue to disproportionately<br/>affect low-income households and cause lasting and severe<br/>economic distress. Poor housing conditions, including water<br/>leaks, pest infestation, poor ventilation, and overcrowding,<br/>directly affect health causing respiratory illness, increased<br/>cardiovascular disease, and increased prevalence of<br/>communicable diseases - including COVID-19. Locally,<br/>low-income Delawareans were, and still are,<br/>disproportionately affected by employment loss, housing<br/>instability, and a rising cost of living. According to LSA<br/>Planning, 30% of Sussex County households struggled to<br/>pay their housing costs before the pandemic. The rising<br/>number of inquiries for Habitat's programs shows this need<br/>has only increased since the onset of the pandemic. SCHFH<br/>went from impacting approximately 250 households in 2019<br/>to more than 1,200 in 2022. As one of the largest affordable<br/>housing producers in Delaware, SCHFH is uniquely<br/>positioned to combat housing insecurity. Since 1991,<br/>SCHFH has provided affordable homeownership<br/>opportunities for 178 families, financial literacy coaching to<br/>more than 2,000 individuals, and home repairs and energy<br/>upgrades to more than 450 households. Building on our past<br/>successes, SCHFH will utilize \$500,000 in additional ARP<br/>A funding across three projects previously approved by the<br/>U.S. Department of the Treasury. Each program will be<br/>expanded in the following ways:<br/>Affordable Home Construction: SCHFH will allocate<br/>\$250,000, or approximately \$50,000 per home, to complete<br/>an additional 5 homes for affordable homeownership in<br/>Sussex County. SCHFH has committed restricted and<br/>unrestricted fundraising dollars to ensure each home's<br/>average total development cost of \$220,000 is completely<br/>funded.</li> <li>Home Repairs: SCHFH will allocate</li></ul> |
| Does this project include a capital expenditure? | No  |

## Project Name: OGOV MH Unlocke The Light

| Project Identification Number   | 21945                       |
|---------------------------------|-----------------------------|
| Project Expenditure Category    | 1-Public Health             |
| Project Expenditure Subcategory | 1.12-Mental Health Services |
| Status To Completion            | Not Started                 |
|                                 |                             |

| Adopted Budget                                   | \$100,000.00  |
|--|---|
| Total Cumulative Obligations                     | \$100,000.00  |
| Total Cumulative Expenditures                    | \$50,000.00   |
| Current Period Obligations                       | \$100,000.00  |
| Current Period Expenditures                      | \$50,000.00   |
| Project Description                              | Sean's House annual operating budget is in excess of<br>\$250,000. The \$100,000 provided by the ARPA grant will<br>go directly to programs meeting increased demand for youth<br>mental health support. Specifically, this will allow us to:<br>increase programming to our Latinx and international<br>populations by adding bilingual and ESL/SEL programs at<br>Sean's House - \$20,000 over 2 years for facilitators,<br>translators, program materials. Increasing on-site Clinical<br>Support, Risk Management and Group programs essential to<br>bolstering our support system through best practices and<br>professional support - \$40,000 over two years conduct<br>clinical resource expansion through outreach and<br>partnerships with local mental health facilities, schools, and<br>community centers- \$40,000 over two years. No funds will<br>be used for capital expenditures. |
| Does this project include a capital expenditure? | No  |

## Project Name: OGOV MH Nemours

| Project Identification Number  | 22048   |
|--|---|
| Project Expenditure Category   | 1-Public Health   |
| Project Expenditure Subcategory  | 1.12-Mental Health Services   |
| Status To Completion   | Not Started   |
| Adopted Budget   | \$4,000,000.00  |
| Total Cumulative Obligations   | \$2,563,182.83  |
| Total Cumulative Expenditures  | \$2,563,182.83  |
| Current Period Obligations   | \$2,563,182.83  |
| Current Period Expenditures  | \$2,563,182.83  |
| Project Description  | The primary objective of Nemours' ARPA request is to<br>build a six-bed/six-exam room area to accommodate minor<br>patients experiencing emergency behavioral health issues.<br>The six-bed behavioral health pod is located directly<br>adjacent to Nemours' ED in order to ensure immediate and<br>appropriate care for minors experiencing behavioral and<br>physical emergency health needs. Over the course of the<br>COVID-19 pandemic, Nemours experienced a significant<br>increase in mental health emergencies for 5–17-year-olds – a<br>24% increase for children between the ages of 5 and 11 and<br>a 31% increase for those 12 to 17. Additionally, inpatient<br>days requiring a one-on-one sitter for minors on suicide<br>watch rose 178% between 2020 and 2021. |
| Does this project include a capital expenditure?   | Yes   |
| What is the Total expected capital expenditure, including pre-development costs, if applicable | \$4,000,000.00  |
| Type of capital expenditures, based on the following   |   |

## Project Name: OGOV MH Christiana Care

| Project Identification Number                    | 22054   |
|--|---|
| Project Expenditure Category                     | 1-Public Health   |
| Project Expenditure Subcategory                  | 1.12-Mental Health Services   |
| Status To Completion                             | Not Started   |
| Adopted Budget                                   | \$535,000.00  |
| Total Cumulative Obligations                     | \$535,000.00  |
| Total Cumulative Expenditures                    | \$267,500.00  |
| Current Period Obligations                       | \$535,000.00  |
| Current Period Expenditures                      | \$267,500.00  |
| Project Description                              | To support the behavioral health crisis in the pediatric<br>population which will allow for pediatric patients and their<br>families to access emergency care in a psychologically safe<br>environment. Funds will be used to support resources on this<br>unit and capital requests for equipping the rooms to support<br>behavioral health patients. The funds are to support 1 Child<br>and Adolescent Psychiatrist and 1 Psychiatric Social<br>Worker, as well as capital funding for design/construction<br>for the beds dedicated for Behavioral health patients. |
| Does this project include a capital expenditure? | No  |

#### **Project Name: DOE DET On the Job Training**

| Project Identification Number   | 22081  |
|---------------------------------|--|
| Project Expenditure Category    | 2-Negative Economic Impacts  |
| Project Expenditure Subcategory | 2.10-Assistance to Unemployed or Underemployed Workers<br>(e.g. job training, subsidized employment, employment<br>supports or incentives)   |
| Status To Completion            | Not Started  |
| Adopted Budget                  | \$90,600.00  |
| Total Cumulative Obligations    | \$0.00   |
| Total Cumulative Expenditures   | \$0.00   |
| Current Period Obligations      | \$0.00   |
| Current Period Expenditures     | \$0.00   |
| Project Description             | This MOU will support the GED® /HS Diploma<br>Program/UI Claimants Project through the use of ARPA<br>funding awarded to the DOL. The DOL will partner with<br>DOE's Adult and. Prison Education Resources Workgroup<br>for DOE to provide services to current DOL identified<br>Unemployment Insurance recipients receiving instructional<br>services in the following DOL One Stop Centers:(1)<br>Wilmington One Stop Center at 4425 North Market Street,<br>Wilmington, DE 19802; (2) the Newark One Stop at<br>University Office Plaza, 252 Chapman Road, 2nd Floor,<br>Newark, DE 19702; (3) Dover One Stop at Blue Hen<br>Corporate Center, 655 S. Bay Road, Suite 2H, Dover, DE |

|  | 19901; and (4) Georgetown One Stop at 8 Georgetown Plaza, Suite 2, Georgetown, DE 19947. |
|--|--|
| Does this project include a capital expenditure? | No   |

## Project Name: OGOV Central Baptist CDC

| 22091  |
|--|
| 2-Negative Economic Impacts  |
| 2.37-Economic Impact Assistance: Other   |
| Not Started  |
| \$625,000.00   |
| \$625,000.00   |
| \$375,000.00   |
| \$625,000.00   |
| \$375,000.00   |
| The Delaware Central Baptist Community Development<br>Corporation ("CBCDC") seeks ARPA funding for a new<br>facility, the Eastside Career Development Center ("ECDC"),<br>which will serve to provide vocational and<br>career-development training to underserved communities.<br>CBCDC has provided an estimated cost of \$625,000, which<br>will be used for purchasing a building and renovations. |
| Yes  |
| \$625,000.00   |
| Affordable housing, supportive housing, or recovery housing  |
|  |

#### Project Name: OGOV MH Boys & Girls Club Extension

| Project Identification Number   | 22131  |
|---------------------------------|--|
| Project Expenditure Category    | 1-Public Health  |
| Project Expenditure Subcategory | 1.12-Mental Health Services  |
| Status To Completion            | Not Started  |
| Adopted Budget                  | \$642,689.00   |
| Total Cumulative Obligations    | \$642,689.00   |
| Total Cumulative Expenditures   | \$0.00   |
| Current Period Obligations      | \$642,689.00   |
| Current Period Expenditures     | \$0.00   |
|                                 | Boys & Girls Clubs of Delaware seeks to build staff capacity<br>in the area of trauma informed care and support our ongoing<br>paradigm shift into becoming a trauma-informed<br>organization at all 40 locations across Delaware's three<br>counties. This program will allow us to support our<br>high-needs youth in dealing with the many Adverse<br>Childhood Experiences (ACES) they face by providing<br>extensive staff training, offering new mental health-related |

| Project Description                              | services directly to our youth, and supporting our staff in<br>using trauma informed approaches. This project aligns with<br>Governor Carney's Executive Order 24, which was signed in<br>October 2018 and made Delaware a "trauma informed<br>state." This project will allow us to integrate additional<br>mental health services by adding social emotional learning<br>components along with the hiring of mental health<br>professionals in each of Delaware's three counties. These<br>mental health professionals will work with our youth and<br>their families, as well as our staff, using trauma informed<br>approaches in all aspects of working with youth and their<br>families. |
|--|--|
| Does this project include a capital expenditure? | No   |

## Project Name: OGOV DCADV Extension

| Project Identification Number                    | 22199  |
|--|--|
| Project Expenditure Category                     | 1-Public Health  |
| Project Expenditure Subcategory                  | 1.12-Mental Health Services  |
| Status To Completion                             | Not Started  |
| Adopted Budget                                   | \$125,000.00   |
| Total Cumulative Obligations                     | \$125,000.00   |
| Total Cumulative Expenditures                    | \$0.00   |
| Current Period Obligations                       | \$125,000.00   |
| Current Period Expenditures                      | \$0.00   |
| Project Description                              | DCADV's Complex Connections project will continue to<br>address a number of barriers survivors of domestic violence<br>face that were exacerbated by the COVID-19 pandemic.<br>This proposed project includes a two-year plan that focuses<br>on the impact that COVID-19 has had on domestic violence<br>in the state by increasing the community's access to early<br>intervention and quality mental health services in Delaware.<br>This project will continue to: 1) Increase the public's<br>awareness of the connection between trauma, mental health,<br>and domestic violence and available resources for support<br>and service through the creation of resource materials and<br>targeted campaigns statewide; 2) Increase the knowledge<br>and capacity of mental health and behavioral health<br>providers to address traumatic effects of abuse through free<br>continuing education on trauma-informed responses and<br>interventions; and 3) Support Delaware's mental health<br>workforce through MSW student field placements within<br>local domestic violence service programs.<br>DCADV is requesting \$125,000 for the cost of this work,<br>which will be completed by the end of the grant period of<br>December 31, 2026. The structure of the program, entities<br>involved, measures of success, and costs are outlined in the<br>following section. There are no funds being requested for<br>capital expenditures and there are no additional federal<br>sources of funding for this project. |
| Does this project include a capital expenditure? | No   |

-

## Project Name: OGOV Tech Impact Extension

F

| Project Identification Number                    | 22200   |
|--|---|
| Project Expenditure Category                     | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity   |
| Project Expenditure Subcategory                  | 3.3-Public Sector Workforce: Other  |
| Status To Completion                             | Not Started   |
| Adopted Budget                                   | \$1,500,000.00  |
| Total Cumulative Obligations                     | \$1,500,000.00  |
| Total Cumulative Expenditures                    | \$0.00  |
| Current Period Obligations                       | \$1,500,000.00  |
| Current Period Expenditures                      | \$0.00  |
| Project Description                              | <ul> <li>Tech Impact will facilitate a Fellowship program designed to train rising technologists across a variety of disciplines (data science, data engineering, front-end development) while providing services to support state agencies. The Fellowship program will include approximately 10 individuals per year. Fellowships will occur from approximately June through the following May. Some Fellows from each cohort will be selected to continue their experience as Senior Fellows, allowing for them to continue their training while providing additional services for State of Delaware agencies. In addition to their typical duties, Senior Fellows will provide:</li> <li>1. Subject matter leadership in the domains they had supported during the first year of their Fellowship,</li> <li>2. Project management responsibilities for ongoing state projects, and</li> <li>3. Supporting the training of incoming Fellows into the program.</li> </ul> |
| Does this project include a capital expenditure? | No  |

## Project Name: OGOV WHA Extension

| 22208   |
|---|
| 2-Negative Economic Impacts   |
| 2.15-Long-Term Housing Security: Affordable Housing   |
| Not Started   |
| \$660,000.00  |
| \$660,000.00  |
| \$0.00  |
| \$660,000.00  |
| \$0.00  |
| WHA is seeking to continue the renovation of long-term<br>vacant homes in the city of Wilmington. This funding will<br>allow WHA to cover additional cost related to supply chain<br>issues and inflation in the cost of materials. In addition,<br>WHA expect our efforts will reduce blight and improve the<br>community. |
| Yes   |
|   |

| What is the Total expected capital expenditure, including pre-development costs, if applicable | \$660,000.00  |
|--|---|
| Type of capital expenditures, based on the following enumerated uses                           | Affordable housing, supportive housing, or recovery housing |

#### Project Name: OGOV LTG La Central

| Project Identification Number  | 22229   |
|--|---|
| Project Expenditure Category   | 1-Public Health   |
| Project Expenditure Subcategory  | 1.12-Mental Health Services   |
| Status To Completion   | Not Started   |
| Adopted Budget   | \$50,000.00   |
| Total Cumulative Obligations   | \$50,000.00   |
| Total Cumulative Expenditures  | \$50,000.00   |
| Current Period Obligations   | \$50,000.00   |
| Current Period Expenditures  | \$50,000.00   |
| Project Description  | The requested funds will support Latina Marketing/La<br>Central's program. The award will cover a part-time<br>coordinator, a co- facilitator, a part time assistant, as well as<br>food, drinks, rental space and material needed for the<br>program. The program aims to empower Latino women to<br>seek help to increase their quality of life. Our program's<br>basic structure includes face-to-face meetings at our La<br>Central, DE facilities. Our sessions will cover subjects that<br>help aid in the following topics: depression, anxiety, and<br>domestic abuse. With the capital given to La Central DE, we<br>will seek peer community leaders and professionals to<br>provide women with resources and answer their questions.<br>We have requested \$50,000, which will support our program<br>for six months. The grant covers a part-time coordinator, a<br>co-facilitator, and a part-time assistant, as well as food,<br>drinks, rental space, and material needed for the program. |
| Does this project include a capital expenditure?   | Yes   |
| What is the Total expected capital expenditure, including pre-development costs, if applicable | \$16,000.00   |
| Type of capital expenditures, based on the following enumerated uses                           | Behavioral health facilities and equipment  |

## Project Name: OGOV Ezion Fair Senior Living

| Project Identification Number   | 22267  |
|---------------------------------|--|
| Project Expenditure Category    | 2-Negative Economic Impacts                    |
| Project Expenditure Subcategory | 2.18-Housing Support: Other Housing Assistance |
| Status To Completion            | Not Started                                    |
| Adopted Budget                  | \$750,000.00                                   |
| Total Cumulative Obligations    | \$750,000.00                                   |
| Total Cumulative Expenditures   | \$0.00   |
| Current Period Obligations      | \$750,000.00                                   |
|                                 |  |

| Current Period Expenditures                      | \$0.00  |
|--|---|
| Project Description                              | The Ezion Fair Community Development Corporation<br>("Ezion Fair") seeks ARPA funding for the Ezion Senior<br>Living Affordable Housing Project ("Project"). This Project<br>involves building a Senior Suite Style Living House in the<br>Southbridge section of Wilmington, Delaware. The goal of<br>the Project is providing affordable housing for seniors in the<br>Southbridge area. Ezion Fair submits that its Project will<br>also increase the quality of life for their seniors as well,<br>since it will be providing a secure facility with common<br>interaction, activities, and experiences. Ezion Fair will build<br>a 4-floor level facility that has 10-15 Senior Suites and<br>underbuilding secured parking. The facility will have a<br>community multipurpose room with a kitchen and 15 suite<br>style units. Each unit will have a private full bathroom,<br>bedroom, living area and a kitchenette. Ezion Fair already<br>owns the land of the proposed site. The project is estimated<br>to cost \$4 million dollars and Ezion Fair has already raised<br>\$.5 million and is requesting \$750,000 in ARPA funding.<br>Ezion Fair's target population for this Project are seniors<br>(those persons over 65 years of age) who live in the<br>Southbridge, Wilmington area who can care for their<br>personal being, be willing to live in a shared community<br>dwelling and have an income within the Federal<br>Government's poverty level guidelines. Those who qualify<br>as low-income under the Final Rule, are considered<br>disproportionately impacted and presumed to have been<br>harmed by the negative economic effects of the pandemic.<br>FR 415-417. Ezion Fair represents its Project is critical for<br>the residents of Southbridge as seniors are in desperate need<br>of affordable housing. Southbridge is a community whose<br>median income is below thirty-six thousand dollars. |
| Does this project include a capital expenditure? | No  |

## Project Name: OGOV LTG CORAS

| Project Identification Number                    | 22272  |
|--|--|
| Project Expenditure Category                     | 1-Public Health  |
| Project Expenditure Subcategory                  | 1.13-Substance Use Services  |
| Status To Completion                             | Not Started  |
| Adopted Budget                                   | \$100,000.00   |
| Total Cumulative Obligations                     | \$100,000.00   |
| Total Cumulative Expenditures                    | \$50,000.00  |
| Current Period Obligations                       | \$100,000.00   |
| Current Period Expenditures                      | \$50,000.00  |
| Project Description                              | ON-RAMP will support its clients who have missed a significant number of their Medications for Opioid Use Disorder (MOUD). The funds will be used to lease vehicles, hire staff, provide motivational incentives, and consulting services. |
| Does this project include a capital expenditure? | No   |

## Project Name: OGOV DE Technology Park Ext

| Project Identification Number                    | 22281  |
|--|--|
| Project Expenditure Category                     | 2-Negative Economic Impacts  |
| Project Expenditure Subcategory                  | 2.32-Business Incubators and Start-Up or Expansion<br>Assistance   |
| Status To Completion                             | Not Started  |
| Adopted Budget                                   | \$200,000.00   |
| Total Cumulative Obligations                     | \$200,000.00   |
| Total Cumulative Expenditures                    | \$0.00   |
| Current Period Obligations                       | \$200,000.00   |
| Current Period Expenditures                      | \$0.00   |
| Project Description                              | <ul> <li>The Delaware Technology Park (DTP) project is to establish an Incubator in the Fin Tech Innovation Hub on UD's STAR Campus. The mission is to support underserved or emerging entrepreneurs working on solutions to improve financial health and equity for lower to middle income populations and communities. This population was most severely impacted by Covid and seeking recovery.</li> <li>The supplemental \$200,000 added to the original award of \$250,000 will allow the current scoped project to gain traction to attract new company starts in the Incubator. The original proposal anticipated 10 companies by the end of 2024. With the additional funds we can complete the space fit outs and extend management compensation. By the end of 2026 ( completion of award spend out), we expect to have 15 companies and 50 new jobs.</li> </ul> |
| Does this project include a capital expenditure? | No   |

# Project Name: OGOV Help Initiative Ext

| Project Identification Number   | 22282  |
|---------------------------------|--|
| Project Expenditure Category    | 2-Negative Economic Impacts  |
| Project Expenditure Subcategory | 2.22-Strong Healthy Communities: Neighborhood Features that Promote Health and Safety  |
| Status To Completion            | Not Started  |
| Adopted Budget                  | \$2,000,000.00   |
| Total Cumulative Obligations    | \$2,000,000.00   |
| Total Cumulative Expenditures   | \$675,000.00   |
| Current Period Obligations      | \$2,000,000.00   |
| Current Period Expenditures     | \$675,000.00   |
|                                 | <ul> <li>Energize Delaware has requested funds for programs in the following categories:</li> <li>(i) COVID-19 response and prevention to include ventilation systems and indoor air quality, including projects for:<br/>Installation of UV Ventilation Systems (UVGI systems)</li> <li>Maintenance and Cleaning of ventilation systems</li> <li>Residential and Public Spaces</li> <li>HVAC Tune up-Filter replacement</li> <li>(ii) Addressing health disparities in healthcare outcomes, including programs and projects for:</li> </ul> |

| Project Description | Benefits navigators such as HELP Initiative Community<br>Outreach, HEC2 Counseling, Insurance Co. and Health<br>Home Assessment and Remediation<br>Community health workers to help community members<br>access health services, such as Deep Dive Coordinated<br>Health, Safety and Energy Audits of Homes<br>Community violence intervention such as Lights On and<br>Health On<br>Housing such as the Insulated Skirting and Refrigerator<br>Replacement program and the Healthy Energy Efficient<br>Homes Initiative.<br>(iii) Negative economic impacts of the public health<br>emergency, including programs and projects for:<br>Children¿s healthcare and stronger communities, such as the<br>Healthy Energy Efficient Homes initiative, Refrigerator<br>Replacement program, STEM Outreach, and grants, rebates,<br>and low-interest business loans<br>Direct assistance to households, such as Emergency Bill<br>Assistance, Conservation and Energy Community Outreach,<br>emergency repairs, and weatherization<br>Unemployment and jobs, such as training, certification, and<br>job placement programs and small business energy audits.<br>(iv) Government services for infrastructure and the<br>environment, including:<br>Low-interest loans to create energy efficiency structures<br>Improving electric circuit for more solar capacity<br>Environmental remediation such as climate resiliency<br>projects, green scaping, flood mitigation, and white roofs<br>Clean Water State Revolving Fund-qualifying projects, such<br>as small business grants to improve energy efficiency and<br>community solar, and improve resilience for backup power,<br>solar and wind power, and power storage systems<br>Sustainable and backup power to support broadband access |
|---------------------|---|
|                     | No  |

## Project Name: OGOV Kind to Kids Extension

| Project Identification Number   | 22285   |
|---------------------------------|---|
| Project Expenditure Category    | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory | 2.25-Addressing Educational Disparities: Academic, Social, and Emotional Services   |
| Status To Completion            | Not Started   |
| Adopted Budget                  | \$400,000.00  |
| Total Cumulative Obligations    | \$400,000.00  |
| Total Cumulative Expenditures   | \$0.00  |
| Current Period Obligations      | \$400,000.00  |
| Current Period Expenditures     | \$0.00  |
| Project Description             | ARPA funds will support Kind to Kids Foundation UGrad<br>Education Program from 2025 to 2026 to<br>address Delaware's education crisis for children in foster<br>care and increased need from the Covid<br>pandemic.<br>In Delaware, there are 600 children in foster care. This<br>funding will allow Kind to Kids<br>Foundation to serve 225 of Delaware's foster children to |

|  | succeed with their education from 2025 to 2026. |
|--|---|
| Does this project include a capital expenditure? | No  |

## Project Name: OGOV LTG Sussex Comm Crisis

| Project Identification Number                    | 22324   |
|--|---|
| Project Expenditure Category                     | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory                  | 2.18-Housing Support: Other Housing Assistance  |
| Status To Completion                             | Not Started   |
| Adopted Budget                                   | \$60,000.00   |
| Total Cumulative Obligations                     | \$60,000.00   |
| Total Cumulative Expenditures                    | \$0.00  |
| Current Period Obligations                       | \$60,000.00   |
| Current Period Expenditures                      | \$0.00  |
| Project Description                              | The Crisis House is an emergency shelter for homeless men,<br>women, and children primarily in Sussex County but will<br>accept admissions from throughout the state. The shelter<br>houses 20 adults and 5 children at any given time. It is a<br>30-day emergency program with comprehensive cost-free<br>services including three daily meals, counseling, and referral<br>assistance. \$60,000 in ARPA funding to continue their<br>program which would be used to renovate the property. |
| Does this project include a capital expenditure? | No  |

## Project Name: OGOV LCS Food Hub

| Project Identification Number  | 22346   |
|--|---|
| Project Expenditure Category   | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory  | 2.1-Household Assistance: Food Programs   |
| Status To Completion   | Not Started   |
| Adopted Budget   | \$150,000.00  |
| Total Cumulative Obligations   | \$0.00  |
| Total Cumulative Expenditures  | \$0.00  |
| Current Period Obligations   | \$0.00  |
| Current Period Expenditures  | \$0.00  |
| Project Description  | \$150,000 for a warehouse/fulfillment center next to its<br>facility at 2809 Baynard <u>Blvd.in</u> Wilmington. It will be a<br>hub for aggregating healthy food from a variety of sources,<br>and then custom packaging it and distributing for a number<br>of programs designed to improve health outcomes for<br>vulnerable populations disproportionally impacted by<br>COVID-19. |
| Does this project include a capital expenditure?   | Yes   |
| What is the Total expected capital expenditure, including pre-development costs, if applicable | \$150,000.00  |
| Type of capital expenditures, based on the following   |   |

## Project Name: Gateway Charter COVID Leave Extension

| Project Identification Number   | 19834  |
|---|--|
| Project Expenditure Category  | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity  |
| Project Expenditure Subcategory   | 3.5-Public Sector Capacity: Administrative Needs   |
| Status To Completion  | Completed  |
| Adopted Budget  | \$5,641.13   |
| Total Cumulative Obligations  | \$5,641.13   |
| Total Cumulative Expenditures   | \$5,641.13   |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | Provide reimbursement for expenses incurred by district and<br>charter schools due to employees out sick with covid.<br>Includes cost of substitutes teachers and overtime.  |
| Does this project include a capital expenditure?  | No   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | "District and Charter schools report expenditures to Office<br>of Management and Budget. Upon review and approval,<br>reimbursement funds are transferred to respective project<br>budget."  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | "Reimbursements are reviewed to adhere to State guidance<br>ensuring that employee leave was used to quarantine, due to<br>Covid, care for a family member, or receive vaccination.<br>Districts and charters are required to maintain all<br>documentation supporting leave usage." |

#### **Project Name: Capital SD COVID Leave Extension**

| Project Identification Number   | 19835   |
|---|---|
| Project Expenditure Category  | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity   |
| Project Expenditure Subcategory   | 3.5-Public Sector Capacity: Administrative Needs  |
| Status To Completion  | Completed   |
| Adopted Budget  | \$50,671.55   |
| Total Cumulative Obligations  | \$50,671.55   |
| Total Cumulative Expenditures   | \$50,671.55   |
| Current Period Obligations  | \$0.00  |
| Current Period Expenditures   | \$0.00  |
| Project Description   | Provide reimbursement for expenses incurred by district and<br>charter schools due to employees out sick with covid.<br>Includes cost of substitutes teachers and overtime.     |
| Does this project include a capital expenditure?  | No  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic | "District and Charter schools report expenditures to Office<br>of Management and Budget. Upon review and approval,<br>reimbursement funds are transferred to respective project |

| impact experienced  | budget."   |
|---|--|
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | "Reimbursements are reviewed to adhere to State guidance<br>ensuring that employee leave was used to quarantine, due to<br>Covid, care for a family member, or receive vaccination.<br>Districts and charters are required to maintain all<br>documentation supporting leave usage." |

#### Project Name: Indian River SD COVID Leave Extension

| Project Identification Number   | 19836  |
|---|--|
| Project Expenditure Category  | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity  |
| Project Expenditure Subcategory   | 3.5-Public Sector Capacity: Administrative Needs   |
| Status To Completion  | Completed 50% or more  |
| Adopted Budget  | \$92,842.64  |
| Total Cumulative Obligations  | \$92,842.64  |
| Total Cumulative Expenditures   | \$92,842.64  |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | Provide reimbursement for expenses incurred by district and<br>charter schools due to employees out sick with covid.<br>Includes cost of substitutes teachers and overtime.  |
| Does this project include a capital expenditure?  | No   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | "District and Charter schools report expenditures to Office<br>of Management and Budget. Upon review and approval,<br>reimbursement funds are transferred to respective project<br>budget."  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | "Reimbursements are reviewed to adhere to State guidance<br>ensuring that employee leave was used to quarantine, due to<br>Covid, care for a family member, or receive vaccination.<br>Districts and charters are required to maintain all<br>documentation supporting leave usage." |

#### Project Name: LTG Recovery Management Support Program

| Project Identification Number   | 19733   |
|---------------------------------|---|
| Project Expenditure Category    | 1-Public Health   |
| Project Expenditure Subcategory | 1.13-Substance Use Services   |
| Status To Completion            | Completed less than 50%   |
| Adopted Budget                  | \$109,849.48  |
| Total Cumulative Obligations    | \$109,849.48  |
| Total Cumulative Expenditures   | \$109,849.48  |
| Current Period Obligations      | (\$4,397.40)  |
| Current Period Expenditures     | (\$4,397.40)  |
|                                 | Create a workforce development opportunity focused on<br>peer specialists and community engagement workers.<br>Engage and screen individuals within hard-to-reach |

| Project Description   | populations. Establish a state-wide education platform to<br>collect and disseminate information regarding the dangers of<br>illicit drugs, prescriptions and other substances potentially<br>laced with fentanyl, ISO and similar synthetic substances.  |
|---|---|
| Does this project include a capital expenditure?  | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$1,700,000.00  |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Create a workforce development opportunity focused on<br>peer specialists and community engagement workers.<br>Engage and screen individuals within hard-to-reach<br>populations. Establish a state-wide education platform to<br>collect and disseminate information regarding the dangers of<br>illicit drugs, prescriptions and other substances potentially<br>laced with fentanyl, ISO and similar synthetic substances. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | COVID-19 has increased substance use issues throughout<br>the country. Recipient will work with partners to provide<br>outreach to hard-to-reach populations and create a workforce<br>development opportunity for individuals.   |

# Project Name: OGOV Delaware Coalition Against Domestic Violence

| Project Identification Number   | 19460   |
|---------------------------------|---|
| Project Expenditure Category    | 1-Public Health   |
| Project Expenditure Subcategory | 1.12-Mental Health Services   |
| Status To Completion            | Completed less than 50%   |
| Adopted Budget                  | \$125,000.00  |
| Total Cumulative Obligations    | \$125,000.00  |
| Total Cumulative Expenditures   | \$125,000.00  |
| Current Period Obligations      | \$0.00  |
| Current Period Expenditures     | \$0.00  |
| Project Description             | DCADV's Complex Connections project will address a<br>number of barriers survivors of domestic violence face that<br>have been exacerbated by the COVID-19 pandemic. This<br>proposed project includes a three year plan that focuses on<br>the impact that COVID-19 has had on domestic violence in<br>the state by increasing the community's access to early<br>intervention and quality mental health services in Delaware.<br>This project will: 1) Increase the public's awareness of the<br>connection between trauma, mental health and domestic<br>violence and available resources for support and service<br>through the creation of resource materials and targeted<br>campaigns statewide; 2) Increase the knowledge and<br>capacity of mental health and behavioral health providers to<br>address traumatic effects of abuse through free continuing<br>education on trauma-informed responses and interventions;<br>and 3) Support Delaware's mental health workforce through |

|   | MSW student field placements within local domestic violence service programs.   |
|---|---|
| Does this project include a capital expenditure?  | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$2,846.27  |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 7 Imp Other HHs or populations that experienced a negative economic   |
| Secondary Impacted and/or Disproportionately Impacted populations   | 20 Dis Imp Other HHs or populations that experienced a disproportionate   |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | This project includes a three year plan that focuses on the impact that COVID-19 has had on domestic violence in the state by increasing the community's access to early intervention and quality mental health services in Delaware. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Department of Justice review of each project and outcomes<br>to ensure it addresses a challenge created or exacerbated by<br>the pandemic.  |

## Project Name: OGOV Perinatal Prana Mental Health

.

| Project Identification Number   | 19463  |
|---------------------------------|--|
| Project Expenditure Category    | 1-Public Health  |
| Project Expenditure Subcategory | 1.12-Mental Health Services  |
| Status To Completion            | Completed  |
| Adopted Budget                  | \$200,000.00   |
| Total Cumulative Obligations    | \$200,000.00   |
| Total Cumulative Expenditures   | \$200,000.00   |
| Current Period Obligations      | \$0.00   |
| Current Period Expenditures     | \$0.00   |
|                                 | Josie's Grace program launched it's first 2 cohorts on<br>October 5th and 6th of 2022. This small group community<br>behavioral health approach accomodates 4 women and their<br>4 babies per cohort served for a total humans served of 8<br>dyad pair a week. They will be attending for 6 weeks<br>consecutively for 2-3 hours of programming and support a<br>week. Staffed in person with Psych NP, RN, and<br>adminstrative support during program run time, all who<br>enter are served with a safe, trauma aware environment to<br>expore their emotional needs. August 14th 2022, an open<br>house was held and attended by approx. 25 community<br>members including health providers, prospective volunteers<br>as well as Representative Mike Smith and his family. August<br>and September involved establishing the centers functioning<br>and esthetics, developing the curriculum, coordinating with<br>partnered programs and vendors, onboarding staff,<br>onboarding and training up volunteers. We engaged initially<br>for resources with Trauma Matters DE as well as attending<br>training of NAMI of DE for a specific QPR training on<br>suicide prevention. All who volunteer or work here are |

| Project Description  | trained internally on mild to severe distress of Maternal<br>Mental Illness that can present in the community of Josie's<br>Grace. Nursing staff attended specific 2 day training of<br>Postpartum Support International on Perinatal Mood and<br>Anxiety Disorders ahead of first cohort attending program.<br>Educating community partners (Preferred Referring<br>Providers) began with an inservice at The Birthing Center,<br>Holistic Women's Healthcare LLC (TheBirthCenter.com).<br>Recruitment by way of educating partners in the community<br>who already provide mental health services were notified of<br>this program. Josie's Grace, through Postpartum Support<br>International -DE chapter (postpartum.net) and a general<br>community referral pathway for lay workers like doulas and<br>lactation through to neighbors is open also. All available<br>treatment slots were filled in cohorts 1 and 2 and any who<br>sought the program, and were appropriate, were able to be<br>'slated' for the next round of cohorts starting late November.<br>Further marketing / educational pathways have been via<br>website views (919 views to date) www.Josiesgrace.com<br>developed for this program. The Birth Center distributed<br>information on this program via their fall e-newsletter for<br>further reach to all clients they serve estimated to be<br>reaching 4,000 families. Preliminary discussions for<br>education/recruitment have been held with providers of<br>Westside Health and Bayard House of Catholic Charities.<br>Challenges with original plan to serve a total of 96 women in<br>1 year are inherent to the nature and time it takes to run 2<br>cohorts a week from front to back including recruitment<br>through to running programming, organizing volunteers and<br>ongoign operations needs. We now have plans to shorten the<br>duration to 4 weeks per cohort and remain at 2 cohorts a<br>week to ensure the quality and outcomes are reached for this<br>high risk population. Beyond the isolation combined<br>perinatal risks COVID amplified, other at risk demographics<br>noted in our initial cohorts are: minority race, single parent<br>and childhood abused. Of the c |
|--|---|
| Does this project include a capital expanditure?   | had crippled this at risk population of mother / baby over the past 2 years.  |
| Does this project include a capital expenditure?   |   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions | \$200,000.00  |
| Is a program evaluation of the project being conducted?  | Yes   |
| What Impacted and/or Disproportionally Impacted  | 20 Dis Imp Other HHs or populations that experienced a  |

| Is a program evaluation of the project being conducted?   | Yes  |
|---|--|
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Destigmatizing, reversing trends of COVID of isolation on a<br>population at risk of mental illness, basic needs supports<br>(food, drink, safe space), creating small community for<br>postpartum women/families/birthing people. Evidenced<br>based Behavioral Health programming to offset<br>(prevent/mitigate) and identify early onset illness or risks<br>(partner risks/infant risks) commonly known of this<br>population. Therapy based intervention, Nutrition<br>intervention, Safe space with assessment, intervention, refer |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Frequent reporting and compliance monitoring checks will<br>review the progress of the project and ensure the response is<br>reasonable in relation to public health.  |

# Project Name: DOL Forward Delaware Program

| Project Identification Number  | 19769  |
|--|--|
| Project Expenditure Category   | 2-Negative Economic Impacts  |
| Project Expenditure Subcategory  | 2.10-Assistance to Unemployed or Underemployed Workers<br>(e.g. job training, subsidized employment, employment<br>supports or incentives)   |
| Status To Completion   | Completed less than 50%  |
| Adopted Budget   | \$3,872,530.13   |
| Total Cumulative Obligations   | \$2,329,717.14   |
| Total Cumulative Expenditures  | \$671,408.99   |
| Current Period Obligations   | \$34,818.36  |
| Current Period Expenditures  | \$455,487.31   |
| Project Description  | The project seeks to provide high quality workforce<br>preparation programs for adult career entrants or adult career<br>changers who have extreme barriers to employment.<br>Engage both employed/underemployed and Delaware's<br>business community to; Expand access and capacity for<br>existing certificate/certification programs. Identify additional<br>employers' workforce needs that can be addressed with<br>training. Provide targeted training to participants including<br>job search support and placement with the goal of<br>employment. |
| Does this project include a capital expenditure?   | No   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions | \$3,000,000.00   |
| Is a program evaluation of the project being conducted?  | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?                                | 3 Imp HHs that experienced unemployment  |
| Secondary Impacted and/or Disproportionately Impacted populations  | 2 Imp Low or moderate income HHs or populations  |
| Is a program evaluation of the project being conducted?  | Yes  |
|  | Provide high quality workforce preparation programs for<br>adult career entrants or adult career changers who have   |

| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | <ul> <li>extreme barriers to employment. Engage both</li> <li>employed/underemployed and Delaware's business</li> <li>community to:</li> <li>•Expand access and capacity for existing</li> <li>certificate/certification programs</li> <li>•Identify additional employers' workforce needs that can be addressed with training</li> <li>•Provide targeted training to participants including job search support and placement with the goal of employment.</li> </ul>                 |
|---|---|
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | ARPA funding to expand the Forward Delaware program<br>originally funded through CRF Funds and continued through<br>ARPA Funds, to provide additional workforce training,<br>workforce preparation programs and funding to buy tools<br>needed for employment to<br>individuals who are unemployed, underemployed or looking<br>to move to a job that provides better opportunities for<br>economic advancement such as higher wages or more<br>opportunities for career advancement. |

## Project Name: DOL DWDB Business Liaisons

| Project Identification Number  | 19771   |
|--|---|
| Project Expenditure Category   | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory  | 2.10-Assistance to Unemployed or Underemployed Workers<br>(e.g. job training, subsidized employment, employment<br>supports or incentives)  |
| Status To Completion   | Completed less than 50%   |
| Adopted Budget   | \$500,000.00  |
| Total Cumulative Obligations   | \$226,900.37  |
| Total Cumulative Expenditures  | \$164,254.06  |
| Current Period Obligations   | \$1,552.18  |
| Current Period Expenditures  | \$33,065.45   |
| Project Description  | The Business Liaison program will engage three contractors<br>to serve as intermediaries between businesses, workforce<br>development/ education/training programs, and<br>unemployed/underemployed Delawareans affected<br>by COVID 19. These contractors, known as Business<br>Liaisons, will be tasked with building communication<br>pathways that will enable businesses to share hiring needs,<br>increase job postings on Delaware JobLink ("DJL") (the<br>system used by Department Labor to connect unemployed<br>individuals and others looking for work to work<br>opportunities), provide input and feedback to training<br>programs, remove barriers to hiring, and connect<br>unemployed/underemployed individuals to companies that<br>are hiring. |
| Does this project include a capital expenditure?   | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions | \$500,000.00  |
| Is a program evaluation of the project being conducted?  | Yes   |
| What Impacted and/or Disproportionally Impacted  |   |

| population does this project primarily serve?   | 3 Imp HHs that experienced unemployment   |
|---|---|
| Secondary Impacted and/or Disproportionately Impacted populations   | 2 Imp Low or moderate income HHs or populations   |
| Tertiary Impacted and/or Disproportionately Impacted populations  | 1 Imp General Public  |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | The Business Liaison program will engage three contractors<br>to serve as intermediaries between businesses, workforce<br>development/ education/training programs, and<br>unemployed/underemployed Delawareans affected<br>by COVID 19.  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Contractors, known as Business Liaisons, will be tasked<br>with building communication pathways that will enable<br>businesses to share hiring needs, increase job postings on<br>Delaware JobLink ("DJL") (the system used by Department<br>Labor to connect unemployed individuals and others looking<br>for work to work opportunities), provide input and feedback<br>to training programs, remove barriers to hiring, and connect<br>unemployed/underemployed individuals to companies that<br>are hiring. |

## Project Name: DOL GED UI Workforce Development

| Project Identification Number  | 19777   |
|--|---|
| Project Expenditure Category   | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory  | 2.10-Assistance to Unemployed or Underemployed Workers<br>(e.g. job training, subsidized employment, employment<br>supports or incentives)  |
| Status To Completion   | Completed less than 50%   |
| Adopted Budget   | \$175,000.00  |
| Total Cumulative Obligations   | \$91,276.25   |
| Total Cumulative Expenditures  | \$676.25  |
| Current Period Obligations   | \$90,958.70   |
| Current Period Expenditures  | \$358.70  |
| Project Description  | Serves approximately 250 UI Claimants who have<br>self-identified in DJL that they do not have a high school<br>diploma or GED®. Provides skills upgrade training that<br>prepares qualified UI claimants to earn a high school<br>credential and a \$500 one time incentive payment to UI<br>claimants who earn their GED within 6 to 8 months from the<br>time of enrollment. |
| Does this project include a capital expenditure?   | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions | \$175,000.00  |
| Is a program evaluation of the project being conducted?  | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?                                | 3 Imp HHs that experienced unemployment   |
| Secondary Impacted and/or Disproportionately Impacted  |   |

| populations   | 2 Imp Low or moderate income HHs or populations   |
|---|---|
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Serves approximately 250 UI Claimants who have<br>self-identified in DJL<br>that they do not have a high school diploma or GED®.<br>Provides skills upgrade training that prepares qualified UI<br>claimants to earn a high school credential and a \$500<br>one-time incentive payment to UI claimants who earn their<br>GED within 6 to 8 months from the time of enrollment.                       |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | The Department of Labor, Division of Employment and<br>Training (DET) seeks ARPA funding for a workforce<br>development initiative to offer unemployment claimants<br>who have no high school diploma with the education and<br>training needed to obtain their GED® (Test of General<br>Education Development), as well as a financial incentive for<br>those who successfully complete the program. |

# Project Name: DOL DWDB Mobile APP

| Project Identification Number  | 19781  |
|--|--|
| Project Expenditure Category   | 2-Negative Economic Impacts  |
| Project Expenditure Subcategory  | 2.10-Assistance to Unemployed or Underemployed Workers<br>(e.g. job training, subsidized employment, employment<br>supports or incentives)   |
| Status To Completion   | Completed less than 50%  |
| Adopted Budget   | \$1,500,000.00   |
| Total Cumulative Obligations   | \$2,535.13   |
| Total Cumulative Expenditures  | \$2,535.13   |
| Current Period Obligations   | \$95.04  |
| Current Period Expenditures  | \$95.04  |
| Project Description  | The Career Exploration app will connect<br>unemployed/underemployed Delawareans with job<br>opportunities, upskill opportunities and credential training<br>and provide an awareness of the multitude of open jobs and<br>career opportunities in the State of Delaware through<br>technology and social media channels. |
| Does this project include a capital expenditure?   | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable                               | \$1,000,000.00   |
| Type of capital expenditures, based on the following enumerated uses   | Technology and tools   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions | \$1,500,000.00   |
| Is a program evaluation of the project being conducted?  | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?                                | 2 Imp Low or moderate income HHs or populations  |
| Secondary Impacted and/or Disproportionately Impacted populations  | 3 Imp HHs that experienced unemployment  |

| Tertiary Impacted and/or Disproportionately Impacted populations  | 1 Imp General Public  |
|---|---|
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | The Career Exploration app will connect<br>unemployed/underemployed Delawareans with job<br>opportunities, upskill opportunities and credential training<br>and provide an awareness of the multitude of open jobs and<br>career opportunities in the State of Delaware through<br>technology and social media channels.                      |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | The Delaware Workforce Development Board (DWDB)<br>seeks ARPA funding for a workforce development initiative<br>to create a Career Mobility Exploration APP, to be called<br>H.O.P.E - Higher Opportunity & Possibility Explorer. The<br>mobile app would aide unemployed/underemployed<br>Delawareans in career development and advancement. |

# Project Name: DOL Pre-Apprenticeship Program

| Project Identification Number  | 19867  |
|--|--|
| Project Expenditure Category   | 2-Negative Economic Impacts  |
| Project Expenditure Subcategory  | 2.10-Assistance to Unemployed or Underemployed Workers<br>(e.g. job training, subsidized employment, employment<br>supports or incentives)   |
| Status To Completion   | Completed less than 50%  |
| Adopted Budget   | \$2,500,000.00   |
| Total Cumulative Obligations   | \$1,582,007.59   |
| Total Cumulative Expenditures  | \$416,490.27   |
| Current Period Obligations   | \$666.47   |
| Current Period Expenditures  | \$208,383.75   |
| Project Description  | Programs to create a qualified pipeline of Registered<br>Apprentices and to expand the underrepresented (Women),<br>disadvantaged, or low-skilled population that participates in<br>Registered Apprenticeship. Pre-Apprenticeship programs<br>provide programming aimed to close the gap in<br>qualifications for individuals not qualifying for a Registered<br>Apprenticeship position. |
| Does this project include a capital expenditure?   | No   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions | \$250,000.00   |
| Is a program evaluation of the project being conducted?  | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?                                | 2 Imp Low or moderate income HHs or populations  |
| Secondary Impacted and/or Disproportionately Impacted populations  | 3 Imp HHs that experienced unemployment  |
| Tertiary Impacted and/or Disproportionately Impacted populations   | 1 Imp General Public   |
| Is a program evaluation of the project being conducted?  | Yes  |
|  | Programs to create a qualified pipeline of Registered  |

| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Apprentices and to expand the underrepresented (Women),<br>disadvantaged, or low-skilled population that participates in<br>Registered Apprenticeship. Pre-Apprenticeship programs<br>provide programming aimed to close the gap in<br>qualifications for individuals not qualifying for a Registered<br>Apprenticeship position.   |
|---|---|
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | The Delaware Department of Labor, Division of<br>Employment and Training, Apprenticeship Unit (DET) seeks<br>ARPA funding to support Pre-Apprenticeship Programs,<br>primarily in the construction industry. The Request is for<br>specific programming to assist individuals who want and are<br>available for work, including those who are<br>unemployed, have looked for work sometime in the past 12<br>months, who are employed part time but who want and are<br>available for full-time work, or who are employed but<br>seeking a po |

## Project Name: DSAMH Psychiatric Center Study

| Project Identification Number   | 19186   |
|---|---|
| Project Expenditure Category  | 1-Public Health   |
| Project Expenditure Subcategory   | 1.14-Other Public Health Services   |
| Status To Completion  | Completed less than 50%   |
| Adopted Budget  | \$200,000.00  |
| Total Cumulative Obligations  | \$200,000.00  |
| Total Cumulative Expenditures   | \$96,000.00   |
| Current Period Obligations  | \$0.00  |
| Current Period Expenditures   | \$36,000.00   |
| Project Description   | Feasibility study for replacing the Delaware Psychiatric Center.  |
| Does this project include a capital expenditure?  | No  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Secondary Impacted and/or Disproportionately Impacted populations   | 2 Imp Low or moderate income HHs or populations   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Comprehensive Behavioral Health Proposal consisting of<br>the: (1) DPC Facility<br>Study, (2) IMD/Mental Health Rate Study, and (3) DPC<br>Workforce Study. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All projects reviewed by Delaware DOJ for ARPA eligibility.   |

# Project Name: OGOV MH Boys & Girls Clubs DE

| Project Identification Number   | 19865                       |
|---------------------------------|-----------------------------|
| Project Expenditure Category    | 1-Public Health             |
| Project Expenditure Subcategory | 1.12-Mental Health Services |
| Status To Completion            | Completed less than 50%     |
|                                 |                             |

| Adopted Budget  | \$650,000.00  |
|---|---|
| Total Cumulative Obligations  | \$650,000.00  |
| Total Cumulative Expenditures   | \$347,022.00  |
| Current Period Obligations  | \$0.00  |
| Current Period Expenditures   | \$0.00  |
| Project Description   | Boys & Girls Clubs of Delaware proposes seeks to build<br>staff capacity in the area of trauma informed care and<br>support our ongoing paradigm shift into becoming a<br>trauma-informed organization at all 40 locations across<br>Delaware's three counties. This program will allow us to<br>support our high-needs youth in dealing with the many<br>Adverse Childhood Experiences (ACES) they face by<br>providing extensive staff training, offering new mental<br>health-related services directly to our youth, and supporting<br>for our staff in using trauma informed approaches while<br>working in all aspects with youth and their families. It will<br>add three Master's-level Social Workers (MSWs or<br>LCSWs), one in each county. This project aligns with<br>Governor Carney's Executive Order 24, which was signed in<br>October 2018 and made Delaware a trauma informed state. |
| Does this project include a capital expenditure?  | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00  |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Boys & Girls Clubs of Delaware seeks to build staff capacity<br>in the area of trauma informed care and support our ongoing<br>paradigm shift into becoming a trauma-informed<br>organization at all 40 locations across Delaware's three<br>counties.  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All Delaware ARPA projects are reviewed for eligibility by the Delaware Department of Justice.  |

# Project Name: OGOV MH Cancer Support Community

| Project Identification Number   | 19459                       |
|---------------------------------|-----------------------------|
| Project Expenditure Category    | 1-Public Health             |
| Project Expenditure Subcategory | 1.12-Mental Health Services |
| Status To Completion            | Completed                   |
| Adopted Budget                  | \$15,000.00                 |
| Total Cumulative Obligations    | \$15,000.00                 |
| Total Cumulative Expenditures   | \$15,000.00                 |
| Current Period Obligations      | \$0.00                      |
| Current Period Expenditures     | \$0.00                      |
|                                 |                             |

| Project Description   | Group Health Coaching for Cancer Survivors is held in<br>partnership with University of Delaware and Stockton<br>University. This virtual program, available at no cost to<br>anyone in Delaware with a cancer diagnosis, anywhere on the<br>cancer continuum.  |
|---|---|
| Does this project include a capital expenditure?  | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00  |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | The Group Health Coaching program provides 6 virtual<br>sessions with a trained and licensed health coach, providing<br>education and working to set individual goals in each<br>session. Meeting every two weeks, the health coach provides<br>education each session on the following areas: sleep<br>hygiene, anxiety & stress management, healthy eating,<br>exercise and mindfulness. Participants see an improvement<br>in levels of depression and anxiety, and are able to make<br>long-lasting, healthy lifestyle changes. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Total # screened 32, Total # who started coaching 15, Total<br>number who have started immediate follow-up 12, Total<br>who have have completed 3-month follow-up 5.  |

## Project Name: OGOV MH Gaudenzia

| Project Identification Number  | 19462   |
|--|---|
| Project Expenditure Category   | 1-Public Health   |
| Project Expenditure Subcategory  | 1.12-Mental Health Services   |
| Status To Completion   | Completed less than 50%   |
| Adopted Budget   | \$3,000,000.00  |
| Total Cumulative Obligations   | \$3,000,000.00  |
| Total Cumulative Expenditures  | \$3,000,000.00  |
| Current Period Obligations   | \$0.00  |
| Current Period Expenditures  | \$0.00  |
| Project Description  | This specific project or purchase description is residential treatment campus for pregnant and parenting women (PPW)with SUD/ COD and their dependent children. |
| Does this project include a capital expenditure?   | Yes   |
| What is the Total expected capital expenditure, including pre-development costs, if applicable                               | \$3,000,000.00  |
| Type of capital expenditures, based on the following enumerated uses   | Behavioral health facilities and equipment  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions | \$0.00  |

| Is a program evaluation of the project being conducted?   | Yes   |
|---|---|
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Secondary Impacted and/or Disproportionately Impacted populations   | 2 Imp Low or moderate income HHs or populations   |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | ARPA funding in the amount of \$3,000,000. to operate a residential Treatment Campus for Pregnant and Parenting Women with Substance Use Disorder (SUD)/Co-Occurring Disorder (COD) and their children. Gaudenzia will use ARPA to fund the second year of operation while working with DHSS, DSAMH, Medicaid, and other stakeholders to develop a sustainable, braided mechanism for funding services in future years. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All projects are reviewed for eligibility by the Delaware Department of Justice.  |

# Project Name: OGOV MH Latin American

| Project Identification Number  | 19954  |
|--|--|
| Project Expenditure Category   | 1-Public Health  |
| Project Expenditure Subcategory  | 1.12-Mental Health Services  |
| Status To Completion   | Completed 50% or more  |
| Adopted Budget   | \$171,949.00   |
| Program Income Earned  | \$34,078.12  |
| Program Income Expended  | \$34,078.12  |
| Total Cumulative Obligations   | \$171,949.00   |
| Total Cumulative Expenditures  | \$85,974.50  |
| Current Period Obligations   | \$0.00   |
| Current Period Expenditures  | \$0.00   |
| Project Description  | The Latin American Community Center Youth Prevention<br>Program will implement the evidence-based and<br>trauma-informed curriculum, Too Good For Drugs and<br>Violence as well as provide individualized mental health<br>support to children in grades K through 12 who are enrolled<br>in LACC youth development programming. |
| Does this project include a capital expenditure?   | No   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions | \$171,949.00   |
| Is a program evaluation of the project being conducted?  | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?                                | 7 Imp Other HHs or populations that experienced a negative economic  |
| Secondary Impacted and/or Disproportionately Impacted populations  | 2 Imp Low or moderate income HHs or populations  |
| Is a program evaluation of the project being conducted?  | Yes  |

| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | The Latin American Community Center (LACC) Youth<br>Prevention Program will implement the evidence-based and<br>trauma-informed curriculum, Too Good For Drugs and<br>Violence as well as provide individualized mental health<br>support to children in grades K through 12 who are enrolled<br>in LACC youth development programming. |
|---|---|
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Delaware DOJ review of each project to ensure the funding<br>addresses problems caused or exacerbated by the pandemic.  |

## Project Name: OGOV MH Mental Health Association

| Project Identification Number   | 19798   |
|---|---|
| Project Expenditure Category  | 1-Public Health   |
| Project Expenditure Subcategory   | 1.12-Mental Health Services   |
| Status To Completion  | Completed   |
| Adopted Budget  | \$48,878.00   |
| Total Cumulative Obligations  | \$48,878.00   |
| Total Cumulative Expenditures   | \$48,878.00   |
| Current Period Obligations  | \$0.00  |
| Current Period Expenditures   | \$0.00  |
| Project Description   | We know that COVID19 has had an especially intense<br>impact on those with mental illness, who require connection,<br>treatment and stress management to maintain their health.<br>We provide specific stress-management training, resource<br>information, and support groups that directly target those<br>with mental illness and discuss these topics in-depth in order<br>to support them and ensure that they have access to<br>treatment and support. For this project, we created a support<br>group and educational presentation specific to the stressors<br>of COVID-19 with strategies on how to mitigate these<br>stressors and improve mental health. We will target those<br>most effected by these stressors due to pre-existing mental<br>health diagnoses which compound the impact of the<br>pandemic. |
| Does this project include a capital expenditure?  | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions                  | \$48,878.00   |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Secondary Impacted and/or Disproportionately Impacted populations   | 5 Imp HHs that qualify for certain federal programs   |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced | We primarily serve those with mental illness who have been<br>intensely impacted by the isolation caused by the COVID 19<br>pandemic.   |
|   | They have prepared the logistics of new wellness groups<br>specifically addressing COVID. MHA has also begun  |

| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | advertizing the groups on our website, social media, and<br>through email distribution via constant contact to over<br>10,000 contacts. Targeted conversations with relevant<br>community agencies including several psychiatric hospitals<br>and state agencies that deliver social services. |
|---|--|
|---|--|

## Project Name: OGOV MH NAMI

| Project Identification Number   | 19851  |
|---|--|
| Project Expenditure Category  | 1-Public Health  |
| Project Expenditure Subcategory   | 1.12-Mental Health Services  |
| Status To Completion  | Completed 50% or more  |
| Adopted Budget  | \$208,110.00   |
| Total Cumulative Obligations  | \$208,110.00   |
| Total Cumulative Expenditures   | \$208,110.00   |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | The National Alliance on Mental Illness in Delaware (NAMI<br>Delaware) is expanding its capacity through the hiring and<br>training of one full-time Peer Services Manager,<br>Independent Contractors and allocating two existing staff<br>members to provide a variety of evidence-based peer<br>services programs including: (1) NAMI Peer-to-Peer (2)<br>NAMI Hearts & Minds (3) NAMI In Our Own Voice (4)<br>NAMI Sharing Your Story with Law Enforcement and (4)<br>NAMI Connection (a monthly support group). By expanding<br>these services, NAMI Delaware will reach more individuals<br>benefitting from peer support services building resilience<br>with those living with mental illness and those they love.<br>With more opportunities to engage in NAMI Delaware's<br>signature programs, more individuals will receive the<br>support they need in their journey to recovery. |
| Does this project include a capital expenditure?  | No   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions                  | \$208,110.00   |
| Is a program evaluation of the project being conducted?   | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced | The National Alliance on Mental Illness in Delaware (NAMI<br>Delaware) is expanding its capacity through the hiring and<br>training of one full-time Peer Services Manager,<br>Independent Contractors and allocating two existing staff<br>members to provide a variety of evidence-based peer<br>services programs including: (1) NAMI Peer-to-Peer (2)<br>NAMI Hearts & Minds (3) NAMI In Our Own Voice (4)<br>NAMI Sharing Your Story with Law Enforcement and (4)<br>NAMI Connection (a monthly support group).   |
| Brief description of recipient's approach to ensuring that  | By expanding these services, NAMI Delaware will reach<br>more individuals benefitting from peer support services   |

building resilience with those living with mental illness and those they love. With more opportunities to engage in NAMI Delaware's signature programs, more individuals will receive the support they need in their journey to recovery.

#### **Project Name: OGOV MH Saint Francis**

| Project Identification Number   | 19878  |
|---|--|
| Project Expenditure Category  | 1-Public Health  |
| Project Expenditure Subcategory   | 1.12-Mental Health Services  |
| Status To Completion  | Completed 50% or more  |
| Adopted Budget  | \$2,500,000.00   |
| Program Income Earned   | \$16,609.98  |
| Total Cumulative Obligations  | \$2,500,000.00   |
| Total Cumulative Expenditures   | \$2,500,000.00   |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$1,250,000.00   |
| Project Description   | As the community's primary safety-net facility, St. Francis<br>Hospital proposes the project herein to support its<br>transformation beyond the sole provision of clinical care to<br>broadly address the social determinants of health through a<br>community-based system of coordinated services. Such<br>integration of traditional hospital services with<br>community-based human/social services comprises the<br>Healthy Village at Saint Francis.                             |
| Does this project include a capital expenditure?  | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$2,500,000.00   |
| Type of capital expenditures, based on the following enumerated uses  | Behavioral health facilities and equipment   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions                  | \$2,500,000.00   |
| Is a program evaluation of the project being conducted?   | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 2 Imp Low or moderate income HHs or populations  |
| Secondary Impacted and/or Disproportionately Impacted populations   | 2 Imp Low or moderate income HHs or populations  |
| Tertiary Impacted and/or Disproportionately Impacted populations  | 1 Imp General Public   |
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced | As a primary objective, the project is providing trusted and<br>welcoming service environments for all who need care, as<br>well as a safe and secure facility for colleagues. It is<br>structured to advance public health by 1) establishing<br>Merakey Wellness Recovery Team services at St. Francis<br>Hospital and in the community, 2) developing a behavioral<br>health clinic that is integrated with primary care, and 3)<br>enhancing overall hospital safety and security. |

## Project Name: OGOV MH Tabitha Medical Care

| Project Identification Number   | 19950  |
|---|--|
| Project Expenditure Category  | 1-Public Health  |
| Project Expenditure Subcategory   | 1.12-Mental Health Services  |
| Status To Completion  | Completed less than 50%  |
| Adopted Budget  | \$250,000.00   |
| Total Cumulative Obligations  | \$250,000.00   |
| Total Cumulative Expenditures   | \$125,000.00   |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | The Holistic Health initiative (HHI) Project is designed to<br>ensure continue of care for mental and physical health. The<br>project will cover 2 years for expenses for<br>implementatiogratn of a community mental and physical<br>health care integrated program in the migrant communities<br>in Delaware. The aim of the HHI program is to promote<br>psychosocial health and well-being by providing screening,<br>brief intervention and bringing access to treatment and<br>services, and promoting awareness of mental health and<br>substance use disorders in Haitian Migrant communities. |
| Does this project include a capital expenditure?  | No   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$250,000.00   |
| Is a program evaluation of the project being conducted?   | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 2 Imp Low or moderate income HHs or populations  |
| Secondary Impacted and/or Disproportionately Impacted populations   | 5 Imp HHs that qualify for certain federal programs  |
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | The Integrated Community Mental Health Initiative that is a<br>program for preparation and implementation of a community<br>mental and primary health care integrated program in the<br>migrant communities in Delaware. The funds will primarily<br>be used to fund infrastructure including equipment, staff<br>training and supplies.   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Delaware DOJ review of all projects for ARPA applicability.  |

#### Project Name: OGOV MH Telehelp 247

| Project Identification Number | 19949           |
|-------------------------------|-----------------|
| Project Expenditure Category  | 1-Public Health |
| F                             |                 |

| Project Expenditure Subcategory   | 1.12-Mental Health Services  |
|---|--|
| Status To Completion  | Completed  |
| Adopted Budget  | \$400,000.00   |
| Total Cumulative Obligations  | \$400,000.00   |
| Total Cumulative Expenditures   | \$400,000.00   |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | TeleHelp 24/7 will secure Technical Hardware such as<br>Laptops, iPads, etc. for Admin Team. The TeleHelp 24/7<br>will also use funds for capital expenditures, platform<br>upgrade that will increase client data security, the<br>opportunity to provide multiple services, and the opportunity<br>to provide a mental health resource bank for clients and<br>clinicians. TeleHelp 24/7 will also use funding to obtain<br>support prevention, early intervention and awareness<br>materials. |
| Does this project include a capital expenditure?  | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$400,000.00   |
| Type of capital expenditures, based on the following enumerated uses  | Behavioral health facilities and equipment   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$400,000.00   |
| Is a program evaluation of the project being conducted?   | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 7 Imp Other HHs or populations that experienced a negative economic  |
| Secondary Impacted and/or Disproportionately Impacted populations   | 2 Imp Low or moderate income HHs or populations  |
| Tertiary Impacted and/or Disproportionately Impacted populations  | 1 Imp General Public   |
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | TeleHelp 24/7 will secure Technical Hardware such as<br>Laptops, iPads, etc. for Admin Team. The TeleHelp 24/7<br>will also use funds for capital expenditures, platform<br>upgrade that will increase client data security, the<br>opportunity to provide multiple services, and the opportunity<br>to provide a mental health resource bank for clients and<br>clinicians. TeleHelp 24/7 will also use funding to obtain<br>support prevention, early intervention and awareness<br>materials. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Delaware DOJ review of all projects before awarding.   |

## Project Name: OGOV MH Trauma Matters DE

| Project Identification Number | 19939           |
|-------------------------------|-----------------|
| Project Expenditure Category  | 1-Public Health |
|                               |                 |

| Project Expenditure Subcategory   | 1.12-Mental Health Services  |
|---|--|
| Status To Completion  | Completed 50% or more  |
| Adopted Budget  | \$250,000.00   |
| Program Income Earned   | \$17,495.00  |
| Program Income Expended   | \$17,495.00  |
| Total Cumulative Obligations  | \$250,000.00   |
| Total Cumulative Expenditures   | \$187,500.00   |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | To respond to the unprecedented level of collective trauma<br>caused by the COVID-19 public health emergency, TMD<br>will address the increased need for culturally responsive,<br>evidence-based trauma-informed approaches in social<br>service and healthcare organizations by becoming a<br>statewide trauma-informed training and resource<br>clearinghouse. Ensuring that all people, communities, and<br>organizations have access to quality, vetted, and certified<br>trauma training & educational resources will help our<br>partners on the ground systematically address the collective<br>trauma and subsequent behavioral health issues caused by<br>the public health emergency. |
| Does this project include a capital expenditure?  | No   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$250,000.00   |
| Is a program evaluation of the project being conducted?   | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | To respond to the unprecedented level of collective trauma<br>caused by the COVID-19 public health emergency, TMD<br>will address the increased need for culturally responsive,<br>evidence-based trauma-informed approaches in social<br>service and healthcare organizations by becoming a<br>statewide trauma-informed training and resource<br>clearinghouse. Ensuring that all people, communities, and<br>organizations have access to quality, vetted, and certified<br>trauma training & educational resources.  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Delaware DOJ review of all projects for applicability to ARPA funding and addressing the pandemic.   |

# Project Name: OGOV MH Trauma Specialists DE

| Project Identification Number   | 19881                       |
|---------------------------------|-----------------------------|
| Project Expenditure Category    | 1-Public Health             |
| Project Expenditure Subcategory | 1.12-Mental Health Services |
| Status To Completion            | Completed less than 50%     |
| Adopted Budget                  | \$75,000.00                 |

| Total Cumulative Obligations  | \$75,000.00  |
|---|--|
| Total Cumulative Expenditures   | \$50,000.00  |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | To provide trauma therapy to the healthcare community in<br>Delaware. To provide trauma training to the clinical<br>community. To provide trauma education to the DE<br>community. |
| Does this project include a capital expenditure?  | No   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$75,000.00  |
| Is a program evaluation of the project being conducted?   | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | To address trauma related to the pandemic for all within the<br>state of Delaware and specifically this trauma for Healthcare<br>Workers.  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Delaware DOJ review of all ARPA projects for eligibility.  |

## Project Name: OGOV MH DE Pediatrics

| Project Identification Number  | 19461   |
|--|---|
| Project Expenditure Category   | 1-Public Health   |
| Project Expenditure Subcategory  | 1.12-Mental Health Services   |
| Status To Completion   | Completed 50% or more   |
| Adopted Budget   | \$350,000.00  |
| Total Cumulative Obligations   | \$350,000.00  |
| Total Cumulative Expenditures  | \$196,484.00  |
| Current Period Obligations   | \$0.00  |
| Current Period Expenditures  | \$0.00  |
| Project Description  | Bidirectional treatment paradigm to address simultaneously<br>child and adolescent mental health disorders and obesity<br>within the framework of Delaware's trauma informed care<br>model. |
| Does this project include a capital expenditure?   | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions | \$350,000.00  |
| Is a program evaluation of the project being conducted?  | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?                                | 1 Imp General Public  |
| Is a program evaluation of the project being conducted?  | Yes   |

| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | The program is designed to support the treatment and<br>prevention of obesity and mental health disease in kids and<br>adolescents who have experiences adverse childhood events<br>that include but are not limited to the covid 19 pandemic . |
|---|---|
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Delaware DOJ review of all ARPA projects and scope.   |

# Project Name: OGOV Dover Interfaith Mission

| Project Identification Number   | 19521   |
|---|---|
| Project Expenditure Category  | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory   | 2.18-Housing Support: Other Housing Assistance  |
| Status To Completion  | Completed 50% or more   |
| Adopted Budget  | \$5,000,000.00  |
| Total Cumulative Obligations  | \$5,000,000.00  |
| Total Cumulative Expenditures   | \$4,250,000.00  |
| Current Period Obligations  | \$0.00  |
| Current Period Expenditures   | \$1,700,000.00  |
| Project Description   | The first component is the acquisition and renovation of the<br>property at 1156 Walker Road in Dover for use as a shelter<br>for women and children experiencing homelessness. The<br>second component is the purchase and renovation of 640 W.<br>Division Street in Dover for use as long-term supportive<br>housing for individuals and families moving from<br>homelessness to personal stability. Program services will be<br>provided in both buildings. As funds permit, additional<br>properties will be developed to house those who are<br>homeless or moving on from homelessness in Kent County. |
| Does this project include a capital expenditure?  | Yes   |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$5,000,000.00  |
| Type of capital expenditures, based on the following enumerated uses  | Affordable housing, supportive housing, or recovery housing   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00  |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 4 Imp HHs that experienced increased food or housing insecurity   |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Transitional housing for 40 individuals including women<br>and children who were displaced by pandemic.   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Intake process will verify homelessness and income; services will enable HHs to regain stability.   |

# Project Name: DTI Service Now Modernization

| Project Identification Number   | 19840  |
|---|--|
| Project Expenditure Category  | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity  |
| Project Expenditure Subcategory   | 3.4-Public Sector Capacity: Effective Service Delivery   |
| Status To Completion  | Completed less than 50%  |
| Adopted Budget  | \$7,500,000.00   |
| Total Cumulative Obligations  | \$4,852,393.32   |
| Total Cumulative Expenditures   | \$1,086,061.84   |
| Current Period Obligations  | \$3,297,811.88   |
| Current Period Expenditures   | \$155,798.80   |
| Project Description   | ServiceNow has become an integral part in our ITSM<br>processes over the years. Specifically, Incident, Requests,<br>Change, Problem and Knowledge Management. Over the<br>years, many other workflow solutions have been added into<br>this platform, and the demand for these other services has<br>been increasing at a rapid pace. The project enable us to<br>modernize the platform to effectively deliver IT services.<br>The project will allow us to modernize our processes and<br>technology to meet the demands of our agency and partners,<br>whose reliance on IT services has grown exponentially from<br>the impact of COVID-19. |
| Does this project include a capital expenditure?  | No   |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$7,000,000.00   |
| Type of capital expenditures, based on the following enumerated uses  | Technology infrastructure to adapt government operations   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | ServiceNow has become an integral part in our ITSM<br>processes over the years. Specifically, Incident, Requests,<br>Change, Problem and Knowledge Management. Over the<br>years, many other workflow solutions have been added into<br>this platform, and the demand for these other services has<br>been increasing at a rapid pace. The project enable us to<br>modernize the platform to effectively deliver IT services.<br>The project will allow us to modernize our processes and<br>technology to meet the demands of our agency.   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Department of Justice review of project objectives and goals<br>to determine the project is related and addressing impacts of<br>the pandemic.   |

## Project Name: DTI Network Modernization

| Project Identification Number   | 19704   |
|---------------------------------|---|
| Project Expenditure Category    | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity |
| Project Expenditure Subcategory | 3.4-Public Sector Capacity: Effective Service Delivery              |
| Status To Completion            | Completed less than 50%   |
| Adopted Budget                  | \$5,000,000.00  |
| Total Cumulative Obligations    | \$3,053,521.61  |
| <u></u>                         |   |

| Total Cumulative Expenditures   | \$1,906,659.36   |
|---|--|
| Current Period Obligations  | \$196,462.00   |
| Current Period Expenditures   | \$476,478.00   |
| Project Description   | The Network Modernization program will provide an<br>updated approach to the Statewide data and voice networks.<br>Equipment, tools, and processes will be upgraded, modified,<br>or added. Infrastructure upgrades, replacements, or additions<br>will be identified to provide performance, security, and<br>compatibility with automated management through modern<br>Infrastructure as Code(IaC) methods. Investments in<br>automation and new processes for the wired, wireless, voice,<br>and security aspects of our core network will improve our<br>ability to manage and secure our networks. In addition,<br>automation provides consistency, repeatability, and reduced<br>execution times versus our current manual processes.<br>Visibility and Observability are vitaly important to maintain<br>performance and security. Investments in the logging and<br>monitoring will be made in all areas of the core network to<br>improve our visibility. |
| Does this project include a capital expenditure?  | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$639,000.00   |
| Type of capital expenditures, based on the following enumerated uses  | Technology infrastructure to adapt government operations   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | The Network Modernization program will provide an<br>updated approach to the Statewide data and voice networks.<br>Equipment, tools, and processes will be upgraded, modified,<br>or added. Infrastructure upgrades, replacements, or additions<br>will be identified to provide performance, security, and<br>compatibility with automated management through modern<br>Infrastructure as Code(IaC) methods.  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Investments in the logging and monitoring will be made in all areas of the core network to improve our visibility.   |

## Project Name: OGOV NeighborGood Partners (NCALL) Farmworkers

| Project Identification Number   | 19736   |
|---------------------------------|---|
| Project Expenditure Category    | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory | 2.15-Long-Term Housing Security: Affordable Housing   |
| Status To Completion            | Completed 50% or more   |
| Adopted Budget                  | \$2,900,000.00  |
| Total Cumulative Obligations    | \$2,900,000.00  |
| Total Cumulative Expenditures   | \$1,500,000.00  |
| Current Period Obligations      | \$0.00  |
| Current Period Expenditures     | \$0.00  |
| Project Description             | NCALL received ARPA funding to leverage \$5 million<br>from USDA Rural Development's farm labor housing loan<br>and grant to develop 40 units of rental housing for poultry<br>processing workers and begin to address the special housing<br>problems experienced in Sussex County by this population. |

| Does this project include a capital expenditure?  | Yes   |
|---|---|
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$2,900,000.00  |
| Type of capital expenditures, based on the following enumerated uses  | Affordable housing, supportive housing, or recovery housing                                   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00  |
| Is a program evaluation of the project being conducted?   | No  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Is a program evaluation of the project being conducted?   | No  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Affordable housing program for farmworkers in Delaware.                                       |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Project was reviewed by Delaware DOJ to determine eligibility for funding through ARPA SLFRF. |

## Project Name: OGOV NeighborGood Partners (NCALL) Land Bank

| Project Identification Number   | 19739   |
|---|---|
| Project Expenditure Category  | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory   | 2.15-Long-Term Housing Security: Affordable Housing   |
| Status To Completion  | Completed 50% or more   |
| Adopted Budget  | \$4,000,000.00  |
| Total Cumulative Obligations  | \$4,000,000.00  |
| Total Cumulative Expenditures   | \$2,000,000.00  |
| Current Period Obligations  | \$0.00  |
| Current Period Expenditures   | \$0.00  |
| Project Description   | In response to the current affordable housing crisis in Kent<br>and Sussex Counties, NCALL wishes to purchase parcels of<br>land for furture development of single- or multi-family<br>housing for low- and moderate-income households before<br>prices escalate further. |
| Does this project include a capital expenditure?  | Yes   |
| What is the Total expected capital expenditure, including pre-development costs, if applicable              | \$4,000,000.00  |
| Type of capital expenditures, based on the following enumerated uses  | Other (please specify)  |
| Capital Expenditure Justification   | In response to the current affordable housing crisis in Kent<br>and Sussex Counties, NCALL wishes to purchase parcels of<br>land for furture development of single- or multi-family<br>housing for low- and moderate-income households before<br>prices escalate further. |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based | \$0.00  |

| interventions   |   |
|---|---|
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 2 Imp Low or moderate income HHs or populations   |
| Secondary Impacted and/or Disproportionately Impacted populations   | 14 Dis Imp Low income HHs and populations   |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | In response to the current affordable housing crisis in Kent<br>and Sussex Counties, NCALL wishes to purchase parcels of<br>land for furture development of single- or multi-family<br>housing for low- and moderate-income households before<br>prices escalate further. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | In response to the current affordable housing crisis in Kent<br>and Sussex Counties, NCALL wishes to purchase parcels of<br>land for furture development of single- or multi-family<br>housing for low- and moderate-income households before<br>prices escalate further. |

## Project Name: OGOV Southbridge Beautification

| Project Identification Number   | 19924   |
|---|---|
| Project Expenditure Category  | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory   | 2.23-Strong Healthy Communities: Demolition and<br>Rehabilitation of Properties           |
| Status To Completion  | Completed 50% or more   |
| Adopted Budget  | \$1,000,000.00  |
| Total Cumulative Obligations  | \$1,000,000.00  |
| Total Cumulative Expenditures   | \$700,000.00  |
| Current Period Obligations  | \$0.00  |
| Current Period Expenditures   | \$350,000.00  |
| Project Description   | Southbridge Community Beautification and Housing<br>Revitalization Project                |
| Does this project include a capital expenditure?  | Yes   |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$1,000,000.00  |
| Type of capital expenditures, based on the following enumerated uses  | Rehabilitations, renovation, remediation, cleanup, or conversions                         |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Secondary Impacted and/or Disproportionately Impacted populations   | 2 Imp Low or moderate income HHs or populations   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Community Beautification and Housing Revitalization<br>Project.                           |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All project proposals are reviewed by the Delaware Department of Justice for eligibility. |

#### Project Name: OGOV Sussex Habitat Humanity

| Project Identification Number   | 19522   |
|---|---|
| Project Expenditure Category  | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory   | 2.23-Strong Healthy Communities: Demolition and Rehabilitation of Properties  |
| Status To Completion  | Completed 50% or more   |
| Adopted Budget  | \$3,000,000.00  |
| Total Cumulative Obligations  | \$3,000,000.00  |
| Total Cumulative Expenditures   | \$2,000,000.00  |
| Current Period Obligations  | \$0.00  |
| Current Period Expenditures   | \$0.00  |
| Project Description   | This specific project or purchase description includes four<br>projects: Kimmeytown Revitalization, ReStore Expansion,<br>Affordable Home Construction, and Home Repairs. The four<br>projects will increase fundraising and volunteer capacity,<br>build 35 affordable homes, repair approximately 275 homes,<br>and expand the Sussex County Habitat for Humanity<br>ReStore. |
| Does this project include a capital expenditure?  | Yes   |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$3,000,000.00  |
| Type of capital expenditures, based on the following enumerated uses  | Rehabilitations, renovation, remediation, cleanup, or conversions   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 2 Imp Low or moderate income HHs or populations   |
| Secondary Impacted and/or Disproportionately Impacted populations   | 4 Imp HHs that experienced increased food or housing insecurity   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | All SCHFH programs funded by this ARPA funding assist<br>low-income households reduce negative economic impacts<br>by increasing access to and stabilizing housing. This<br>includes building affordable homeownership opportunities<br>and providing home repairs to low-income homeowners.  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | This specific project or purchase description includes four<br>projects: Kimmeytown Revitalization, ReStore Expansion,<br>Affordable Home Construction, and Home Repairs. The four<br>projects will increase fundraising and volunteer capacity,<br>build 35 affordable homes, repair approximately 275 homes,<br>and expand the Sussex County Habitat for Humanity<br>ReStore. |

## Project Name: OGOV Wilmington Housing Authority

| Project Identification Number   | 19783   |
|---------------------------------|---|
| Project Expenditure Category    | 2-Negative Economic Impacts                         |
| Project Expenditure Subcategory | 2.15-Long-Term Housing Security: Affordable Housing |
| Status To Completion            | Completed 50% or more                               |
| Adopted Budget                  | \$1,500,000.00                                      |
|                                 |   |

| Total Cumulative Obligations  | \$1,500,000.00   |
|---|--|
| Total Cumulative Expenditures   | \$1,500,000.00   |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | We are currently renovating 703 and 704 Bennett Street in<br>Wilmington, DE, 19801. Both are 2 bedroom long-term<br>vacant units that are being totally renovated. These units will<br>be available for Delawareans in need of affordable housing. |
| Does this project include a capital expenditure?  | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$1,500,000.00   |
| Type of capital expenditures, based on the following enumerated uses  | Affordable housing, supportive housing, or recovery housing  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00   |
| Is a program evaluation of the project being conducted?   | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 2 Imp Low or moderate income HHs or populations  |
| Secondary Impacted and/or Disproportionately Impacted populations   | 5 Imp HHs that qualify for certain federal programs  |
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Our goal is to increase the number of affordable housing<br>units in Wilmington and throughout Delaware for<br>low-income families.  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | We are currently renovating 703 and 704 Bennett Street in<br>Wilmington, DE, 19801. Both are 2 bedroom long-term<br>vacant units that are being totally renovated. These units will<br>be available for Delawareans in need of affordable housing. |

# Project Name: OGOV Tech Impact

| Project Identification Number   | 18841  |
|---------------------------------|--|
| Project Expenditure Category    | 2-Negative Economic Impacts  |
| Project Expenditure Subcategory | 2.10-Assistance to Unemployed or Underemployed Workers<br>(e.g. job training, subsidized employment, employment<br>supports or incentives)   |
| Status To Completion            | Completed 50% or more  |
| Adopted Budget                  | \$3,000,000.00   |
| Total Cumulative Obligations    | \$3,000,000.00   |
| Total Cumulative Expenditures   | \$2,000,000.00   |
| Current Period Obligations      | \$0.00   |
| Current Period Expenditures     | \$0.00   |
|                                 | The Data Science Fellowship seeks to grow the pool of data<br>scientists, analysts, and engineers in Delaware by directly<br>recruiting PhD candidates and postdoctoral researchers with<br>a focus in appropriate quantitative methods, technologies, |

|   | and techniques. Fellows would be required to live and work<br>in Delaware during the program to be eligible for<br>participation.  |
|---|--|
| Project Description   | PhD candidates gain a great deal of experience in their field,<br>but often need additional mentorship and experience to<br>successfully transition into full time employment in industry.<br>The Data Science Fellow model provides this mentorship<br>and experience to help successfully transition into full time<br>employment while providing access to complex, real world<br>issues that attract technologists. Candidates have frequently<br>cited the opportunity to solve complex problems in the real<br>world as a reason to pursue the Data Science Fellow role. |
|   | The Data Science Fellowship is a workforce development<br>pipeline to attract and retain highly skilled, highly educated<br>talent in Delaware. Data science is one of the most<br>sought-after skill sets in the job market today. Creating a<br>pipeline to attract and retain this talent is critical to ensuring<br>that Delaware builds the workforce of the future.<br>The Fellowship will be positioned as an opportunity for   |
|   | Masters, PhD candidates, and postdoctoral researchers to<br>build skills ahead of entering the workforce. Recruitment<br>will primarily occur at universities with appropriate<br>academic programs.   |
| Does this project include a capital expenditure?  | No   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$136,132.71   |
| Is a program evaluation of the project being conducted?   | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Participants will complete a 1 year Fellowship program to<br>upskill their data and soft skill capabilities. Projects<br>throughout the program will be in partnership with local<br>organizations (including state agencies) focused on public<br>health initiatives.   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Participants will be selected based upon their ability to create and develop projects that will impact public health and economic mobility for the Delawareans.  |

# Project Name: OGOV First State Squash

| Project Identification Number   | 18597   |
|---------------------------------|---|
| Project Expenditure Category    | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory | 2.25-Addressing Educational Disparities: Academic, Social, and Emotional Services |
| Status To Completion            | Completed   |
| Adopted Budget                  | \$1,250,000.00  |
| Total Cumulative Obligations    | \$1,250,000.00  |
| Total Cumulative Expenditures   | \$1,250,000.00  |

| Current Period Obligations  | \$0.00   |
|---|--|
| Current Period Expenditures   | \$0.00   |
|   | First State Squash provides Wilmington youth, a majority of<br>whom will be the first in their families to achieve a college<br>degree, with tuition-free academic programming, squash<br>instruction, and enrichment opportunities. Students enter the<br>program in fifth grade and continue year-round, to and<br>through college graduation. Using the sport of squash as a<br>teaching tool, FSS creates long-term, intensive support and<br>unique learning opportunities. FSS builds strong<br>partnerships with students, families, and schools to help<br>participants fulfill their academic, athletic, and personal<br>goals. |
| Project Description   | On January 7th, 2022, FSS completed the purchase of<br>"Reflex," a former squash club in Wilmington. Located at<br>524 S Walnut Street, "Reflex" has six squash courts, locker<br>rooms, and multiple prospective spaces that could host FSS<br>classrooms and an office. Access to a building of this size<br>will allow FSS to expand enrollment to better meet the needs<br>of Delaware's youth, and ensure the organization offers<br>long-term programming and support services to team<br>members and families.  |
|   | <ul> <li>First State Squash's first class will graduate from high school in 2026. Our long-term goals include ensuring:</li> <li>100% of team members graduate from high school</li> <li>100% of team members matriculate to institutions of postsecondary education</li> <li>70% of team members graduate four-year colleges or alternative post-secondary opportunities in six years or less</li> <li>supporting team members become career ready and engaged citizens upon college graduation"</li> </ul>   |
| Does this project include a capital expenditure?  | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$1,250,000.00   |
| Type of capital expenditures, based on the following enumerated uses  | Schools and other educational facilities   |
| Capital Expenditure Justification   | N/A  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions                  | \$1,250,000.00   |
| Is a program evaluation of the project being conducted?   | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 2 Imp Low or moderate income HHs or populations  |
| Secondary Impacted and/or Disproportionately Impacted populations   | 19 Dis Imp For services to address educational disparities<br>Title I eligible   |
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced | "FSS team members attend practices three-days-a-week<br>during the school year and 20 practices in the summer. Each<br>session includes squash instruction, academic support<br>(homework help and literacy-based enrichment) and a<br>healthy snack."   |

| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19           | <ul> <li>"Students must fall into two/three of the following categories:</li> <li>Attend a Wilmington Title I school</li> <li>Be the first in their family to attend a 4-year post-secondary institution</li> <li>Live in a single family household</li> <li>Is a student of color</li> <li>Be TANF eligible "</li> </ul> |
|---|---|
| National Center for Education Statistics ("NCES") School<br>ID or NCES District ID. List the School District if all<br>schools within the school district received some funds | 1000200, 1000006, 1000059, 1000010, 1000062, 1000014  |

# **Project Name: OGOV Dover Interfaith Mission for Housing**

|   | 1   |
|---|---|
| Project Identification Number   | 18636   |
| Project Expenditure Category  | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory   | 2.18-Housing Support: Other Housing Assistance  |
| Status To Completion  | Completed   |
| Adopted Budget  | \$589,990.00  |
| Total Cumulative Obligations  | \$589,990.00  |
| Total Cumulative Expenditures   | \$589,990.00  |
| Current Period Obligations  | \$0.00  |
| Current Period Expenditures   | \$0.00  |
| Project Description   | This 17900 square foot building on about one acre will be<br>converted to emergency/transitional housing for displaced<br>families. This project will provide highly-affordable housing<br>for individuals and families displaced by job loss or lack of<br>employment access and opportunity related to the Covid-19<br>pandemic. Preliminary design work is complete.<br>Construction will take place during remainder of 2022. |
| Does this project include a capital expenditure?  | Yes   |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$581,990.00  |
| Type of capital expenditures, based on the following enumerated uses  | Affordable housing, supportive housing, or recovery housing   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$581,990.00  |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 4 Imp HHs that experienced increased food or housing insecurity   |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Transitional housing for 40 individuals including women<br>and children who were displaced by pandemic.   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Intake process will verify homelessness and income;<br>services will enable HHs to regain stability.  |

### Project Name: OMB HVAC Upgrades CSOB 7th Floor

|   | 1 7   |
|---|---|
| Project Identification Number   | 18804   |
| Project Expenditure Category  | 1-Public Health   |
| Project Expenditure Subcategory   | 1.14-Other Public Health Services   |
| Status To Completion  | Completed less than 50%   |
| Adopted Budget  | \$2,400,000.00  |
| Total Cumulative Obligations  | \$2,028,090.57  |
| Total Cumulative Expenditures   | \$1,769,739.77  |
| Current Period Obligations  | \$22,399.56   |
| Current Period Expenditures   | \$30,787.85   |
| Project Description   | "Funding for two Office of Management and Budget<br>projects for Heating, Ventilation, and Air Conditioning<br>(HVAC) upgrades and/or replacements in the Carvel State<br>Building and the Jesse Cooper Building, both State facilities.<br>OMB anticipates the cost of the two HVAC improvements<br>to be in the range of \$10 million." |
| Does this project include a capital expenditure?  | Yes   |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$2,400,000.00  |
| Type of capital expenditures, based on the following enumerated uses  | Installation and improvement of ventilation systems   |
| Capital Expenditure Justification   | Upgrade HVAC systems in public buildings  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Provide improved HVAC in public building  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Needed for improvement of general public  |
|   |   |

### Project Name: OMB HVAC Upgrades CSOB 8th Floor

| Project Identification Number   | 18805  |
|---------------------------------|--|
| Project Expenditure Category    | 1-Public Health  |
| Project Expenditure Subcategory | 1.14-Other Public Health Services  |
| Status To Completion            | Completed less than 50%  |
| Adopted Budget                  | \$1,922,062.62   |
| Total Cumulative Obligations    | \$1,647,947.70   |
| Total Cumulative Expenditures   | \$1,383,829.61   |
| Current Period Obligations      | \$8,222.14   |
| Current Period Expenditures     | \$228,522.17   |
|                                 | "Funding for two Office of Management and Budget<br>projects for Heating, Ventilation, and Air Conditioning<br>(HVAC) upgrades and/or replacements in the Carvel State |

| Project Description   | Building and the Jesse Cooper Building, both State facilities.<br>OMB anticipates the cost of the two HVAC improvements<br>to be in the range of \$10 million." |
|---|---|
| Does this project include a capital expenditure?  | Yes   |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$35,268.75   |
| Type of capital expenditures, based on the following enumerated uses  | Installation and improvement of ventilation systems   |
| Capital Expenditure Justification   | Upgrade HVAC systems in public buildings  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Provide improved HVAC in public building  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Needed for improvement of general public  |

# Project Name: OMB HVAC Upgrades CSOB 11th Floor

| Project Identification Number   | 18806  |
|---|--|
| Project Expenditure Category  | 1-Public Health  |
| Project Expenditure Subcategory   | 1.14-Other Public Health Services  |
| Status To Completion  | Completed less than 50%  |
| Adopted Budget  | \$2,200,000.00   |
| Total Cumulative Obligations  | \$2,200,000.00   |
| Total Cumulative Expenditures   | \$536,208.24   |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$287,308.86   |
| Project Description   | "Funding for two Office of Management and Budget<br>projects for Heating, Ventilation, and Air Conditioning<br>(HVAC) upgrades and/or replacements in the Carvel State<br>Building and the Jesse Cooper Building, both State facilities<br>OMB anticipates the cost of the two HVAC improvements<br>to be in the range of \$10 million." |
| Does this project include a capital expenditure?  | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$2,200,000.00   |
| Type of capital expenditures, based on the following enumerated uses  | Installation and improvement of ventilation systems  |
| Capital Expenditure Justification   | Upgrade HVAC systems in public buildings   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced | Provide improved HVAC in public building   |
| Brief description of recipient's approach to ensuring that  |  |

| Project Identification Number  | 18807   |
|--|---|
| Project Expenditure Category   | 1-Public Health   |
| Project Expenditure Subcategory  | 1.14-Other Public Health Services   |
| Status To Completion   | Completed less than 50%   |
| Adopted Budget   | \$3,477,937.38  |
| Total Cumulative Obligations   | \$3,027,438.00  |
| Total Cumulative Expenditures  | \$194,252.69  |
| Current Period Obligations   | \$0.00  |
| Current Period Expenditures  | \$0.00  |
| Project Description  | "Funding for two Office of Management and Budget<br>projects for Heating, Ventilation, and Air Conditioning<br>(HVAC) upgrades and/or replacements in the Carvel State<br>Building and the Jesse Cooper Building, both State facilities.<br>OMB anticipates the cost of the two HVAC improvements<br>to be in the range of \$10 million." |
| Does this project include a capital expenditure?   | Yes   |
| What is the Total expected capital expenditure, including pre-development costs, if applicable | \$0.00  |
| Type of capital expenditures, based on the following   | Installation and improvement of ventilation systems   |

#### Project Name: OMB HVAC Upgrades Jesse Cooper Building

| enumerated uses   | Installation and improvement of ventilation systems |
|---|---|
| Capital Expenditure Justification   | Upgrade HVAC systems in public buildings            |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public                                |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Provide improved HVAC in public building            |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Needed for improvement of general public            |

## **Project Name: DOC Ventilation Chillers Northern Region**

| Project Identification Number   | 18808                             |
|---------------------------------|-----------------------------------|
| Project Expenditure Category    | 1-Public Health                   |
| Project Expenditure Subcategory | 1.14-Other Public Health Services |
| Status To Completion            | Completed 50% or more             |
| Adopted Budget                  | \$1,108,000.00                    |
| Total Cumulative Obligations    | \$1,108,000.00                    |
| Total Cumulative Expenditures   | \$782,257.58                      |
| Current Period Obligations      | \$0.00                            |
| Current Period Expenditures     | \$685,121.28                      |

| Project Description   | Replacement of ventilation chillers at all DOC facilities to<br>support COVID-19 mitigation efforts and to support public<br>health in key settings such as correctional facilities. |
|---|--|
| Does this project include a capital expenditure?  | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$114,278.00   |
| Type of capital expenditures, based on the following enumerated uses  | Installation and improvement of ventilation systems  |
| Capital Expenditure Justification   | Improve ventillation for inmate population   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Provide improved ventillation to DOC Inmate Population   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Needed for improvement of general public   |

## **Project Name: DOC Ventilation Chillers Central Region**

| Project Identification Number   | 18809  |
|---|--|
| Project Expenditure Category  | 1-Public Health  |
| Project Expenditure Subcategory   | 1.14-Other Public Health Services  |
| Status To Completion  | Completed less than 50%  |
| Adopted Budget  | \$1,384,000.00   |
| Total Cumulative Obligations  | \$1,327,044.00   |
| Total Cumulative Expenditures   | \$126,863.45   |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | Replacement of ventilation chillers at all DOC facilities to<br>support COVID-19 mitigation efforts and to support public<br>health in key settings such as correctional facilities. |
| Does this project include a capital expenditure?  | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$21,411.60  |
| Type of capital expenditures, based on the following enumerated uses  | Installation and improvement of ventilation systems  |
| Capital Expenditure Justification   | Improve ventillation for inmate population   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Provide improved ventillation to DOC Inmate Population   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Needed for improvement of general public   |

## **Project Name: DOC Ventilation Chillers Southern Region**

| Project Identification Number   | 18810  |
|---|--|
| Project Expenditure Category  | 1-Public Health  |
| Project Expenditure Subcategory   | 1.14-Other Public Health Services  |
| Status To Completion  | Completed less than 50%  |
| Adopted Budget  | \$1,108,000.00   |
| Total Cumulative Obligations  | \$1,108,000.00   |
| Total Cumulative Expenditures   | \$529,903.00   |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$345,325.00   |
| Project Description   | Replacement of ventilation chillers at all DOC facilities to<br>support COVID-19 mitigation efforts and to support public<br>health in key settings such as correctional facilities. |
| Does this project include a capital expenditure?  | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$11,427.80  |
| Type of capital expenditures, based on the following enumerated uses  | Installation and improvement of ventilation systems  |
| Capital Expenditure Justification   | Improve ventillation for inmate population   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Provide improved ventillation to DOC Inmate Population   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Needed for improvement of general public   |

# Project Name: DTCC Child Care Center

| 18656   |
|---|
| 2-Negative Economic Impacts                     |
| 2.11-Healthy Childhood Environments: Child Care |
| Completed less than 50%                         |
| \$6,500,000.00                                  |
| \$6,230,935.13                                  |
| \$787,563.41                                    |
| \$51,324.02                                     |
| \$204,263.27                                    |
| Stanton Campus Child Development Center         |
| Yes   |
| \$6,500,000.00                                  |
|   |

| Type of capital expenditures, based on the following enumerated uses  | Childcare, daycare and early learning facilities  |
|---|---|
| Capital Expenditure Justification   | "Construct a 10,500 square foot Child Development Center,<br>which will include classroom spaces, offices for faculty and<br>staff, a kitchen area, restrooms for adults and children,<br>storage space, outside play areas, and a parking and drop-off<br>area.Child Development Center will provide students in<br>Delaware Tech's Early Childhood Education programs with<br>immersive work-based learning experiences as a learning<br>lab. The central location of the Stanton Campus, located near<br>several of the State's major employers such as Christiana<br>Care Health System, JPMC, and Delmarva, will enable the<br>College to offer quality childcare options to working parents<br>in New Castle County." |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00  |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | construct child development center to provide services to the public  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | "This project aligns with state and federal goals to increase<br>childcare opportunities for low-income families, including<br>doubling state support for the Early Childhood Assistance<br>Program (ECAP) by 2024. "   |

# Project Name: DTCC CNAs

| Project Identification Number   | 18658  |
|---|--|
| Project Expenditure Category  | 1-Public Health  |
| Project Expenditure Subcategory   | 1.10-COVID-19 Aid to Impacted Industries                         |
| Status To Completion  | Completed  |
| Adopted Budget  | \$241,335.00   |
| Total Cumulative Obligations  | \$241,335.00   |
| Total Cumulative Expenditures   | \$241,335.00   |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | Collegewide Rapid Certified Nurse Assistant (CNA)<br>Training    |
| Does this project include a capital expenditure?  | No   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced | provide training to national guard to assist with nurse shortage |
|   | Staffing shortages are plaguing all healthcare providers. One    |

#### **Project Name: DTCC Allied Health Center**

| Project Identification Number  | 18659   |
|--|---|
| Project Expenditure Category   | 1-Public Health   |
| Project Expenditure Subcategory  | 1.14-Other Public Health Services   |
| Status To Completion   | Completed less than 50%   |
| Adopted Budget   | \$19,600,000.00   |
| Total Cumulative Obligations   | \$16,424,630.82   |
| Total Cumulative Expenditures  | \$4,575,830.04  |
| Current Period Obligations   | \$1,054,491.94  |
| Current Period Expenditures  | \$1,715,841.90  |
| Project Description  | George (Wilmington) Campus Allied Health Center of<br>Excellence  |
| Does this project include a capital expenditure?   | Yes   |
| What is the Total expected capital expenditure, including pre-development costs, if applicable | \$15,000,000.00   |
| Type of capital expenditures, based on the following enumerated uses                           | Medical equipment and facilities  |
|  | <ul> <li>"Providing expanded, affordable opportunities within the City of Wilmington for continuing education for public health and safety staff to improve the execution of public health programs, many of those who will utilize the Center also assist in COVID-19 mitigation and prevention efforts by treating the symptoms and effects of those afflicted with COVID. This includes Allied Health employees in cardiovascular sonography, health information management medical assistants, occupational therapy assistants, physical therapy assistants, and respiratory care.</li> <li>To create the Allied Health Center of Excellence, funding will be used to create flexible space in the conference center of the existing Southeast Building of the George Campus, including the purchase of instructional equipment and enhancing instructional technology within the conference center. According to the State of Delaware's Department of Labor, Office of Occupational and Labor Market Information, demand for Emergency Medical Technicians is forecasted to grow by over 10 percent statewide between 2018 and 2028. Coupled with growth and employee turnover, this forecast includes an annual need to recruit over 100 Emergency Medical Technicians and Paramedics through 2028. Approximately 50 percent of this workforce need is specific to New Castle County.</li> </ul> |

|   | In summary, the goal of expanding access to the Paramedic<br>Instructional Program and the Surgical Technology Program<br>is to meet forecasted workforce demand, as provided by the<br>State's Department of Labor, which should also assist with<br>COVID-19 mitigation and prevention response needs<br>inclusive of response needs within the City of Wilmington.<br>This includes having a future workforce to transport and<br>treat (paramedics) residents affected by COVID-19 to health<br>care providers (including hospitals) and having the<br>workforce for the health care providers for treatment and<br>prevention. Providing expanded, affordable opportunities<br>within the City of Wilmington for continuing education for<br>public health and safety staff to improve the execution of<br>public health programs, many of those who will utilize the<br>Center also assist in COVID-19 mitigation and prevention<br>efforts by treating the symptoms and effects of those<br>afflicted with COVID. This includes Allied Health<br>employees in cardiovascular sonography, health information<br>management, medical assistants, occupational therapy<br>assistants, physical therapy assistants, and respiratory care.<br>To create the Allied Health Center of Excellence, funding<br>will be used to create flexible space in the conference center<br>of the existing Southeast Building of the George Campus,<br>including the purchase of instructional equipment and<br>enhancing instructional technology within the conference<br>center." |
|---|--|
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | construct allied health center to conduct learning and research opportunities.   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | "The goal of this multi-faceted project is to assist in<br>rebuilding a stronger, more equitable economy in<br>communities hit hard by COVID and to meet COVID-19<br>mitigation and prevention response needs by educating and<br>providing continued training not just for incumbent but also<br>new health care workers needed to meet community needs<br>resulting from the pandemic."  |
| Does the project prioritize local hires?  | Yes  |
| Does the project have a Community Benefit Agreement, with a description of any such agreement?  | No   |

## Project Name: DTCC HVAC Upgrades

| Project Identification Number   | 18660                             |
|---------------------------------|-----------------------------------|
| Project Expenditure Category    | 1-Public Health                   |
| Project Expenditure Subcategory | 1.14-Other Public Health Services |
| Status To Completion            | Completed less than 50%           |
| Adopted Budget                  | \$5,400,000.00                    |
| Total Cumulative Obligations    | \$5,299,081.34                    |
| Total Cumulative Expenditures   | \$2,294,889.62                    |
| Current Period Obligations      | \$6,079.12                        |
| Current Period Expenditures     | \$1,395,972.40                    |

| Project Description   | Collegewide HVAC and Ventilation Improvements (Owens & Terry Campuses)   |
|---|--|
| Does this project include a capital expenditure?  | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$10,000,000.00  |
| Type of capital expenditures, based on the following enumerated uses  | Installation and improvement of ventilation systems  |
| Capital Expenditure Justification   | "to improve the heating, ventilation and air conditioning<br>systems to provide higher airflow rates with greater filtration<br>to improve air quality at the George (Wilmington) and Terry<br>(Dover) campuses. These projects reflect capital investments<br>in public facilities, in largely underserved areas, to meet<br>pandemic operational needs.<br>Investments in the George Campus, Southeast Building, are<br>projected to cost \$2,040,000 and will upgrade the majority<br>of HVAC system components that are 22 years old. Most<br>spaces within the building are heated and cooled using a<br>total of 117 heat pumps. Outside, fresh air is provided by 15<br>air intakes with preheat coils. Cooling evaporation for the<br>building is provided by 2 closed circuit cooling towers that<br>are beyond their projected lifetime and require replacement.<br>The Building Automation System (BAS) requires<br>replacement due to age and would increase air quality and<br>energy efficiency if upgraded.<br>Investments in the Terry Campus Education and Technology<br>Building (ETB) are projected to cost \$7,380,000. The<br>HVAC rooftop and air handling units that heat and cool the<br>ETB are 23 years old and have reached or exceeded their<br>useful life. A total of 26 rooftop package and air handling<br>HVAC units require replacement. New units can provide<br>high airflow rates with greater filtration to improve air<br>quality. The Building Automation System (BAS) requires<br>replacement due to age and would increase air quality and<br>energy efficiency if upgraded. |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | upgrade facilities to meet public health standards.  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | "Meeting pandemic response needs, these projects improve<br>the heating, ventilation and air conditioning systems to<br>provide higher airflow rates with greater filtration to<br>improve air quality at the George (Wilmington) and Terry<br>(Dover) campuses. These projects reflect capital investments<br>in public facilities, in largely underserved areas, to meet<br>pandemic operational needs."   |
| Does the project prioritize local hires?  | Yes  |
| Does the project have a Community Benefit Agreement,<br>with a description of any such agreement?   | No   |

# Project Name: DTCC Culinary Program

| Project Identification Number | 18657                       |
|-------------------------------|-----------------------------|
| Project Expenditure Category  | 2-Negative Economic Impacts |
|                               |                             |

| Project Expenditure Subcategory  | 2.36-Aid to Other Impacted Industries   |
|--|---|
| Status To Completion   | Completed less than 50%   |
| Adopted Budget   | \$1,500,000.00  |
| Total Cumulative Obligations   | \$1,498,692.85  |
| Total Cumulative Expenditures  | \$729,298.40  |
| Current Period Obligations   | \$684,488.21  |
| Current Period Expenditures  | \$41,917.55   |
| Project Description  | "The renovations to the Culinary Arts facility will expand its<br>square footage from 3,180 square ft to 8,800 square feet.<br>This expansion will enable the program to increase its<br>graduates in the Culinary Arts associate degree and diploma<br>program by 80% (from 125 to 225 students) as well as offer<br>new short-term certificate programs to 142 additional<br>students annually."  |
| Does this project include a capital expenditure?   | Yes   |
| What is the Total expected capital expenditure, including pre-development costs, if applicable   | \$1,500,000.00  |
| Type of capital expenditures, based on the following enumerated uses   | Schools and other educational facilities  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions   | \$1,500,000.00  |
| Is a program evaluation of the project being conducted?  | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?  | 1 Imp General Public  |
| Is a program evaluation of the project being conducted?  | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced  | Improvements to existing facilities with Job and workforce training centers   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19  | "The renovation and expansion of the Stanton Culinary Arts<br>program will serve the growing needs of the food service<br>industry by increasing enrollment in the Culinary Arts<br>associate degree and baking/pastry diploma programs from<br>125 to 225, or approximately 80%. Additional seats will also<br>help to accommodate recent graduates of Delaware's<br>Pathways to Prosperity ProStart high school culinary<br>programs. " |
| If aid is provided to industries other than travel, tourism, and<br>hospitality, please describe if the industry experienced at<br>least 8 percent employment loss from pre-pandemic levels,<br>or the industry is experiencing comparable or worse<br>economic impacts as the national tourism, travel, and<br>hospitality industries as of the date of the Final Rule, and<br>rationale for providing aide to the industry | culinary industry has been severely impacted by COVID-19<br>and this program will allow more future culinary art students<br>to fulfill the workforce shortage.   |

## Project Name: DNREC Shoreline Protection

| Project Identification Number | 18679                 |
|-------------------------------|-----------------------|
| Project Expenditure Category  | 6-Revenue Replacement |
|                               |                       |

| Project Expenditure Subcategory | 6.1-Provision of Government Services   |
|---------------------------------|--|
| Status To Completion            | Completed  |
| Adopted Budget                  | \$1,300,000.00   |
| Total Cumulative Obligations    | \$1,300,000.00   |
| Total Cumulative Expenditures   | \$1,300,000.00   |
| Current Period Obligations      | \$34,909.45  |
| Current Period Expenditures     | \$34,909.45  |
| Project Description             | Provide the government service of performing a number of<br>shoreline management projects to add sand to the beaches<br>and dunes in Pickering Beach, Kitts Hummock, Bowers,<br>Slaughter Beach, and Delaware Seashore State Park – North<br>Inlet Day Area. These shoreline management projects are<br>intended to provide coastal storm damage reduction benefits<br>to private property and public assets at each of these<br>locations, in addition to providing ecological and<br>recreational value. |

## Project Name: DSU Early Childhood Innovation

| Project Identification Number  | 18395   |
|--|---|
| Project Expenditure Category   | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory  | 2.11-Healthy Childhood Environments: Child Care   |
| Status To Completion   | Completed less than 50%   |
| Adopted Budget   | \$10,600,000.00   |
| Total Cumulative Obligations   | \$3,243,043.00  |
| Total Cumulative Expenditures  | \$469,937.00  |
| Current Period Obligations   | \$2,666,643.00  |
| Current Period Expenditures  | \$253,537.00  |
| Project Description  | <ul> <li>establish an Early Childhood Innovation Center. The reques will also</li> <li>fund a statewide scholarship and support model for Early</li> <li>Childhood (EC) Educator</li> <li>Support professionals to include an application process,</li> <li>cohort design model, career</li> <li>advisement model, and a mechanism to partner with all</li> <li>Delaware institutions of higher</li> <li>education for scholarship distribution.</li> </ul> |
| Does this project include a capital expenditure?   | Yes   |
| What is the Total expected capital expenditure, including pre-development costs, if applicable                               | \$10,600,000.00   |
| Type of capital expenditures, based on the following enumerated uses   | Childcare, daycare and early learning facilities  |
| Capital Expenditure Justification  | n/a   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions | \$0.00  |
| Is a program evaluation of the project being conducted?  | Yes   |

| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
|---|--|
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Healthy Childhood Environments: Child Care - The<br>pandemic has deepened child-care shortages. Many of<br>Delaware's child-care centers are experiencing staffing<br>issues and half say they have had to turn away families<br>because of staffing shortages and underinvestment. The<br>establishment of the Early Childhood Innovation Center will<br>aid in strengthening the early childhood workforce. More<br>details to follow as project develops. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | The COVID-19 pandemic has deepened child-care<br>shortages. Many of Delaware's child-care centers are<br>experiencing staffing issues and half say they have had to<br>turn away families because of staffing shortages and<br>underinvestment. The establishment of the ECIC will aid in<br>strengthening the early childhood workforce.  |
| Does the project prioritize local hires?  | Yes  |
| Does the project have a Community Benefit Agreement, with a description of any such agreement?  | Yes  |

# Project Name: DSU Clinical Lab

| Project Identification Number  | 18782  |
|--|--|
| Project Expenditure Category   | 1-Public Health  |
| Project Expenditure Subcategory  | 1.14-Other Public Health Services  |
| Status To Completion   | Not Started  |
| Adopted Budget   | \$7,000,000.00   |
| Total Cumulative Obligations   | \$0.00   |
| Total Cumulative Expenditures  | \$0.00   |
| Current Period Obligations   | \$0.00   |
| Current Period Expenditures  | \$0.00   |
| Project Description  | a comprehensive clinical facility to combat health disparities<br>which will be housed in the DSU Center for Health<br>Disparities' Molecular Diagnostics Laboratory. The lab has<br>been instrumental in providing COVID-19 diagnostic testing<br>and limited variant tracing to residents of Delaware and<br>Pennsylvania. It seeks to expand its work to address the level<br>of health disparity observed amongst underserved<br>communities by providing access to health services,<br>Covid-19 vaccinations, education, and improved variant<br>tracing. |
| Does this project include a capital expenditure?   | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable | \$7,000,000.00   |
| Type of capital expenditures, based on the following enumerated uses                           | COVID-19 testing sites and laboratories, and acquisition of related equipment  |

## Project Name: DSU HVAC Upgrades

Γ

| Project Identification Number   | 18781   |
|---|---|
| Project Expenditure Category  | 1-Public Health   |
| Project Expenditure Subcategory   | 1.14-Other Public Health Services   |
| Status To Completion  | Completed 50% or more   |
| Adopted Budget  | \$8,000,000.00  |
| Total Cumulative Obligations  | \$5,402,635.02  |
| Total Cumulative Expenditures   | \$3,908,977.67  |
| Current Period Obligations  | \$764,410.82  |
| Current Period Expenditures   | \$553,265.61  |
| Project Description   | Heating, Ventilation, and Air-Conditioning (HVAC)<br>Upgrades/Replacements for DSU.     |
| Does this project include a capital expenditure?  | Yes   |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$8,000,000.00  |
| Type of capital expenditures, based on the following enumerated uses  | Installation and improvement of ventilation systems                                     |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Upgrading and replacing heating, ventilation, and air conditioning on all DSU Campuses. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | HVAC upgrades will provide better air quality to alleviate the effect of COVID-19.      |

## Project Name: DSU Technology Upgrades

| Project Identification Number                             | 18783   |
|---|---|
| Project Expenditure Category                              | 1-Public Health   |
| Project Expenditure Subcategory                           | 1.4-Prevention in Congregate Settings (Nursing Homes,<br>Prisons/Jails, Dense Work Sites, Schools, Child care<br>facilities, etc.)  |
| Status To Completion                                      | Completed 50% or more   |
| Adopted Budget  | \$7,400,000.00  |
| Total Cumulative Obligations                              | \$7,287,484.93  |
| Total Cumulative Expenditures                             | \$5,217,517.39  |
| Current Period Obligations                                | \$0.00  |
| Current Period Expenditures                               | \$2,578,193.61  |
| Project Description                                       | Upgrade the technology in DSU's SMART learning spaces<br>by equipping each space with the following equipment:<br>TV/smartboard, projector, cameras, sound system, a<br>mirroring device, and a windows/MAC computer to enhance<br>the SMART learning capability. |
| Does this project include a capital expenditure?          | Yes   |
| What is the Total expected capital expenditure, including |   |

| pre-development costs, if applicable  | \$7,400,000.00  |
|---|---|
| Type of capital expenditures, based on the following enumerated uses  | Technology and tools  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$264,353.00  |
| Is a program evaluation of the project being conducted?   | No  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Is a program evaluation of the project being conducted?   | No  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | ARPA fubding to upgrade the technology in DSU's SMART<br>learning spaces by equipping each space with equipment to<br>enhance SMART learning capability. Most of the learning<br>spaces will require some shysical refitting to accommodate<br>the new equipment. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Enhance technology to provide more remote learning and other opportunities to better suit student needs.  |

## Project Name: DVCC Family Justice Center

| Project Identification Number   | 18720   |
|---|---|
| Project Expenditure Category  | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory   | 2.22-Strong Healthy Communities: Neighborhood Features<br>that Promote Health and Safety  |
| Status To Completion  | Completed 50% or more   |
| Adopted Budget  | \$183,858.00  |
| Total Cumulative Obligations  | \$121,540.00  |
| Total Cumulative Expenditures   | \$121,540.00  |
| Current Period Obligations  | \$8,869.67  |
| Current Period Expenditures   | \$8,869.67  |
| Project Description   | Strategic Planning for a Family Justice Center.   |
| Does this project include a capital expenditure?  | No  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 2 Imp Low or moderate income HHs or populations   |
| Secondary Impacted and/or Disproportionately Impacted populations   | 20 Dis Imp Other HHs or populations that experienced a disproportionate   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced | The Domestic Violence Coordinating Council established<br>the Family Justice Center Steering Committee (FJCSC)<br>comprised of state, local, and community leaders. The<br>FJCSC meets monthly to discuss the feasibility of<br>establishing a FJC in Delaware. The conversations include<br>the response and services needed for victims and survivors<br>of interpersonal violence. |
| Brief description of recipient's approach to ensuring that  | Among the many distressing ramifications of the COVID-19<br>pandemic has been a heightened risk for family violence,<br>including intimate partner violence and child abuse. Victims<br>nationwide were impacted by stay-at-home orders, which  |

| response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | increased the likelihood of subsequent violence in the home<br>and prevented opportunities for victims to leave.<br>Furthermore, with individuals being forced to stay home,<br>schools being closed, and many no longer having a job to<br>report to or a physical office, the opportunit |
|---|--|
|---|--|

## Project Name: DOJ Backlog Assistance

| Project Identification Number   | 18648   |
|---|---|
| Project Expenditure Category  | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity   |
| Project Expenditure Subcategory   | 3.5-Public Sector Capacity: Administrative Needs  |
| Status To Completion  | Completed 50% or more   |
| Adopted Budget  | \$50,000.00   |
| Total Cumulative Obligations  | \$33,328.74   |
| Total Cumulative Expenditures   | \$33,328.74   |
| Current Period Obligations  | \$4,141.17  |
| Current Period Expenditures   | \$4,141.17  |
| Project Description   | Staff-related expenses associated with the clearing of the DDOJ's felony intake backlog.  |
| Does this project include a capital expenditure?  | No  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | DDOJ attorneys and paralegals will work overtime during<br>evening hours and submit the time and effort sheets<br>indicating how many hours were dedicated to the project, to<br>clear the backlog. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | The backlog was created due to enability of the DDOJ to work in full capacity during the pandemic.  |

### Project Name: Lake Forest SD COVID Leave Extension

| Project Identification Number                               | 18681   |
|---|---|
| Project Expenditure Category                                | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity   |
| Project Expenditure Subcategory                             | 3.5-Public Sector Capacity: Administrative Needs  |
| Status To Completion  | Completed   |
| Adopted Budget  | \$5,281.24  |
| Total Cumulative Obligations                                | \$5,281.24  |
| Total Cumulative Expenditures                               | \$5,281.24  |
| Current Period Obligations                                  | \$0.00  |
| Current Period Expenditures                                 | \$0.00  |
| Project Description   | Provide reimbursement for expenses incurred by district and<br>charter schools due to employees out sick with covid.<br>Includes cost of substitutes teachers and overtime. |
| Does this project include a capital expenditure?            | No  |
| Brief description of structure and objectives of assistance | "District and Charter schools report expenditures to Office<br>of Management and Budget. Upon review and approval,  |

| program(s), including public health or negative economic impact experienced   | reimbursement funds are transferred to respective project budget."   |
|---|--|
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | "Reimbursements are reviewed to adhere to State guidance<br>ensuring that employee leave was used to quarintine, due to<br>Covid, care for a family member, or receive vaccination.<br>Districts and charters are required to maintain all<br>documentation supporting leave usage." |
| Number of government FTEs responding to COVID-19 supported under this authority   | 0  |

## Project Name: Cape Henlopen SD COVID Leave Extension

| Project Identification Number   | 18682  |
|---|--|
| Project Expenditure Category  | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity  |
| Project Expenditure Subcategory   | 3.5-Public Sector Capacity: Administrative Needs   |
| Status To Completion  | Completed  |
| Adopted Budget  | \$24,566.53  |
| Total Cumulative Obligations  | \$24,566.53  |
| Total Cumulative Expenditures   | \$24,566.53  |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | Provide reimbursement for expenses incurred by district and<br>charter schools due to employees out sick with covid.<br>Includes cost of substitutes teachers and overtime.  |
| Does this project include a capital expenditure?  | No   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | "District and Charter schools report expenditures to Office<br>of Management and Budget. Upon review and approval,<br>reimbursement funds are transferred to respective project<br>budget."  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | "Reimbursements are reviewed to adhere to State guidance<br>ensuring that employee leave was used to quarintine, due to<br>Covid, care for a family member, or receive vaccination.<br>Districts and charters are required to maintain all<br>documentation supporting leave usage." |
| Number of government FTEs responding to COVID-19 supported under this authority   | 0  |

### Project Name: Seaford SD COVID Leave Extension

| Project Identification Number   | 18683   |
|---------------------------------|---|
| Project Expenditure Category    | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity |
| Project Expenditure Subcategory | 3.5-Public Sector Capacity: Administrative Needs                    |
| Status To Completion            | Completed   |
| Adopted Budget                  | \$25,030.18   |
| Total Cumulative Obligations    | \$25,030.18   |
| Total Cumulative Expenditures   | \$25,030.18   |

| Current Period Obligations  | \$0.00   |
|---|--|
| Current Period Expenditures   | \$0.00   |
| Project Description   | Provide reimbursement for expenses incurred by district and<br>charter schools due to employees out sick with covid.<br>Includes cost of substitutes teachers and overtime.  |
| Does this project include a capital expenditure?  | No   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | "District and Charter schools report expenditures to Office<br>of Management and Budget. Upon review and approval,<br>reimbursement funds are transferred to respective project<br>budget."  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | "Reimbursements are reviewed to adhere to State guidance<br>ensuring that employee leave was used to quarintine, due to<br>Covid, care for a family member, or receive vaccination.<br>Districts and charters are required to maintain all<br>documentation supporting leave usage." |
| Number of government FTEs responding to COVID-19 supported under this authority   | 0  |

#### **Project Name: Colonial SD COVID Leave Extension**

| Project Identification Number   | 18684  |
|---|--|
| Project Expenditure Category  | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity  |
| Project Expenditure Subcategory   | 3.5-Public Sector Capacity: Administrative Needs   |
| Status To Completion  | Completed  |
| Adopted Budget  | \$62,734.93  |
| Total Cumulative Obligations  | \$62,734.93  |
| Total Cumulative Expenditures   | \$62,734.93  |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | Provide reimbursement for expenses incurred by district and<br>charter schools due to employees out sick with covid.<br>Includes cost of substitutes teachers and overtime.  |
| Does this project include a capital expenditure?  | No   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | "District and Charter schools report expenditures to Office<br>of Management and Budget. Upon review and approval,<br>reimbursement funds are transferred to respective project<br>budget."  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | "Reimbursements are reviewed to adhere to State guidance<br>ensuring that employee leave was used to quarintine, due to<br>Covid, care for a family member, or receive vaccination.<br>Districts and charters are required to maintain all<br>documentation supporting leave usage." |
| Number of government FTEs responding to COVID-19 supported under this authority   | 0  |

### Project Name: Woodbridge SD COVID Leave Extension

| Project Expenditure Category  | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity  |
|---|--|
| Project Expenditure Subcategory   | 3.5-Public Sector Capacity: Administrative Needs   |
| Status To Completion  | Completed  |
| Adopted Budget  | \$13,702.78  |
| Total Cumulative Obligations  | \$13,702.78  |
| Total Cumulative Expenditures   | \$13,702.78  |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | Provide reimbursement for expenses incurred by district and<br>charter schools due to employees out sick with covid.<br>Includes cost of substitutes teachers and overtime.  |
| Does this project include a capital expenditure?  | No   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | "District and Charter schools report expenditures to Office<br>of Management and Budget. Upon review and approval,<br>reimbursement funds are transferred to respective project<br>budget."  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | "Reimbursements are reviewed to adhere to State guidance<br>ensuring that employee leave was used to quarintine, due to<br>Covid, care for a family member, or receive vaccination.<br>Districts and charters are required to maintain all<br>documentation supporting leave usage." |
| Number of government FTEs responding to COVID-19 supported under this authority   | 0  |

# Project Name: Delmar SD COVID Leave Extension

| Project Identification Number   | 18686   |
|---|---|
| Project Expenditure Category  | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity   |
| Project Expenditure Subcategory   | 3.5-Public Sector Capacity: Administrative Needs  |
| Status To Completion  | Completed   |
| Adopted Budget  | \$10,995.61   |
| Total Cumulative Obligations  | \$10,995.61   |
| Total Cumulative Expenditures   | \$10,995.61   |
| Current Period Obligations  | \$0.00  |
| Current Period Expenditures   | \$0.00  |
| Project Description   | Provide reimbursement for expenses incurred by district and<br>charter schools due to employees out sick with covid.<br>Includes cost of substitutes teachers and overtime.                 |
| Does this project include a capital expenditure?  | No  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced | "District and Charter schools report expenditures to Office<br>of Management and Budget. Upon review and approval,<br>reimbursement funds are transferred to respective project<br>budget." |
|   | "Reimbursements are reviewed to adhere to State guidance  |

| response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | ensuring that employee leave was used to quarintine, due to<br>Covid, care for a family member, or receive vaccination.<br>Districts and charters are required to maintain all<br>documentation supporting leave usage." |
|---|--|
| Number of government FTEs responding to COVID-19 supported under this authority                       | 0  |

## Project Name: Polytech COVID Leave Extension

| Project Identification Number   | 18687  |
|---|--|
| Project Expenditure Category  | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity  |
| Project Expenditure Subcategory   | 3.5-Public Sector Capacity: Administrative Needs   |
| Status To Completion  | Completed  |
| Adopted Budget  | \$7,157.84   |
| Total Cumulative Obligations  | \$7,157.84   |
| Total Cumulative Expenditures   | \$7,157.84   |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | Provide reimbursement for expenses incurred by district and<br>charter schools due to employees out sick with covid.<br>Includes cost of substitutes teachers and overtime.  |
| Does this project include a capital expenditure?  | No   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | "District and Charter schools report expenditures to Office<br>of Management and Budget. Upon review and approval,<br>reimbursement funds are transferred to respective project<br>budget."  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | "Reimbursements are reviewed to adhere to State guidance<br>ensuring that employee leave was used to quarintine, due to<br>Covid, care for a family member, or receive vaccination.<br>Districts and charters are required to maintain all<br>documentation supporting leave usage." |
| Number of government FTEs responding to COVID-19 supported under this authority   | 0  |

### Project Name: Sussex Tech COVID Leave Extension

| Project Identification Number   | 18688   |
|---------------------------------|---|
| Project Expenditure Category    | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity |
| Project Expenditure Subcategory | 3.5-Public Sector Capacity: Administrative Needs                    |
| Status To Completion            | Completed   |
| Adopted Budget                  | \$7,077.67  |
| Total Cumulative Obligations    | \$7,077.67  |
| Total Cumulative Expenditures   | \$7,077.67  |
| Current Period Obligations      | \$0.00  |
| Current Period Expenditures     | \$0.00  |

| Project Description   | Provide reimbursement for expenses incurred by district and<br>charter schools due to employees out sick with covid.<br>Includes cost of substitutes teachers and overtime.  |
|---|--|
| Does this project include a capital expenditure?  | No   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | "District and Charter schools report expenditures to Office<br>of Management and Budget. Upon review and approval,<br>reimbursement funds are transferred to respective project<br>budget."  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | "Reimbursements are reviewed to adhere to State guidance<br>ensuring that employee leave was used to quarintine, due to<br>Covid, care for a family member, or receive vaccination.<br>Districts and charters are required to maintain all<br>documentation supporting leave usage." |
| Number of government FTEs responding to COVID-19 supported under this authority   | 0  |

### **Project Name: Charter School of Wilmington COVID Leave Extension**

| Project Identification Number   | 18689  |
|---|--|
| Project Expenditure Category  | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity  |
| Project Expenditure Subcategory   | 3.5-Public Sector Capacity: Administrative Needs   |
| Status To Completion  | Completed  |
| Adopted Budget  | \$12,485.40  |
| Total Cumulative Obligations  | \$12,485.40  |
| Total Cumulative Expenditures   | \$12,485.40  |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | Provide reimbursement for expenses incurred by district and<br>charter schools due to employees out sick with covid.<br>Includes cost of substitutes teachers and overtime.  |
| Does this project include a capital expenditure?  | No   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | "District and Charter schools report expenditures to Office<br>of Management and Budget. Upon review and approval,<br>reimbursement funds are transferred to respective project<br>budget."  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | "Reimbursements are reviewed to adhere to State guidance<br>ensuring that employee leave was used to quarintine, due to<br>Covid, care for a family member, or receive vaccination.<br>Districts and charters are required to maintain all<br>documentation supporting leave usage." |
| Number of government FTEs responding to COVID-19 supported under this authority   | 0  |

### Project Name: Eastside Charter School COVID Leave Extension

| Project Identification Number | 18690   |
|-------------------------------|---|
| Project Expenditure Category  | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity |
|                               |   |

| Project Expenditure Subcategory   | 3.5-Public Sector Capacity: Administrative Needs   |
|---|--|
| Status To Completion  | Completed  |
| Adopted Budget  | \$13,027.68  |
| Total Cumulative Obligations  | \$13,027.68  |
| Total Cumulative Expenditures   | \$13,027.68  |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | Provide reimbursement for expenses incurred by district and<br>charter schools due to employees out sick with covid.<br>Includes cost of substitutes teachers and overtime.  |
| Does this project include a capital expenditure?  | No   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | "District and Charter schools report expenditures to Office<br>of Management and Budget. Upon review and approval,<br>reimbursement funds are transferred to respective project<br>budget."  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | "Reimbursements are reviewed to adhere to State guidance<br>ensuring that employee leave was used to quarintine, due to<br>Covid, care for a family member, or receive vaccination.<br>Districts and charters are required to maintain all<br>documentation supporting leave usage." |
| Number of government FTEs responding to COVID-19 supported under this authority   | 0  |

# Project Name: Kuumba Academy COVID Leave Extension

| Project Identification Number   | 18691   |
|---|---|
| Project Expenditure Category  | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity   |
| Project Expenditure Subcategory   | 3.5-Public Sector Capacity: Administrative Needs  |
| Status To Completion  | Completed   |
| Adopted Budget  | \$0.00  |
| Total Cumulative Obligations  | \$0.00  |
| Total Cumulative Expenditures   | \$0.00  |
| Current Period Obligations  | \$0.00  |
| Current Period Expenditures   | \$0.00  |
| Project Description   | Provide reimbursement for expenses incurred by district and<br>charter schools due to employees out sick with covid.<br>Includes cost of substitutes teachers and overtime.                 |
| Does this project include a capital expenditure?  | No  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced | "District and Charter schools report expenditures to Office<br>of Management and Budget. Upon review and approval,<br>reimbursement funds are transferred to respective project<br>budget." |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or                   | "Reimbursements are reviewed to adhere to State guidance<br>ensuring that employee leave was used to quarintine, due to   |

| negative economic impact of Covid-19  | Covid, care for a family member, or receive vaccination.<br>Districts and charters are required to maintain all<br>documentation supporting leave usage." |
|---|---|
| Number of government FTEs responding to COVID-19 supported under this authority | 0   |

### Project Name: MOT Charter COVID Leave Extension

| Project Identification Number   | 18692  |
|---|--|
| Project Expenditure Category  | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity  |
| Project Expenditure Subcategory   | 3.5-Public Sector Capacity: Administrative Needs   |
| Status To Completion  | Completed  |
| Adopted Budget  | \$17,725.49  |
| Total Cumulative Obligations  | \$17,725.49  |
| Total Cumulative Expenditures   | \$17,725.49  |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | Provide reimbursement for expenses incurred by district and<br>charter schools due to employees out sick with covid.<br>Includes cost of substitutes teachers and overtime.  |
| Does this project include a capital expenditure?  | No   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | "District and Charter schools report expenditures to Office<br>of Management and Budget. Upon review and approval,<br>reimbursement funds are transferred to respective project<br>budget."  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | "Reimbursements are reviewed to adhere to State guidance<br>ensuring that employee leave was used to quarintine, due to<br>Covid, care for a family member, or receive vaccination.<br>Districts and charters are required to maintain all<br>documentation supporting leave usage." |
| Number of government FTEs responding to COVID-19 supported under this authority   | 0  |

### Project Name: Newark Charter COVID Leave Extension

| Project Identification Number   | 18693   |
|---------------------------------|---|
| Project Expenditure Category    | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity |
| Project Expenditure Subcategory | 3.5-Public Sector Capacity: Administrative Needs                    |
| Status To Completion            | Completed   |
| Adopted Budget                  | \$41,355.93   |
| Total Cumulative Obligations    | \$41,355.93   |
| Total Cumulative Expenditures   | \$41,355.93   |
| Current Period Obligations      | \$0.00  |
| Current Period Expenditures     | \$0.00  |
|                                 | Provide reimbursement for expenses incurred by district and         |

| Project Description   | charter schools due to employees out sick with covid.<br>Includes cost of substitutes teachers and overtime.   |
|---|--|
| Does this project include a capital expenditure?  | No   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | "District and Charter schools report expenditures to Office<br>of Management and Budget. Upon review and approval,<br>reimbursement funds are transferred to respective project<br>budget."  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | "Reimbursements are reviewed to adhere to State guidance<br>ensuring that employee leave was used to quarintine, due to<br>Covid, care for a family member, or receive vaccination.<br>Districts and charters are required to maintain all<br>documentation supporting leave usage." |
| Number of government FTEs responding to COVID-19 supported under this authority   | 0  |

## Project Name: Providence Creek COVID Leave Extension

| Project Identification Number   | 18694  |
|---|--|
| Project Expenditure Category  | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity  |
| Project Expenditure Subcategory   | 3.5-Public Sector Capacity: Administrative Needs   |
| Status To Completion  | Completed  |
| Adopted Budget  | \$23,124.33  |
| Total Cumulative Obligations  | \$23,124.33  |
| Total Cumulative Expenditures   | \$23,124.33  |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | Provide reimbursement for expenses incurred by district and<br>charter schools due to employees out sick with covid.<br>Includes cost of substitutes teachers and overtime.  |
| Does this project include a capital expenditure?  | No   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | "District and Charter schools report expenditures to Office<br>of Management and Budget. Upon review and approval,<br>reimbursement funds are transferred to respective project<br>budget."  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | "Reimbursements are reviewed to adhere to State guidance<br>ensuring that employee leave was used to quarintine, due to<br>Covid, care for a family member, or receive vaccination.<br>Districts and charters are required to maintain all<br>documentation supporting leave usage." |
| Number of government FTEs responding to COVID-19 supported under this authority   | 0  |

### Project Name: Smyrna SD COVID Leave Extension

| Project Identification Number | 18827   |
|-------------------------------|---|
| Project Expenditure Category  | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity |
|                               | 3.1-Public Sector Workforce: Payroll and Benefits for Public        |

| Project Expenditure Subcategory   | Health, Public Safety, or Human Services Workers   |
|---|--|
| Status To Completion  | Completed  |
| Adopted Budget  | \$52,787.32  |
| Total Cumulative Obligations  | \$52,787.32  |
| Total Cumulative Expenditures   | \$52,787.32  |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | Provide reimbursement for expenses incurred by district and<br>charter schools due to employees out sick with covid.<br>Includes cost of substitutes teachers and overtime.  |
| Does this project include a capital expenditure?  | No   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | "District and Charter schools report expenditures to Office<br>of Management and Budget. Upon review and approval,<br>reimbursement funds are transferred to respective project<br>budget."  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | "Reimbursements are reviewed to adhere to State guidance<br>ensuring that employee leave was used to quarintine, due to<br>Covid, care for a family member, or receive vaccination.<br>Districts and charters are required to maintain all<br>documentation supporting leave usage." |
| Number of government FTEs responding to COVID-19 supported under this authority   | 0  |

# Project Name: Appoquinimink SD COVID Leave Extension

| Project Identification Number   | 18828   |
|---|---|
| Project Expenditure Category  | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity   |
| Project Expenditure Subcategory   | 3.5-Public Sector Capacity: Administrative Needs  |
| Status To Completion  | Completed   |
| Adopted Budget  | \$2,702.43  |
| Total Cumulative Obligations  | \$2,702.43  |
| Total Cumulative Expenditures   | \$2,702.43  |
| Current Period Obligations  | \$0.00  |
| Current Period Expenditures   | \$0.00  |
| Project Description   | Provide reimbursement for expenses incurred by district and<br>charter schools due to employees out sick with covid.<br>Includes cost of substitutes teachers and overtime.                 |
| Does this project include a capital expenditure?  | No  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced | "District and Charter schools report expenditures to Office<br>of Management and Budget. Upon review and approval,<br>reimbursement funds are transferred to respective project<br>budget." |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or                   | "Reimbursements are reviewed to adhere to State guidance<br>ensuring that employee leave was used to quarintine, due to   |

| negative economic impact of Covid-19  | Covid, care for a family member, or receive vaccination.<br>Districts and charters are required to maintain all<br>documentation supporting leave usage." |
|---|---|
| Number of government FTEs responding to COVID-19 supported under this authority | 0   |

## Project Name: Las Americas ASPIRAS COVID Leave Extension

| Project Identification Number   | 18829  |
|---|--|
| Project Expenditure Category  | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity  |
| Project Expenditure Subcategory   | 3.1-Public Sector Workforce: Payroll and Benefits for Public<br>Health, Public Safety, or Human Services Workers   |
| Status To Completion  | Completed  |
| Adopted Budget  | \$17,754.00  |
| Total Cumulative Obligations  | \$17,754.00  |
| Total Cumulative Expenditures   | \$17,754.00  |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | Provide reimbursement for expenses incurred by district and<br>charter schools due to employees out sick with covid.<br>Includes cost of substitutes teachers and overtime.  |
| Does this project include a capital expenditure?  | No   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | "District and Charter schools report expenditures to Office<br>of Management and Budget. Upon review and approval,<br>reimbursement funds are transferred to respective project<br>budget."  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | "Reimbursements are reviewed to adhere to State guidance<br>ensuring that employee leave was used to quarintine, due to<br>Covid, care for a family member, or receive vaccination.<br>Districts and charters are required to maintain all<br>documentation supporting leave usage." |
| Number of government FTEs responding to COVID-19 supported under this authority   | 0  |

## Project Name: Milford SD COVID Leave

| Project Identification Number   | 18989   |
|---------------------------------|---|
| Project Expenditure Category    | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity |
| Project Expenditure Subcategory | 3.5-Public Sector Capacity: Administrative Needs                    |
| Status To Completion            | Completed   |
| Adopted Budget                  | \$34,553.57   |
| Program Income Earned           | \$0.00  |
| Program Income Expended         | \$0.00  |
| Total Cumulative Obligations    | \$34,553.57   |
| Total Cumulative Expenditures   | \$34,553.57   |

| Current Period Obligations  | \$0.00   |
|---|--|
| Current Period Expenditures   | \$0.00   |
| Project Description   | Provide reimbursement for expenses incurred by district and<br>charter schools due to employees out sick with covid.<br>Includes cost of substitutes teachers and overtime.  |
| Does this project include a capital expenditure?  | No   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | "District and Charter schools report expenditures to Office<br>of Management and Budget. Upon review and approval,<br>reimbursement funds are transferred to respective project<br>budget."  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | "Reimbursements are reviewed to adhere to State guidance<br>ensuring that employee leave was used to quarintine, due to<br>Covid, care for a family member, or receive vaccination.<br>Districts and charters are required to maintain all<br>documentation supporting leave usage." |
| Number of government FTEs responding to COVID-19 supported under this authority   | 0  |

## Project Name: 1st State Montessori COVID Leave

| Project Identification Number   | 18990  |
|---|--|
| Project Expenditure Category  | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity  |
| Project Expenditure Subcategory   | 3.5-Public Sector Capacity: Administrative Needs   |
| Status To Completion  | Completed  |
| Adopted Budget  | \$12,452.84  |
| Total Cumulative Obligations  | \$12,452.84  |
| Total Cumulative Expenditures   | \$12,452.84  |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | Provide reimbursement for expenses incurred by district and<br>charter schools due to employees out sick with covid.<br>Includes cost of substitutes teachers and overtime.  |
| Does this project include a capital expenditure?  | No   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | "District and Charter schools report expenditures to Office<br>of Management and Budget. Upon review and approval,<br>reimbursement funds are transferred to respective project<br>budget."  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | "Reimbursements are reviewed to adhere to State guidance<br>ensuring that employee leave was used to quarintine, due to<br>Covid, care for a family member, or receive vaccination.<br>Districts and charters are required to maintain all<br>documentation supporting leave usage." |
| Number of government FTEs responding to COVID-19 supported under this authority   | 0  |

## Project Name: DTI Digital Government GIS

| Project Identification Number | 18780 |
|-------------------------------|-------|
|-------------------------------|-------|

| Project Expenditure Category  | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity  |
|---|--|
| Project Expenditure Subcategory   | 3.4-Public Sector Capacity: Effective Service Delivery   |
| Status To Completion  | Completed less than 50%  |
| Adopted Budget  | \$1,500,000.00   |
| Total Cumulative Obligations  | \$475,225.88   |
| Total Cumulative Expenditures   | \$329,644.24   |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$30,702.11  |
| Project Description   | " Mapping is a significant need for a Digital Government<br>platform. Current mapping data is old and outdated, lacking<br>a variety of different additions to the state infrastructure.<br>Any aspect of a new platform that geographically tracks<br>data, like COVID-19 spread, for example, requires current<br>mapping. The project includes three components that are<br>Aerial Imagery, Land User/Land Cover & Impervious<br>Surface, and Lidar." |
| Does this project include a capital expenditure?  | No   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Upgrades to digital government mapping platform. This will<br>allow tracking on a geographical basis for a variety of things<br>such as COVID-19 spread.   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Will allow tracking for public health ventures such as COVID-19 tracking.  |

## Project Name: DTI Anchor Rooms Remote Work

| Project Identification Number   | 18813  |
|---------------------------------|--|
| Project Expenditure Category    | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity  |
| Project Expenditure Subcategory | 3.4-Public Sector Capacity: Effective Service Delivery   |
| Status To Completion            | Completed less than 50%  |
| Adopted Budget                  | \$1,500,000.00   |
| Total Cumulative Obligations    | \$1,073,306.14   |
| Total Cumulative Expenditures   | \$1,023,512.14   |
| Current Period Obligations      | \$0.00   |
| Current Period Expenditures     | \$392,005.00   |
| Project Description             | "The Delaware Executive Branch conducts public meetings<br>at various locations across the State. While public meetings<br>are now permitted to be held virtually, SB 94 requires a<br>physical anchor location with at least one member of the<br>public body present. Anchor rooms, coupled with remote<br>access, serve as a valuable COVID-19 mitigation tactic.<br>Their combined use alleviates the need for public officials<br>and members of the public to feel compelled to gather in a<br>single, physical location and risk disease spread. Remote |

|   | access, enabled by anchor rooms, also provides access to<br>meetings for members of the public who might not be able to<br>travel to a physical location or congregate in person." |
|---|--|
| Does this project include a capital expenditure?  | No   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | To upgrade meeting rooms across the State to provide<br>updated technology requirements in order to meet the<br>current demands of the workforce.                                  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Upgraded meeting rooms will allow for virtual meetings to<br>provide alternative options in the event of public health<br>emergencies.   |

## Project Name: DTI Digital Government Platform Foundation

| Project Identification Number   | 18897   |
|---|---|
| Project Expenditure Category  | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity   |
| Project Expenditure Subcategory   | 3.4-Public Sector Capacity: Effective Service Delivery  |
| Status To Completion  | Completed less than 50%   |
| Adopted Budget  | \$20,000,000.00   |
| Total Cumulative Obligations  | \$8,343,131.40  |
| Total Cumulative Expenditures   | \$4,317,778.55  |
| Current Period Obligations  | \$526,390.99  |
| Current Period Expenditures   | \$849,329.53  |
| Project Description   | ""The Digital Government Platform Foundation Program<br>sets out to deliver a device agnostic user-friendly experience<br>for Delaware's residence and visitors. Considerable effort<br>will be given to the design and incorporation of key software<br>components that provide a human centric User Interface (UI)<br>and User Experience (UX). This includes implementing<br>agency services and upgrading the agencies' backend<br>systems to utilize the portal/foundation. All agencies will be<br>able to "plug in" to the foundation (over time) to deliver<br>their services via the single portal/app. Various technical and<br>program contractors will be needed to complete these<br>projects."" |
| Does this project include a capital expenditure?  | No  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | To provide a digital government platform for users across<br>the state to have a more modern and enhanced software<br>experience.   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Digital platform will provide technology enhancements that<br>will allow end users to perform job duties more easily. The<br>need for this was exacerbated during the COVID-19<br>pandemic.   |

### **Project Name: DHSS Emergency Housing**

Γ

l

| Project Identification Number   | 18598   |
|---|---|
| Project Expenditure Category  | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory   | 2.18-Housing Support: Other Housing Assistance  |
| Status To Completion  | Completed   |
| Adopted Budget  | \$6,661,693.57  |
| Total Cumulative Obligations  | \$6,655,612.57  |
| Total Cumulative Expenditures   | \$6,655,612.57  |
| Current Period Obligations  | (\$510.00)  |
| Current Period Expenditures   | (\$510.00)  |
| Project Description   | To develop and implement strategies to transition households experiencing homelessness.   |
| Does this project include a capital expenditure?  | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00  |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 4 Imp HHs that experienced increased food or housing insecurity   |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | During the pandemic, Delaware citizens including many<br>families with children became homeless because of a variety<br>of reasons including eviction, inability to pay rent or<br>utilities, lack of available housing stock, lack of shelter<br>space, and lack of other state or federal supports to enter<br>permanent housing. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Families became unable to find permanent or even<br>temporary housing as a result of conditions created or<br>exacerbated by the pandemic.  |

# **Project Name: DHSS Emergency Housing**

| Project Identification Number  | 18667   |
|--|---|
| Project Expenditure Category   | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory  | 2.18-Housing Support: Other Housing Assistance  |
| Status To Completion   | Completed   |
| Adopted Budget   | \$600,025.00  |
| Total Cumulative Obligations   | \$492,260.66  |
| Total Cumulative Expenditures  | \$492,260.66  |
| Current Period Obligations   | \$0.00  |
| Current Period Expenditures  | \$0.00  |
| Project Description  | To develop and implement strategies to transition households experiencing homelessness. |
| Does this project include a capital expenditure?   | No  |
| Please identify the dollar amount of the total project spending that is allocated towards evidence-based | \$780,000.00  |

| interventions   |   |
|---|---|
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 4 Imp HHs that experienced increased food or housing insecurity   |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | During the pandemic, Delaware citizens including many<br>families with children became homeless because of a variety<br>of reasons including eviction, inability to pay rent or<br>utilities, lack of available housing stock, lack of shelter<br>space, and lack of other state or federal supports to enter<br>permanent housing. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Families became unable to find permanent or even<br>temporary housing as a result of conditions created or<br>exacerbated by the pandemic   |

## **Project Name: DHSS Vaccine Booster for Homebound Adults**

| Project Identification Number   | 18749  |
|---|--|
| Project Expenditure Category  | 1-Public Health                                  |
| Project Expenditure Subcategory   | 1.1-COVID-19 Vaccination                         |
| Status To Completion  | Completed  |
| Adopted Budget  | \$59,726.79                                      |
| Total Cumulative Obligations  | \$59,726.79                                      |
| Total Cumulative Expenditures   | \$59,726.79                                      |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | DHSS Vaccine Booster for Homebound Adults        |
| Does this project include a capital expenditure?  | No   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public                             |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Vaccinating homebound adults.                    |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Provinding vaccines to adults who are homebound. |

## Project Name: DHSS Federally Qualified Health Care Fund

| Project Identification Number   | 18750                                  |
|---------------------------------|--|
| Project Expenditure Category    | 1-Public Health                        |
| Project Expenditure Subcategory | 1.9-COVID-19 Assistance to Non-Profits |
| Status To Completion            | Completed 50% or more                  |
| Adopted Budget                  | \$4,500,000.00                         |
| Total Cumulative Obligations    | \$4,500,000.00                         |
| Total Cumulative Expenditures   | \$4,500,000.00                         |

| Current Period Obligations  | \$0.00  |
|---|---|
| Current Period Expenditures   | \$0.00  |
| Project Description   | Increase and/or retain staffing capacity impacted by<br>COVID-19 and COVID-19 Infection Control Measures                                      |
| Does this project include a capital expenditure?  | No  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | to provide payments to local healthcare facilities in order to<br>retain employees and provide coverage of staff shortages<br>due to COVID-19 |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | will conduct compliance checks to ensure funds went to<br>retaining employees and coverage of staff shortages due to<br>COVID-19              |
| Number of Non-Profits served (by program if recipient establishes multiple separate non-profit assistance programs)   | 2   |

## **Project Name: DHSS Early Childhood Testing**

| Project Identification Number   | 18872   |
|---|---|
| Project Expenditure Category  | 1-Public Health   |
| Project Expenditure Subcategory   | 1.2-COVID-19 Testing  |
| Status To Completion  | Completed   |
| Adopted Budget  | \$86,203.00   |
| Total Cumulative Obligations  | \$0.00  |
| Total Cumulative Expenditures   | \$0.00  |
| Current Period Obligations  | (\$86,203.00)   |
| Current Period Expenditures   | (\$86,203.00)   |
| Project Description   | This program ensures the future capacity to meet pandemic<br>response needs through testing of early childhood<br>development centers and day-cares – age ranges outside of<br>grant supported funding. |
| Does this project include a capital expenditure?  | No  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | This program ensures the future capacity to meet pandemic<br>response needs through testing of early childhood<br>development centers and day-cares – age ranges outside of<br>grant supported funding. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | DPH will continue to meet with HMA to establish this<br>testing program. This program is attached to the school<br>testing program as additional support. This funds COVID-19<br>mitigation efforts.    |

## **Project Name: DHSS Emergency Supplies**

| Project Identification Number | 18873                       |
|-------------------------------|-----------------------------|
| Project Expenditure Category  | 2-Negative Economic Impacts |
|                               |                             |

| Project Expenditure Subcategory   | 2.37-Economic Impact Assistance: Other  |
|---|---|
| Status To Completion  | Completed less than 50%   |
| Adopted Budget  | \$194,000.00  |
| Total Cumulative Obligations  | \$35,604.71   |
| Total Cumulative Expenditures   | \$35,604.71   |
| Current Period Obligations  | \$15,270.21   |
| Current Period Expenditures   | \$15,270.21   |
| Project Description   | Provide supplies to families in need  |
| Does this project include a capital expenditure?  | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$194,000.00  |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Provide supplies to families in need  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Emergency Supplies for Families enrolled in<br>Evidence-Based Home Visiting Programs project. |

# **Project Name: DHSS Pregnancy Housing**

| Project Identification Number  | 18874   |
|--|---|
| Project Expenditure Category   | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory  | 2.17-Housing Support: Housing Vouchers and Relocation<br>Assistance for Disproportionately Impacted Communities |
| Status To Completion   | Completed 50% or more   |
| Adopted Budget   | \$1,508,538.00  |
| Total Cumulative Obligations   | \$1,272,726.77  |
| Total Cumulative Expenditures  | \$770,376.38  |
| Current Period Obligations   | \$0.00  |
| Current Period Expenditures  | \$165,502.67  |
| Project Description  | Services for pregnant women in need.  |
| Does this project include a capital expenditure?   | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions | \$0.00  |
| Is a program evaluation of the project being conducted?  | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?                                | 1 Imp General Public  |
| Is a program evaluation of the project being conducted?  | Yes   |

| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Services for pregnant women in need.   |
|---|--|
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Housing and Wrap Around Services for Pregnant Women<br>Demonstration Project |

## Project Name: OGOV Administrative Costs & Overhead

| Project Identification Number   | 18637  |
|---------------------------------|--|
| Project Expenditure Category    | 7-Administrative   |
| Project Expenditure Subcategory | 7.1-Administrative Expenses  |
| Status To Completion            | Completed  |
| Adopted Budget                  | \$924,557.45   |
| Total Cumulative Obligations    | \$924,557.45   |
| Total Cumulative Expenditures   | \$924,557.45   |
| Current Period Obligations      | (\$545,881.19)   |
| Current Period Expenditures     | \$295,527.11   |
| Project Description             | Admin & oversight expenses for OGOV to manage the ARPA SLFRF & CPF grants. |

## Project Name: DHSS Meals, Meal Delivery, Case Management

| Project Identification Number  | 18955  |
|--|--|
| Project Expenditure Category   | 2-Negative Economic Impacts  |
| Project Expenditure Subcategory  | 2.1-Household Assistance: Food Programs  |
| Status To Completion   | Completed  |
| Adopted Budget   | \$882,419.49   |
| Total Cumulative Obligations   | \$882,419.49   |
| Total Cumulative Expenditures  | \$882,419.49   |
| Current Period Obligations   | \$0.00   |
| Current Period Expenditures  | \$0.00   |
| Project Description  | DHSS Meals, Meal Delivery, Case Management   |
| Does this project include a capital expenditure?   | No   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions | \$1,392,351.00   |
| Is a program evaluation of the project being conducted?  | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?                                | 4 Imp HHs that experienced increased food or housing insecurity  |
| Is a program evaluation of the project being conducted?  | Yes  |
| Brief description of structure and objectives of assistance  | During the pandemic, Delaware citizens including many<br>families with children became homeless because of a variety<br>of reasons including eviction, inability to pay rent or<br>utilities, lack of available housing stock, lack of shelter |

| program(s), including public health or negative economic impact experienced   | space, and lack of other state or federal supports to enter<br>permanent housing. These residents were placed in hotel and<br>motels to provide safe temporary living arrangements by the<br>Division of State Service Centers (DSSC). DSSC referred<br>clients to the Division of Social   |
|---|---|
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | <ul> <li>Families became unable to find permanent or even<br/>temporary housing as a result of conditions created or<br/>exacerbated by the pandemic, including: <ol> <li>Lack of shelter space, shelters closed or reduced capacity<br/>due to need for social distancing or quarantining.</li> <li>The moratorium on evictions created less turnover in<br/>housing resulting in less available housing</li> <li>Rental housing prices have increased beyond what many<br/>low income families can afford</li> <li>Many of hotel residents have multiple barriers to</li> </ol> </li> </ul> |
| Number of households served (by program if recipient establishes multiple separate household assistance programs)   | 1,121   |

## **Project Name: DHSS Retention Premium Pay**

| Project Identification Number   | 18721  |
|---|--|
| Project Expenditure Category  | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity  |
| Project Expenditure Subcategory   | 3.1-Public Sector Workforce: Payroll and Benefits for Public<br>Health, Public Safety, or Human Services Workers   |
| Status To Completion  | Completed  |
| Adopted Budget  | \$5,640,228.66   |
| Total Cumulative Obligations  | \$5,640,228.66   |
| Total Cumulative Expenditures   | \$5,640,228.66   |
| Current Period Obligations  | (\$2,500.66)   |
| Current Period Expenditures   | (\$2,500.66)   |
| Project Description   | Retention incentives to existing DHSS facility patient care positions and DHSS nursing classifications   |
| Does this project include a capital expenditure?  | No   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | In response to the shortage of health care workers, retention<br>incentives are being provided to direct care staff to enhance<br>the department's ability to provide direct care to residents<br>and patients |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Retention incentives are in accordance with ARPA guidelines  |
| Number of government FTEs responding to COVID-19 supported under this authority   | 1,015  |

# **Project Name: DOL Operational Expenses**

| Project Identification Number   | 18869   |
|---------------------------------|---|
| Project Expenditure Category    | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity |
| Project Expenditure Subcategory | 3.5-Public Sector Capacity: Administrative Needs                    |

| Status To Completion  | Completed less than 50%   |
|---|---|
| Adopted Budget  | \$17,426,170.00   |
| Total Cumulative Obligations  | \$15,358,614.95   |
| Total Cumulative Expenditures   | \$15,012,887.00   |
| Current Period Obligations  | \$1,519,890.83  |
| Current Period Expenditures   | \$1,444,958.67  |
| Project Description   | Funding to cover operational expenses to provide more services to the public as a result of COVID-19 pandemic.  |
| Does this project include a capital expenditure?  | No  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | The funding provides the Division with critical financial resources to fund Merit staff OT as it continues to work through a backlog of claims, adjudications, fraud investigation, and appeals ~(10,000) claimants.  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | The pandemic overwhelmed the Division's systems, human<br>capital and business process capacity, creating backlogs<br>throughout the Division. This impacted individuals displaced<br>directly the result of COVID-19 and those workers displaced<br>due to other reasons. Regardless, they were impacted due to<br>COVID-19. |

## Project Name: DOL Overtime Expenses

| Project Identification Number                    | 18870  |  |
|--|--|--|
| Project Expenditure Category                     | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity                  |  |
| Project Expenditure Subcategory                  | 3.5-Public Sector Capacity: Administrative Needs                                     |  |
| Status To Completion                             | Not Started  |  |
| Adopted Budget                                   | \$1,270,000.00   |  |
| Total Cumulative Obligations                     | \$0.00   |  |
| Total Cumulative Expenditures                    | \$0.00   |  |
| Current Period Obligations                       | \$0.00   |  |
| Current Period Expenditures                      | \$0.00   |  |
| Project Description                              | Funding to cover overtime expenses due to severe backlog caused by COVID-19 pandemic |  |
| Does this project include a capital expenditure? | No   |  |

# Project Name: DOL UI Trust Fund

| Project Identification Number   | 18871                                |
|---------------------------------|--------------------------------------|
| Project Expenditure Category    | 2-Negative Economic Impacts          |
| Project Expenditure Subcategory | 2.28-Contributions to UI Trust Funds |
| Status To Completion            | Cancelled                            |
| Adopted Budget                  | \$0.00                               |
| Total Cumulative Obligations    | \$0.00                               |
| Total Cumulative Expenditures   | \$0.00                               |
|                                 |                                      |

| Current Period Obligations  |   |
|---|---|
| Current Period Expenditures   |   |
| Project Description   | Funding for unemployment trust fund.      |
| Does this project include a capital expenditure?  | No  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public                      |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Funding for unemployment trust fund.      |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | all projects are reviewed by Delaware DOJ |

# Project Name: DOL FAST Program

| Project Identification Number   | 18898  |  |
|---|--|--|
| Project Expenditure Category  | 2-Negative Economic Impacts  |  |
| Project Expenditure Subcategory   | 2.10-Assistance to Unemployed or Underemployed Worker<br>(e.g. job training, subsidized employment, employment<br>supports or incentives)  |  |
| Status To Completion  | Completed less than 50%  |  |
| Adopted Budget  | \$500,000.00   |  |
| Total Cumulative Obligations  | \$355,542.37   |  |
| Total Cumulative Expenditures   | \$235,495.65   |  |
| Current Period Obligations  | \$209.33   |  |
| Current Period Expenditures   | \$107,141.14   |  |
| Project Description   | Job training leading to certificates in impacted industries for recent HS graduates.   |  |
| Does this project include a capital expenditure?  | No   |  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions                  | \$0.00   |  |
| Is a program evaluation of the project being conducted?   | Yes  |  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 2 Imp Low or moderate income HHs or populations  |  |
| Secondary Impacted and/or Disproportionately Impacted populations   | 12 Imp Travel tourism or hospitality sectors   |  |
| Is a program evaluation of the project being conducted?   | Yes  |  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced | The FAST program within the Division of Employmnt an<br>Training, will provide tuition up to \$10,000 for eligible<br>individuals for an approved non-degree credit certification<br>program that provides industry skills training and recogniz<br>credential certifications. |  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or                   | The hospitality, Food Service and Tourism industries have<br>been negatively affected by th public health emergency.<br>These are the specific areas of training that will be provided<br>to a targeted population which will, in turn, allow immediate                        |  |

## Project Name: DOL Tableau Software

| Project Identification Number   | 18863  |  |
|---|--|--|
| Project Expenditure Category  | 2-Negative Economic Impacts  |  |
| Project Expenditure Subcategory   | 2.30-Technical Assistance, Counseling, or Business<br>Planning   |  |
| Status To Completion  | Completed less than 50%  |  |
| Adopted Budget  | \$500,000.00   |  |
| Total Cumulative Obligations  | \$458,555.69   |  |
| Total Cumulative Expenditures   | \$8,555.69   |  |
| Current Period Obligations  | \$209.33   |  |
| Current Period Expenditures   | \$209.33   |  |
| Project Description   | Enhanced Reporting to assist in reaching workers affected by COVID-19  |  |
| Does this project include a capital expenditure?  | No   |  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00   |  |
| Is a program evaluation of the project being conducted?   | Yes  |  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 7 Imp Other HHs or populations that experienced a negative economic  |  |
| Secondary Impacted and/or Disproportionately Impacted populations   | 2 Imp Low or moderate income HHs or populations  |  |
| Is a program evaluation of the project being conducted?   | Yes  |  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | In response to the negative economic impact of Covid-19,<br>The Tableau enhancement will make it case management<br>tool and products (e.g. interactive dashboards, job postings,<br>training services) available to individuals who have become<br>unemployed, or underemployed, due to the many<br>employment downsizing or shut downs that took place at the<br>onset of the COVID-19 Pandemic. Individuals immediately<br>found themselves trying to find way to support themselves<br>and their familes finacially. |  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | The enhancement to Tableau is reasonable and proportional<br>to the public negative economic impact of Covid-19, due to<br>its easy access to tools that would aid in resources needed to<br>find employement and for businesses to reach those who<br>want to be employed in real time.   |  |
| Number of small businesses served (by program if recipient<br>establishes multiple separate small businesses assistance<br>programs)                                | 0.00   |  |

#### Project Name: DOL UI System Modernization

| Project Identification Number | 18790                 |
|-------------------------------|-----------------------|
| Project Expenditure Category  | 6-Revenue Replacement |

| Project Expenditure Subcategory   | 6.1-Provision of Government Services   |  |
|---|--|--|
| Status To Completion  | Completed less than 50%  |  |
| Adopted Budget  | \$60,000,000.00  |  |
| Total Cumulative Obligations  | \$9,386,525.52   |  |
| Total Cumulative Expenditures   | \$9,032,591.73   |  |
| Current Period Obligations  | \$456,361.38   |  |
| Current Period Expenditures   | \$1,997,689.38   |  |
| Project Description   | Business transformation and modernization of UI systems<br>and business processes  |  |
| Does this project include a capital expenditure?  | Yes  |  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$60,000.00  |  |
| Type of capital expenditures, based on the following enumerated uses  | Technology infrastructure to adapt government operations   |  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Unemployment Insurance program providing financial assistance to those unemployed due to no fault of their own.  |  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | The COVID-19 pandemic exposed significant deficiencies<br>in the systems supporting the Division of Unemployment<br>Insurance, which delayed payments to entitled individuals,<br>and left the Division vulnerable and increased risk of \fraud<br>and overpayments. |  |

# Project Name: DOC Premium Pay & Overtime

| Project Identification Number                                      | 18213b  |
|--|---|
| Project Expenditure Category                                       | 4-Premium Pay   |
| Project Expenditure Subcategory                                    | 4.1-Public Sector Employees   |
| Status To Completion   | Completed   |
| Adopted Budget   | \$11,952,824.96   |
| Total Cumulative Obligations                                       | \$11,952,824.96   |
| Total Cumulative Expenditures                                      | \$11,952,824.96   |
| Current Period Obligations   | \$0.00  |
| Current Period Expenditures  | \$0.00  |
| Project Description  | Funding to cover critical staff shortages in correctional facilities due to COVID-19 Pandemic |
| Sectors Designated as Essential Critical Infrastructure<br>Sectors | Correctional facilities and youth rehabilitation facilities                                   |
| Number of workers to be served                                     | 100   |
| Premium Pay Narrative  | Funding to cover critical staff shortages due to COVID-19 pandemic.                           |
| Number of workers to be served with premium pay in K-12 schools    | 0   |

#### Project Name: Brandywine SD COVID Leave

| Project Identification Number   | 19145   |  |
|---|---|--|
| Project Expenditure Category  | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity   |  |
| Project Expenditure Subcategory   | 3.5-Public Sector Capacity: Administrative Needs  |  |
| Status To Completion  | Completed   |  |
| Adopted Budget  | \$17,919.12   |  |
| Total Cumulative Obligations  | \$17,919.12   |  |
| Total Cumulative Expenditures   | \$17,919.12   |  |
| Current Period Obligations  | \$0.00  |  |
| Current Period Expenditures   | \$0.00  |  |
| Project Description   | Provide reimbursement for expenses incurred by district and<br>charter schools due to employees out sick with covid.<br>Includes cost of substitutes teachers and overtime.               |  |
| Does this project include a capital expenditure?  | No  |  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | District and Charter schools report expenditures to Office of<br>Management and Budget. Upon review and approval,<br>reimbursement funds are transferred to respective project<br>budget. |  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 |   |  |

# Project Name: Odyssey Charter COVID Leave

| Project Identification Number   | 19302   |  |
|---|---|--|
| Project Expenditure Category  | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity   |  |
| Project Expenditure Subcategory   | 3.5-Public Sector Capacity: Administrative Needs  |  |
| Status To Completion  | Completed   |  |
| Adopted Budget  | \$20,091.09   |  |
| Total Cumulative Obligations  | \$20,091.09   |  |
| Total Cumulative Expenditures   | \$20,091.09   |  |
| Current Period Obligations  | \$0.00  |  |
| Current Period Expenditures   | \$0.00  |  |
| Project Description   | Provide reimbursement for expenses incurred by district and<br>charter schools due to employees out sick with covid.<br>Includes cost of substitutes teachers and overtime. |  |
| Does this project include a capital expenditure?  | No  |  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced |   |  |
| Brief description of recipient's approach to ensuring that  | Reimbursements are reviewed to adhere to State guidance<br>ensuring that employee leave was used to quarantine, due to  |  |

| <b>Project Name</b> | DE NG Pander | nic Readiness Center |
|---------------------|--------------|----------------------|
|---------------------|--------------|----------------------|

| Project Identification Number   | 18823   |
|---|---|
| Project Expenditure Category  | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity   |
| Project Expenditure Subcategory   | 3.4-Public Sector Capacity: Effective Service Delivery  |
| Status To Completion  | Completed less than 50%   |
| Adopted Budget  | \$8,000,000.00  |
| Total Cumulative Obligations  | \$766,908.63  |
| Total Cumulative Expenditures   | \$618,728.63  |
| Current Period Obligations  | \$35,000.00   |
| Current Period Expenditures   | \$28,000.00   |
| Project Description   | Purchase land with improvements and create a Pandemic<br>Readiness Center at 12 Penns Way, New Castle, DE   |
| Does this project include a capital expenditure?  | Yes   |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$15,000,000.00   |
| Type of capital expenditures, based on the following enumerated uses  | Rehabilitations, renovation, remediation, cleanup, or conversions   |
| Capital Expenditure Justification   | The DE National Guard has been assisting with the<br>mitigation of COVID-19 since the beginning. As COVID-19<br>continues to be an issue, a Pandemic Readiness Center<br>ideally located close to all the major thoroughfares in New<br>Castle County would allow the Guard to provide prompt<br>response from one location as well as provide a testing and<br>vaccination site. |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | To establish a temporary public medical facility and other measures to increase COVID-19 treatment capacity and related operational needs.  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Purchase of land with building improvements to create a<br>Pandemic Readiness Center  |
| Does the project prioritize local hires?  | Yes   |
| Does the project have a Community Benefit Agreement, with a description of any such agreement?  | No  |

#### Project Name: OGOV Academy of Medicine

| Project Identification Number   | 19108                       |
|---------------------------------|-----------------------------|
| Project Expenditure Category    | 1-Public Health             |
| Project Expenditure Subcategory | 1.12-Mental Health Services |
| Status To Completion            | Completed less than 50%     |
| Adopted Budget                  | \$5,000,000.00              |
|                                 |                             |

| Total Cumulative Obligations  | \$5,000,000.00   |
|---|--|
| Total Cumulative Expenditures   | \$3,405,300.00   |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | "This request establishes funding for the Delaware Health<br>Force, including student financial aid for medical, dental and<br>nursing students, underwriting residency positions, and<br>expanding a program to expose high school students to<br>careers in the medical field. \$2,724,700 of the project is<br>depends on initial intended results of the project being<br>accomplished." |
| Does this project include a capital expenditure?  | No   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$52,688.28  |
| Is a program evaluation of the project being conducted?   | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Enhance medical workforce and expose more high school students to the workforce in an attempt to recruit more workers.   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Focus on areas most vulnerable in the state that were impacted the greatest by COVID-19.   |

## Project Name: OGOV UD Research Lab

| Project Identification Number  | 19110  |
|--|--|
| Project Expenditure Category   | 1-Public Health  |
| Project Expenditure Subcategory  | 1.14-Other Public Health Services  |
| Status To Completion   | Completed less than 50%  |
| Adopted Budget   | \$41,000,000.00  |
| Total Cumulative Obligations   | \$41,000,000.00  |
| Total Cumulative Expenditures  | \$41,000,000.00  |
| Current Period Obligations   | \$0.00   |
| Current Period Expenditures  | \$10,000.00  |
| Project Description  | "Demolition, design and construction associated with the<br>former McKinly site. Building a new University of Delaware<br>laboratory facility. " |
| Does this project include a capital expenditure?   | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable | \$41,000,000.00  |
| Type of capital expenditures, based on the following enumerated uses                           | Schools and other educational facilities   |
|  | Funding will provide a new lab that will be used for research studies and educational opportunities provided by the                              |

| Capital Expenditure Justification   | University of Delaware. The total project cost is estimated to<br>be approximately \$200 million with \$41 million being<br>funded through ARPA funding. |
|---|--|
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Construct new UD lab to assist in public health research and mitigation.   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Focus on areas most vulnerable in the state that were impacted the greatest by COVID-19.   |
| Does the project prioritize local hires?  | Yes  |
| Does the project have a Community Benefit Agreement, with a description of any such agreement?  | No   |

## Project Name: OGOV MH Del Nurses Association

| Project Identification Number   | 19161   |
|---|---|
| Project Expenditure Category  | 1-Public Health   |
| Project Expenditure Subcategory   | 1.12-Mental Health Services   |
| Status To Completion  | Completed less than 50%   |
| Adopted Budget  | \$500,000.00  |
| Total Cumulative Obligations  | \$500,000.00  |
| Total Cumulative Expenditures   | \$166,700.00  |
| Current Period Obligations  | \$0.00  |
| Current Period Expenditures   | \$0.00  |
| Project Description   | "Funding to establish the HNHD platform to support the<br>Delaware nursing community by integrating numerous<br>evidence-based behavioral health promoting strategies into a<br>single, comprehensive application. It will be a virtual<br>program with asynchronous and synchronous support for<br>Delaware nurse wellbeing and mental health. It is a free<br>program available to Delaware's 25,000+ licensed<br>professional nurses." |
| Does this project include a capital expenditure?  | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions                  | \$0.00  |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced | The assistance program offered through this ARPA<br>Delaware project provides nurses with missing resources<br>from a trusted source and further closes gaps in mental<br>health and overall wellbeing.   |
| Brief description of recipient's approach to ensuring that  | The recipient has and continues to collect data from<br>Delaware nurses about the proportional impact on their  |

mental health and wellbeing. Once launched and participants enroll, the technology will continue to gather this data and track improvements in Delaware nurse's mental health and wellbeing.

#### **Project Name: OGOV PAWS for People**

| Project Identification Number   | 19314  |
|---|--|
| Project Expenditure Category  | 1-Public Health  |
| Project Expenditure Subcategory   | 1.12-Mental Health Services  |
| Status To Completion  | Completed  |
| Adopted Budget  | \$9,750.00   |
| Total Cumulative Obligations  | \$9,750.00   |
| Total Cumulative Expenditures   | \$9,750.00   |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | Service to provide individualized therapeutic vistis with<br>specially trained volunteers and their certified pets to help<br>persons strugling with physical and mental well-being. |
| Does this project include a capital expenditure?  | No   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00   |
| Is a program evaluation of the project being conducted?   | No   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Is a program evaluation of the project being conducted?   | No   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Provide therapeutic visits with pets to assist persons<br>struggling with physical and mental illness  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Focus on areas most vulnerable in the state that were impacted the greatest by COVID-19.   |

#### **Project Name: OGOV DRA Mental Health**

| Project Identification Number   | 19315                       |
|---------------------------------|-----------------------------|
| Project Expenditure Category    | 1-Public Health             |
| Project Expenditure Subcategory | 1.12-Mental Health Services |
| Status To Completion            | Completed less than 50%     |
| Adopted Budget                  | \$300,000.00                |
| Total Cumulative Obligations    | \$300,000.00                |
| Total Cumulative Expenditures   | \$300,000.00                |
| Current Period Obligations      | \$0.00                      |
| Current Period Expenditures     | \$0.00                      |
|                                 |                             |

| Project Description  | Expansion of Healthcare Services/Telemedicine for<br>Restaurant Workforce to enroll 500 frontline restaurant<br>industry workers in the 'Healthiest You' program by<br>Teladoc for the period of 1 year, beginning in January 2022 -<br>so far we have 88 participants and are in the process of<br>registering more each week. We are reviewing the signup<br>process and always looking at more ways to draw attention<br>to this program for industry workers and signup more<br>participants. We plan to bring this to future DRA events, and<br>sign up participants on the spot using ipads and other<br>technology like auto-enrollment QR codes.<br>'Drugs & Alcohol in the Workplace' - Frontline Staff<br>Training Course will include consultation and content<br>development with substance abuse experts, mental health<br>counselors and addiction specialists. The DRA is in the<br>research phase of this project (summer 2023) and working<br>on the course content, sourcing any available data and other<br>courses from state agencies and other states that may have<br>similar trainings. The second phase of the project, set to<br>begin in Q4 2024, will be development of an online course,<br>and piloting the course with ProStart students (including<br>completion of pre and post-course survey data). Course<br>content and graphics would be created and implemented by<br>December 31, 2023. Pilot cohort of ProStart students and<br>frontline workers would take (and be surveyed on) the<br>course beginning in January 20204 and end by June 30,<br>2024. Mental Health Awareness Media Campaign Media<br>campaign including television, radio, print and social media<br>marketing, plus earned media and placed stories. Direct<br>marketing at DRA events. Industry educational toolkits<br>created to amplify the industry commitment to mental health<br>resources, telemedicine programs, and online training<br>available in Delaware included, but not limited to, the<br>Teladoc® program of telemedicine services, and a new<br>substance abuse prevention online training video. Media<br>campaign would include promoting Teladoc telemedicine<br>services beginning in late 2022, promo |
|--|--|
| Does this project include a capital expenditure?   | No   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions | \$300,000.00   |
| Is a program evaluation of the project being conducted?  | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?                                | 20 Dis Imp Other HHs or populations that experienced a disproportionate  |
| Secondary Impacted and/or Disproportionately Impacted populations  | 12 Imp Travel tourism or hospitality sectors   |
| Tertiary Impacted and/or Disproportionately Impacted populations   | 1 Imp General Public   |
| Is a program evaluation of the project being conducted?  | Yes  |
|  |  |

| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Provide telemedicine services to the restaurant workforce in Delaware.                   |
|---|--|
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Focus on areas most vulnerable in the state that were impacted the greatest by COVID-19. |

## Project Name: OGOV Brandywine Counseling

| 19316   |
|---|
| 1-Public Health   |
| 1.12-Mental Health Services   |
| Completed 50% or more   |
| \$32,697.50   |
| \$32,697.50   |
| \$32,697.50   |
| \$0.00  |
| \$0.00  |
| Funding for a trauma-informed professional training and<br>development program to help address the mental health<br>challenges caused or exacerbated by the COVID-19<br>pandemic. |
| No  |
| \$0.00  |
| Yes   |
| 1 Imp General Public  |
| Yes   |
| Program to provide mental health services to the public.  |
| Focus on areas most vulnerable in the state that were impacted the greatest by COVID-19.  |
|   |

## Project Name: OGOV Children & Families First

| Project Identification Number   | 19320                       |
|---------------------------------|-----------------------------|
| Project Expenditure Category    | 1-Public Health             |
| Project Expenditure Subcategory | 1.12-Mental Health Services |
| Status To Completion            | Completed less than 50%     |
| Adopted Budget                  | \$276,625.00                |
| Total Cumulative Obligations    | \$276,625.00                |
| Total Cumulative Expenditures   | \$276,625.00                |
|                                 |                             |

| Current Period Obligations  | \$0.00   |
|---|--|
| Current Period Expenditures   | \$0.00   |
| Project Description   | Funding to support behavioral health initiatives for children served throughout the State. |
| Does this project include a capital expenditure?  | No   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$276,625.00   |
| Is a program evaluation of the project being conducted?   | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Secondary Impacted and/or Disproportionately Impacted populations   | 2 Imp Low or moderate income HHs or populations  |
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Program to support behavioral health for children throughout Delaware.                     |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Focus on areas most vulnerable in the state that were impacted the greatest by COVID-19.   |

# Project Name: OGOV Advanced Family Care

| Project Identification Number  | 19323  |
|--|--|
| Project Expenditure Category   | 1-Public Health  |
| Project Expenditure Subcategory  | 1.12-Mental Health Services  |
| Status To Completion   | Completed  |
| Adopted Budget   | \$183,400.00   |
| Total Cumulative Obligations   | \$183,400.00   |
| Total Cumulative Expenditures  | \$183,400.00   |
| Current Period Obligations   | \$0.00   |
| Current Period Expenditures  | \$0.00   |
| Project Description  | Advanced Family Care's Healthy Minds, Healthy Lives<br>project will bring mental health awareness through<br>continued community outreach efforts in the cities of<br>Middletown, Odessa, Townsend and beyond. |
| Does this project include a capital expenditure?   | No   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions | \$0.00   |
| Is a program evaluation of the project being conducted?  | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?                                | 1 Imp General Public   |
| Secondary Impacted and/or Disproportionately Impacted populations  | 2 Imp Low or moderate income HHs or populations  |
| Is a program evaluation of the project being conducted?  | Yes  |

| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Outreach and mental health services to specific areas within Delaware.                   |
|---|--|
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Focus on areas most vulnerable in the state that were impacted the greatest by COVID-19. |

## Project Name: OGOV Jewish Family Services

| Project Identification Number   | 19324  |
|---|--|
| Project Expenditure Category  | 1-Public Health  |
| Project Expenditure Subcategory   | 1.12-Mental Health Services  |
| Status To Completion  | Completed 50% or more  |
| Adopted Budget  | \$1,000,000.00   |
| Program Income Earned   | \$192,076.02   |
| Program Income Expended   | \$192,076.02   |
| Total Cumulative Obligations  | \$1,000,000.00   |
| Total Cumulative Expenditures   | \$1,000,000.00   |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | A three-pronged project to increase the availability of<br>low-cost, community-based mental health services in<br>Delaware.  |
| Does this project include a capital expenditure?  | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$218,357.00   |
| Type of capital expenditures, based on the following enumerated uses  | Behavioral health facilities and equipment   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00   |
| Is a program evaluation of the project being conducted?   | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Provide low-cost mental health services in Delaware.<br>Support for Emergency Mental Health and Support Funding;<br>Older adults/adults with intellectual and developmental<br>disabilities; assist with support for eligible particapnts<br>effected by the COVID pandemic. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Focus on areas most vulnerable in the state that were impacted the greatest by COVID-19.   |

# Project Name: OGOV United Way DE Fellowship

| Project Identification Number | 19162 |
|-------------------------------|-------|
|                               |       |

| Project Expenditure Category  | 2-Negative Economic Impacts  |
|---|--|
| Project Expenditure Subcategory   | 2.10-Assistance to Unemployed or Underemployed Workers<br>(e.g. job training, subsidized employment, employment<br>supports or incentives)   |
| Status To Completion  | Completed  |
| Adopted Budget  | \$1,000,000.00   |
| Total Cumulative Obligations  | \$1,000,000.00   |
| Total Cumulative Expenditures   | \$1,000,000.00   |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | The Governor's Summer Fellowship is a joint partnership<br>between the United Way of Delaware (UWDE), the<br>Delaware Department of Education (DDOE), and the Office<br>of Governor John Carney. The program will use APRA<br>funds to support elementary and middle school aged youth to<br>enroll in high-quality summer learning experiences. It is<br>anticipated that approximately five (5) sites will be selected<br>as part of the summer fellowship, each site enrolling<br>between 50 and 100 youth participants, and hiring between 5<br>and 10 summer fellows. |
| Does this project include a capital expenditure?  | No   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00   |
| Is a program evaluation of the project being conducted?   | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Youth summer learning program.   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Focus on areas most vulnerable in the state that were impacted the greatest by COVID-19.   |

# Project Name: OGOV LEEP

| Project Identification Number   | 19297  |
|---------------------------------|--|
| Project Expenditure Category    | 2-Negative Economic Impacts  |
| Project Expenditure Subcategory | 2.10-Assistance to Unemployed or Underemployed Workers<br>(e.g. job training, subsidized employment, employment<br>supports or incentives) |
| Status To Completion            | Completed less than 50%  |
| Adopted Budget                  | \$1,700,000.00   |
| Total Cumulative Obligations    | \$1,700,000.00   |
| Total Cumulative Expenditures   | \$400,000.00   |
| Current Period Obligations      | \$0.00   |
|                                 |  |

| Current Period Expenditures   | \$0.00  |
|---|---|
| Project Description   | Workforce development project to provide a training<br>program for small local contractors. Training sessions,<br>mentoring, and financial counseling session will be provided<br>through this project. |
| Does this project include a capital expenditure?  | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$1,700,000.00  |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 8 Imp SBs that experienced a negative economic impact   |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Program to train and assist local contractors. Provide knowledge and assistance in expanding the workforce.   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Focus on areas most vulnerable in the state that were impacted the greatest by COVID-19.  |
| Number of small businesses served (by program if recipient<br>establishes multiple separate small businesses assistance<br>programs)                                | 14  |

## Project Name: DSFS Learning Management System

| Project Identification Number  | 19222  |
|--|--|
| Project Expenditure Category   | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity  |
| Project Expenditure Subcategory  | 3.4-Public Sector Capacity: Effective Service Delivery   |
| Status To Completion   | Completed 50% or more  |
| Adopted Budget   | \$275,000.00   |
| Total Cumulative Obligations   | \$200,000.00   |
| Total Cumulative Expenditures  | \$115,535.00   |
| Current Period Obligations   | \$0.00   |
| Current Period Expenditures  | \$58,350.00  |
| Project Description  | Funding to provide enhancements to the Delaware State Fire<br>School's Learning Management System for Emergency<br>Professionals. This will assist in the tracking of infection<br>control officers amongst other issues identified during the<br>COVID-19 Pandemic. |
| Does this project include a capital expenditure?   | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable                       | \$200,000.00   |
| Type of capital expenditures, based on the following enumerated uses   | Technology infrastructure to adapt government operations   |
| Brief description of structure and objectives of assistance program(s), including public health or negative economic | ARPA funding for an enhancement to its Learning<br>Management System for Emergency Professionals (LMEP).<br>The DSFPC provides regulatory oversight of Delaware's  |

| impact experienced  | ambulance attendants and emergency medical technicians (EMTs).                          |
|---|---|
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA projects are reviewed by the Department of Justice for ARPA SLFRF eligibility. |

# Project Name: DOL DET On the Job Training

| Project Identification Number   | 19285  |
|---|--|
| Project Expenditure Category  | 2-Negative Economic Impacts  |
| Project Expenditure Subcategory   | 2.10-Assistance to Unemployed or Underemployed Workers<br>(e.g. job training, subsidized employment, employment<br>supports or incentives)   |
| Status To Completion  | Completed less than 50%  |
| Adopted Budget  | \$909,400.00   |
| Program Income Earned   | \$0.00   |
| Program Income Expended   | \$0.00   |
| Total Cumulative Obligations  | \$137,065.13   |
| Total Cumulative Expenditures   | \$137,065.13   |
| Current Period Obligations  | \$37,880.47  |
| Current Period Expenditures   | \$37,880.47  |
| Project Description   | ARPA funding for a workforce initiative to reimburse<br>businesses that provide on-the-job training opportunities to<br>support those looking for work, while addressing their own<br>staffing shortages.  |
| Does this project include a capital expenditure?  | No   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00   |
| Is a program evaluation of the project being conducted?   | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | This program is to ensure that individuals who were<br>rendered unemployed or underemployed due the mandatory<br>job shut donwns, may be provided with the opportunity to<br>put current skills to work, as well as gain additional skills<br>via on the job training with an employer who would benefit<br>from assisted employee placement within jobs where<br>employers have a need for workers. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | This response is reasonable and proportional because the target population for On The Job Training is for unemployed, under employed and those looking to upskill. This program will offer training to those who need jobs or increase their capacity for higher earning potential.  |

## Project Name: DTI Employee Attestation

| Project Identification Number | 19141 |
|-------------------------------|-------|
|-------------------------------|-------|

| Project Expenditure Category  | 3-Public Health-Negative Economic Impact: Public Sector Capacity   |
|---|--|
| Project Expenditure Subcategory   | 3.4-Public Sector Capacity: Effective Service Delivery   |
| Status To Completion  | Completed less than 50%  |
| Adopted Budget  | \$100,000.00   |
| Total Cumulative Obligations  | \$77,189.75  |
| Total Cumulative Expenditures   | \$77,189.75  |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | The project is to develop a platform/application to support<br>increased security measures related to the substantial<br>workforce turnover that has taken place during the<br>pandemic. The application that was built to support the<br>Employee Attestation mandate from the Governor and<br>manages vaccination status or testing on a weekly basis<br>across the state. |
| Does this project include a capital expenditure?  | No   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | The project is to develop a platform/application to support<br>increased security measures related to the substantial<br>workforce turnover that has taken place during the<br>pandemic.   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | To build a digital Platform Foundation to deliver a device<br>agnostic user-friendly experience for Delaware agencies.   |

# Project Name: DTI Data Center Modernization

| Project Identification Number   | 19144  |
|---------------------------------|--|
| Project Expenditure Category    | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity  |
| Project Expenditure Subcategory | 3.4-Public Sector Capacity: Effective Service Delivery   |
| Status To Completion            | Completed less than 50%  |
| Adopted Budget                  | \$21,000,000.00  |
| Total Cumulative Obligations    | \$9,486,690.73   |
| Total Cumulative Expenditures   | \$7,344,497.55   |
| Current Period Obligations      | \$364,235.05   |
| Current Period Expenditures     | \$554,824.09   |
| Project Description             | The Data Center Modernization program will deliver a<br>modernized approach by updating our states William Penn<br>data center along with establishing Biggs as a<br>Telecommunications PoP. All secondary workloads for the<br>state would be migrated to Ashburn VA as DCaaS in order<br>to run these critical workloads while provide some disaster<br>recovery capabilities. Statewide private cloud workloads will<br>begin a migration using HCX to VMC on AWS in US Ohio<br>with full disaster recover of workloads within 4 hours to US<br>West. Once established all state agencies can take advantage<br>of this established services by utilizing our collocate<br>offering. This not only will help provide a modern |

|   | infrastructure for remote and hybrid work, but for the first<br>time will provide a disaster recovery plan objective of 4<br>hours for the virtual workloads in the State of Delaware.  |
|---|---|
| Does this project include a capital expenditure?  | Yes   |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$3,000,000.00  |
| Type of capital expenditures, based on the following enumerated uses  | Technology and tools  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | The Data Center Modernization program will deliver a<br>modernized approach by updating our states William Penn<br>data center . This not only will help provide a modern<br>infrastructure for remote and hybrid work, but for the first<br>time will provide a disaster recovery plan objective of 4<br>hours for the virtual workloads in the State of Delaware. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | The recipient's approach ensures the future sustainability,<br>availability, and security of client server system and data to<br>support services provided to State users and the citizens of<br>Delaware in times of a public health or negative economic<br>impact.   |

#### **Project Name: DTI Mainframe**

| Project Identification Number   | 19176  |
|---|--|
| Project Expenditure Category  | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity  |
| Project Expenditure Subcategory   | 3.4-Public Sector Capacity: Effective Service Delivery   |
| Status To Completion  | Completed less than 50%  |
| Adopted Budget  | \$14,000,000.00  |
| Total Cumulative Obligations  | \$9,864,402.21   |
| Total Cumulative Expenditures   | \$2,313,751.52   |
| Current Period Obligations  | \$52,696.23  |
| Current Period Expenditures   | \$174,749.57   |
| Project Description   | DTI is migrating the DTI mainframe applications and data to<br>a service provider's infrastructure. This migration<br>encompasses critical services hosted for DELJIS, DelDOT<br>DMV, Courts, Revenue, Labor, etc. The MFaaS service will<br>provide technology upgrades, more robust cybersecurity<br>capabilities, scalable infrastructure, consumption-based<br>pricing, and enhanced disaster recovery services. |
| Does this project include a capital expenditure?  | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$800,000.00   |
| Type of capital expenditures, based on the following enumerated uses  | Technology and tools   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced | DTI is migrating the DTI mainframe applications and data to<br>a service provider's infrastructure. This migration<br>encompasses critical services such as Law Enforcement,<br>Courts, and Dept of Labor Unemployment Insurance.  |
|   | The MFaaS service will provide technology upgrades, more   |

Brief description of recipient's approach to ensuring that response is reasonable and proportional to a public health or negative economic impact of Covid-19 robust cybersecurity capabilities, scalable infrastructure, consumption-based pricing, and enhanced disaster recovery services. The investment in MFaaS will improve the State's ability to support law enforcement responsiveness to violent crime, and deliver assistance to workers and families facing negative economic impacts, resulting from the COVID pandemic.

#### **Project Name: DTI Security Incident Detection**

| Project Identification Number   | 19279  |
|---|--|
| Project Expenditure Category  | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity  |
| Project Expenditure Subcategory   | 3.4-Public Sector Capacity: Effective Service Delivery   |
| Status To Completion  | Completed 50% or more  |
| Adopted Budget  | \$750,000.00   |
| Total Cumulative Obligations  | \$500,000.00   |
| Total Cumulative Expenditures   | \$500,000.00   |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | The active ARPA projects involve systems and applications<br>which record activities against them, like someone logging<br>in, changing a password or creating an account. These events<br>are centrally collected and analyzed for threats. The ask is to<br>increase the state's log collection capacity to accommodate<br>the new logs being generated. |
| Does this project include a capital expenditure?  | No   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | The active ARPA projects involve systems and applications<br>which record activities against them, like someone logging<br>in, changing a password or creating an account. These events<br>are centrally collected and analyzed for threats. To increase<br>the state's log collection capacity to accommodate the new<br>logs being generated.            |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Increase license capacity to ensure the security application sustainablility and availability  |

#### **Project Name: DTI Digital Accessibility**

| Project Identification Number   | 19280   |
|---------------------------------|---|
| Project Expenditure Category    | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity |
| Project Expenditure Subcategory | 3.4-Public Sector Capacity: Effective Service Delivery              |
| Status To Completion            | Completed 50% or more   |
| Adopted Budget                  | \$2,000,000.00  |
| Total Cumulative Obligations    | \$1,605,527.15  |
| Total Cumulative Expenditures   | \$1,172,453.61  |
| Current Period Obligations      | \$75,364.57   |
|                                 |   |

| Current Period Expenditures   | \$89,886.57  |
|---|--|
| Project Description   | To build and maintain Digital Government services that do<br>not exclude anyone from accessing data, system, or services.<br>The project consists of phases of analyzing and<br>recommending steps to remediate digital content (websites,<br>electronic forms, etc.) with a focus on training, standard and<br>compliance development, and implementation. This effort<br>will improve inclusiveness, accessibility and equal access to<br>all information by the citizens and employees in compliance<br>with Web Content Accessibility Guidelines (WCAG) 2.1. |
| Does this project include a capital expenditure?  | No   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | A significant goal of Digital Government is to encourage<br>engagement by subsets of the population that would<br>otherwise not use these resources.   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Digital Government is an opportunity for a more inclusive<br>environment in which more of the population engages<br>thanks to the simplicity of the platform.  |

# Project Name: OGOV Kind to Kids Foundation

| Project Identification Number   | 19109   |
|---|---|
| Project Expenditure Category  | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory   | 2.25-Addressing Educational Disparities: Academic, Social, and Emotional Services   |
| Status To Completion  | Completed less than 50%   |
| Adopted Budget  | \$600,000.00  |
| Total Cumulative Obligations  | \$600,000.00  |
| Total Cumulative Expenditures   | \$600,000.00  |
| Current Period Obligations  | \$0.00  |
| Current Period Expenditures   | \$200,000.00  |
| Project Description   | Funding to cover the partial costs of running the UGrad<br>Academy. Each of the new advocates is anticipated to serve<br>approximately 12-15 Delaware foster children each of the<br>three years. The current UGrad Advocates are each serving<br>an average of 14 foster children per year. UGrad Advocates<br>currently work with 14 foster children each, for an estimated<br>total of 126 Delaware foster children served between 2022<br>and 2024. |
| Does this project include a capital expenditure?  | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions                  | \$7,431.00  |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced | UGrad advocates working with Foster Children to improve education for students throughout the State.  |

| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19           | COVID-19 exacerbated the need for additional services to<br>be provided for foster children and education.                                     |
|---|--|
| National Center for Education Statistics ("NCES") School<br>ID or NCES District ID. List the School District if all<br>schools within the school district received some funds | 1000080, 1001241, 1000180, 1000190, 1000200, 1000230, 1000680, 1001080, 1000019, 1001280, 1000750, 1000005, 1001300, 1001530, 1001620, 1001680 |

## **Project Name: DOJ Domestic Violence Education and Awareness**

| 1  |
|--|
| 19189  |
| 1-Public Health  |
| 1.11-Community Violence Interventions  |
| Completed  |
| \$99,992.00  |
| \$99,992.00  |
| \$99,992.00  |
| \$0.00   |
| \$0.00   |
| DDOJ will work with domestic violence advocates to<br>identify an approved vendor to create professional quality<br>Public Service Announcements (PSAs) that will be<br>distributed through a multi-media ad campaign. This<br>one-time targeted campaign will cost \$100,000 and will<br>include developing and distributing the PSAs through a<br>multi-media ad campaign. |
| No   |
| \$0.00   |
| No   |
| 1 Imp General Public   |
| No   |
| The objective is to educate vulnerable population of DE that<br>might fall a victim of DV of the tools they have available to<br>report the DV and take the steps to recovery  |
| Projects were reviewed by the Delaware Department of<br>Justice to determine eligibility based on ARPA final rule<br>guidance.   |
|  |

## Project Name: OMB DSCYF Wharton Hall

| Project Identification Number   | 19177                       |
|---------------------------------|-----------------------------|
| Project Expenditure Category    | 1-Public Health             |
| Project Expenditure Subcategory | 1.12-Mental Health Services |
| Status To Completion            | Completed less than 50%     |
| Adopted Budget                  | \$16,000,000.00             |
|                                 |                             |

| Total Cumulative Obligations  | \$14,342,477.00  |
|---|--|
| Total Cumulative Expenditures   | \$1,890,908.47   |
| Current Period Obligations  | \$171,515.00   |
| Current Period Expenditures   | \$873,361.37   |
| Project Description   | Renovate Wharton Hall building to serve 75-100 youth each year in the new behavioral health facility.  |
| Does this project include a capital expenditure?  | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$16,000,000.00  |
| Type of capital expenditures, based on the following enumerated uses  | Behavioral health facilities and equipment   |
| Capital Expenditure Justification   | Funding will assist in the renovations of Wharton Hall. This building will be used to create a new 20-bed juvenile mental health center. The facility will serve 75-100 youth each year. |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00   |
| Is a program evaluation of the project being conducted?   | No   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Is a program evaluation of the project being conducted?   | No   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Renovation of Wharton Hall   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Will have programmatic data to support how the public is served and the number of residents served.  |
| Does the project prioritize local hires?  | Yes  |
| Does the project have a Community Benefit Agreement, with a description of any such agreement?  | No   |

# Project Name: Courts eFiling Case and Document Management

| Project Identification Number                    | 18214  |
|--|--|
| Project Expenditure Category                     | 1-Public Health  |
| Project Expenditure Subcategory                  | 1.14-Other Public Health Services  |
| Status To Completion                             | Completed less than 50%  |
| Adopted Budget                                   | \$14,887,000.00  |
| Total Cumulative Obligations                     | \$1,000,000.00   |
| Total Cumulative Expenditures                    | \$1,000,000.00   |
| Current Period Obligations                       | \$0.00   |
| Current Period Expenditures                      | \$68,751.29  |
| Project Description                              | Implementing efiling and case management solutions for all courts and case types |
| Does this project include a capital expenditure? | Yes  |

| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$14,887,000.00   |
|---|---|
| Type of capital expenditures, based on the following enumerated uses  | Technology infrastructure to adapt government operations  |
| Capital Expenditure Justification   | New eFiling system to provide case and document<br>management for Courts to enhance and modernize<br>processing capabilities which would allow for more remote<br>work in the event of pandemic-related closures. |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Reduce the backlog of cases caused by the pandemic by<br>implementing a comprehensive efiling case and document<br>management system  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Vendor will assist with implementation of efiling case and document management system   |
| Does the project prioritize local hires?  | No  |
| Does the project have a Community Benefit Agreement, with a description of any such agreement?  | No  |

## Project Name: Courts eCourtroom Upgrades Expansion

| Project Identification Number   | 18215  |
|---|--|
| Project Expenditure Category  | 1-Public Health  |
| Project Expenditure Subcategory   | 1.14-Other Public Health Services  |
| Status To Completion  | Completed 50% or more  |
| Adopted Budget  | \$5,000,000.00   |
| Total Cumulative Obligations  | \$4,995,263.81   |
| Total Cumulative Expenditures   | \$4,657,861.51   |
| Current Period Obligations  | \$429,051.80   |
| Current Period Expenditures   | \$756,215.46   |
| Project Description   | Upgrade high-tech courtrooms in each county  |
| Does this project include a capital expenditure?  | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$5,000,000.00   |
| Type of capital expenditures, based on the following enumerated uses  | Technology infrastructure to adapt government operations                                   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Holding Cell Upgrades and Expansion  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All project proposals are reviwed by the Delaware<br>Department of Justice for eligibility |

# **Project Name: Courts Online Instructions**

| Project Identification Number   | 18488   |
|---|---|
| Project Expenditure Category  | 1-Public Health   |
| Project Expenditure Subcategory   | 1.14-Other Public Health Services   |
| Status To Completion  | Completed less than 50%   |
| Adopted Budget  | \$455,000.00  |
| Total Cumulative Obligations  | \$254,516.55  |
| Total Cumulative Expenditures   | \$56,599.53   |
| Current Period Obligations  | \$8,912.00  |
| Current Period Expenditures   | \$8,912.00  |
| Project Description   | Improving online access to courts forms and instruction packets   |
| Does this project include a capital expenditure?  | No  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | ARPA request to facilitate improved online access to court<br>forms and court instruction. ARPA funding to improve<br>online access to its courts forms and court instruction<br>packets. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA projects are reviewed by the Delaware<br>Department of Justice for eligibility   |

## **Project Name: Courts Backlog Assistance**

| Project Identification Number                    | 18489  |
|--|--|
| Project Expenditure Category                     | 7-Administrative   |
| Project Expenditure Subcategory                  | 7.1-Administrative Expenses  |
| Status To Completion                             | Completed less than 50%  |
| Adopted Budget                                   | \$85,166.77  |
| Total Cumulative Obligations                     | \$85,166.77  |
| Total Cumulative Expenditures                    | \$41,999.77  |
| Current Period Obligations                       | \$0.00   |
| Current Period Expenditures                      | (\$43,167.00)  |
| Project Description                              | Resources to address court processing backlogs; overtime<br>for collection of fees and victim restitution; and IVR<br>technology for accepting payments and call volumes |
| Does this project include a capital expenditure? | No   |

# Project Name: DHSS DPH Lab

| Project Identification Number   | 18470                             |
|---------------------------------|-----------------------------------|
| Project Expenditure Category    | 1-Public Health                   |
| Project Expenditure Subcategory | 1.14-Other Public Health Services |
| Status To Completion            | Completed less than 50%           |
|                                 |                                   |

| Adopted Budget  | \$15,000,000.00   |
|---|---|
| Total Cumulative Obligations  | \$10,240,220.86   |
| Total Cumulative Expenditures   | \$335,490.92  |
| Current Period Obligations  | \$10,008,220.86   |
| Current Period Expenditures   | \$333,803.32  |
| Project Description   | Funding to support expansion of the new Division of Public<br>Health laboratory. Funds are sought to construct a second<br>floor above the new space to house teams from the<br>infectious disease prevention and control team. |
| Does this project include a capital expenditure?  | Yes   |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$15,000,000.00   |
| Type of capital expenditures, based on the following enumerated uses  | COVID-19 testing sites and laboratories, and acquisition of related equipment   |
| Capital Expenditure Justification   | To provide a new Department of Public Health lab to serve<br>the community and enhance capacity for future pandemic<br>resources.   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Public Health Lab rennovations and modernization  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All projects reviewed by Delaware DOJ for eligibility   |
| Does the project prioritize local hires?  | Yes   |
| Does the project have a Community Benefit Agreement, with a description of any such agreement?  | No  |

# Project Name: DHSS Health Data System

| Project Identification Number   | 18574  |
|---------------------------------|--|
| Project Expenditure Category    | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity  |
| Project Expenditure Subcategory | 3.4-Public Sector Capacity: Effective Service Delivery   |
| Status To Completion            | Completed less than 50%  |
| Adopted Budget                  | \$5,000,000.00   |
| Total Cumulative Obligations    | \$1,698,615.15   |
| Total Cumulative Expenditures   | \$1,272,782.15   |
| Current Period Obligations      | \$0.00   |
| Current Period Expenditures     | \$194,530.00   |
| Project Description             | "Funding to support the upgrade or replacement of existing<br>data systems within the Division of Public Health, Health<br>Systems Protection section. According to the division, this<br>upgrade would allow us to move away from paper-based<br>inspections and applications, which must be hand-entered to<br>electronic reporting and recordkeeping. Reductions in staff |

|   | time to improved efficiency and allow for more consistent<br>and timely communication with the public and regulated<br>community are the outcomes of this request. "   |
|---|--|
| Does this project include a capital expenditure?  | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$5,000,000.00   |
| Type of capital expenditures, based on the following enumerated uses  | Public health data systems   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | The program is meant to replace existing Environmental<br>Health data management systems with a complete<br>application that can manage permitting, inspection reporting,<br>and other needs, while also providing a public portal for<br>individuals to access information.   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | DPH hired Computer Aid Inc. as a consulting firm to find a better solution to our data collection system. Currently CAI is researching transfer systems used by other states and vendor solutions that can fulfill the need of DPH. The Analayis phase completion date is 6/30/2023. Design and deveploment will follow shortly after. |

# Project Name: DE NATL GUARD MOBILE BARRIERS

| Project Identification Number   | 18276  |
|---|--|
| Project Expenditure Category  | 1-Public Health  |
| Project Expenditure Subcategory   | 1.14-Other Public Health Services  |
| Status To Completion  | Completed  |
| Adopted Budget  | \$958,380.00   |
| Total Cumulative Obligations  | \$958,380.00   |
| Total Cumulative Expenditures   | \$958,380.00   |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | "Funding to purchase six mobile vehicular barriers (MVB)<br>packages with an estimated total cost of \$958,380. Delaware<br>National Guard indicates that it will utilize the systems as<br>part of its pandemic response package in order to protect the<br>providers and support staff located at the testing sites and<br>vaccination area. " |
| Does this project include a capital expenditure?  | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable                          | \$958,380.00   |
| Type of capital expenditures, based on the following enumerated uses  | COVID-19 testing sites and laboratories, and acquisition of related equipment  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?                           | 1 Imp General Public   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic | The barrier systems will be used on COVID-19 testing and vaccinations sites to increase the safety of public health and safety staff & DE citizens from vehicular assaults or  |

| impact experienced  | accidents.   |
|---|--|
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | The barrier systems will be used on COVID-19 testing and vaccinations sites to increase the safety of public health and safety staff & DE citizens from vehicular assaults or accidents. |

## Project Name: DOJ Technology Upgrade

| Project Identification Number   | 18508   |
|---|---|
|   |   |
| Project Expenditure Category  | 1-Public Health   |
| Project Expenditure Subcategory   | 1.14-Other Public Health Services   |
| Status To Completion  | Completed   |
| Adopted Budget  | \$329,970.00  |
| Total Cumulative Obligations  | \$329,970.00  |
| Total Cumulative Expenditures   | \$329,970.00  |
| Current Period Obligations  | \$0.00  |
| Current Period Expenditures   | \$0.00  |
| Project Description   | "Purchase of 200 laptops, docking stations and monitors to facilitate remote work capabilities. "   |
| Does this project include a capital expenditure?  | Yes   |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$330,000.00  |
| Type of capital expenditures, based on the following enumerated uses  | Technology and tools  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | The objective of the project is to ensure the ability of the DDOJ function remotely dealing with the challenges of the pandemic.  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | The ability of the majority of the DDOJ employees to work<br>remotely reduces the negative impact on the DDOJ's ability<br>to function during the pandemic by reducing the potential<br>Covid spread in the office. |

# Project Name: DOJ Website

| Project Identification Number   | 18547                             |
|---------------------------------|-----------------------------------|
| Project Expenditure Category    | 1-Public Health                   |
| Project Expenditure Subcategory | 1.14-Other Public Health Services |
| Status To Completion            | Completed 50% or more             |
| Adopted Budget                  | \$250,000.00                      |
| Total Cumulative Obligations    | \$14,878.00                       |
| Total Cumulative Expenditures   | \$14,878.00                       |
| Current Period Obligations      | \$0.00                            |
| Current Period Expenditures     | \$0.00                            |
|                                 |                                   |

| Project Description   | Funding to create versions of its current website that are<br>translated into a variety of different languages making it<br>more user-friendly for all people in the State.  |
|---|--|
| Does this project include a capital expenditure?  | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$250,000.00   |
| Type of capital expenditures, based on the following enumerated uses  | Technology and tools   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | ARPA funding to create versions of its current website that<br>are translated into a variety of different languages. It also<br>seeks funding to create a data portal that would offer<br>information about items related to DOJ¿s mission, though<br>not actual DDOJ initiatives. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All project proposals are submitted to the Delaware<br>Department of Justice for eligibility review. Projects are then<br>awarded based on specific needs within the State.  |

#### **Project Name: DOJ eSuites**

| Project Identification Number  | 18549  |
|--|--|
| Project Expenditure Category   | 1-Public Health  |
| Project Expenditure Subcategory  | 1.14-Other Public Health Services  |
| Status To Completion   | Not Started  |
| Adopted Budget   | \$300,000.00   |
| Total Cumulative Obligations   | \$260,000.00   |
| Total Cumulative Expenditures  | \$0.00   |
| Current Period Obligations   | \$260,000.00   |
| Current Period Expenditures  | \$0.00   |
| Project Description  | Funding to build upon and further develop DOJs Case<br>Management System (CMS). Funding will create new and<br>expansive CMS that will allow for entire legal files to be<br>created and maintained in an electronic format. |
| Does this project include a capital expenditure?   | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable | \$300,000.00   |
| Type of capital expenditures, based on the following enumerated uses                           | Technology and tools   |

## Project Name: DHSS AFFORDABLE CARE ACT MARKETPLACE

| ic Health                   |
|-----------------------------|
|                             |
| ther Public Health Services |
| eted 50% or more            |
| 0.00                        |
| e                           |

| Total Cumulative Obligations  | \$32,211.47  |
|---|--|
| Total Cumulative Expenditures   | \$32,211.47  |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | "Funding to support outreach and marketing of the<br>Affordable Care Act marketplace, particularly to individuals<br>in low-income zip codes throughout the state. Marketing and<br>outreach costs are estimated at \$50,000 for the 2021-2022<br>open enrollment period." |
| Does this project include a capital expenditure?  | No   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 2 Imp Low or moderate income HHs or populations  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Marketing and outreach for the Health Insurance<br>Marketplace will target disproportionately impacted<br>communities utilizing culturally appropriate material  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Public communication as part of supporting public health<br>response and serving the hardest hit families and<br>communities is in accordance with ARPA guidelines   |

# Project Name: DHSS Youth Risk Behavior Surveillance System

| Project Identification Number   | 18362   |
|---|---|
| Project Expenditure Category  | 1-Public Health   |
| Project Expenditure Subcategory   | 1.14-Other Public Health Services   |
| Status To Completion  | Completed 50% or more   |
| Adopted Budget  | \$576,000.00  |
| Total Cumulative Obligations  | \$576,000.00  |
| Total Cumulative Expenditures   | \$433,165.00  |
| Current Period Obligations  | \$0.00  |
| Current Period Expenditures   | \$80,687.51   |
| Project Description   | "Funding to support marketing of and incentives for the<br>Youth Risk Behavior Surveillance System (YRBS).<br>Marketing and incentive costs are estimated at \$576,000.<br>YRBS is a survey conducted in conjunction with the CDC.<br>The CDC selects 40 schools in the state of Delaware to be<br>surveyed." |
| Does this project include a capital expenditure?  | No  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced | Understand public health or economic impacts of COVID-19<br>through collection of data from CDC YRBS and BRFS<br>surveys. Funding will be used to increase participation in<br>each of these surveys by incentivizing participation and<br>development of educational materials about the surveys.            |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or                   | Collect data on Delaware citizens through the CDC YRBS<br>and BRFS surveys that provide information that informs of<br>both public health and negative economic impacts of<br>COVID-19, and then be used in the development of  |

# Project Name: DELAWARE HOSPITAL RELIEF FUND

| Project Identification Number   | 18205   |
|---|---|
| Project Expenditure Category  | 1-Public Health   |
| Project Expenditure Subcategory   | 1.10-COVID-19 Aid to Impacted Industries  |
| Status To Completion  | Completed 50% or more   |
| Adopted Budget  | \$24,904,166.65   |
| Total Cumulative Obligations  | \$24,904,166.65   |
| Total Cumulative Expenditures   | \$24,904,166.65   |
| Current Period Obligations  | \$0.00  |
| Current Period Expenditures   | \$0.00  |
| Project Description   | Funding for hospitals to pay for extraordinary and<br>unbudgeted workforce costs. Delaware Healthcare<br>Association (DHA) reports that increased patient load couple<br>with staff burn-out and exit of nurses and other front-line<br>care givers from acute care and other facility settings has led<br>to a dramatic undersupply of care givers in Delaware and<br>that the resulting local supply-demand imbalance has led to<br>significant cost increases to retain and attract needed<br>personnel. |
| Does this project include a capital expenditure?  | No  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | to provide payments to local healthcare facilities in order to<br>retain employees and provide coverage of staff shortages<br>due to COVID-19   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | will conduct compliance checks to ensure funds went to<br>retaining employees and coverage of staff shortages due to<br>COVID-19  |

#### Project Name: DELAWARE HEALTHCARE FACILITIES FUND

| Project Identification Number   | 18206   |
|---------------------------------|---|
| Project Expenditure Category    | 1-Public Health   |
| Project Expenditure Subcategory | 1.10-COVID-19 Aid to Impacted Industries  |
| Status To Completion            | Completed 50% or more   |
| Adopted Budget                  | \$24,920,819.00   |
| Total Cumulative Obligations    | \$24,920,819.00   |
| Total Cumulative Expenditures   | \$24,920,819.00   |
| Current Period Obligations      | \$0.00  |
| Current Period Expenditures     | \$0.00  |
| Project Description             | "Funds for workforce stabilization to include training,<br>retention, hazard pay, shift differentials, and other strategies<br>to support required staffing levels. " |

| Does this project include a capital expenditure?  | No   |
|---|--|
| What Impacted and/or Disproportionally Impacted population does this project primarily serve? | 1 Imp General Public   |
| Brief description of structure and objectives of assistance                                   | to provide payments to local healthcare facilities in order to |
| program(s), including public health or negative economic                                      | retain employees and provide coverage of staff shortages       |
| impact experienced  | due to COVID-19  |
| Brief description of recipient's approach to ensuring that                                    | will conduct compliance checks to ensure funds went to         |
| response is reasonable and proportional to a public health or                                 | retaining employees and coverage of staff shortages due to     |
| negative economic impact of Covid-19  | COVID-19   |

# Project Name: OGOV RODEL Career Pathways 2.0

| Project Identification Number  | 18437  |
|--|--|
| Project Expenditure Category   | 2-Negative Economic Impacts  |
| Project Expenditure Subcategory  | 2.10-Assistance to Unemployed or Underemployed Workers<br>(e.g. job training, subsidized employment, employment<br>supports or incentives)   |
| Status To Completion   | Completed less than 50%  |
| Adopted Budget   | \$7,300,000.00   |
| Total Cumulative Obligations   | \$7,300,000.00   |
| Total Cumulative Expenditures  | \$5,000,000.00   |
| Current Period Obligations   | \$0.00   |
| Current Period Expenditures  | \$2,500,000.00   |
| Project Description  | Career Pathways in Delaware have been building for the<br>better part of a decade. But over the past three years, through<br>the joint efforts of many partners including the Delaware<br>Department of Education (DOE), Delaware Technical<br>College Community (DTCC), Delaware Business<br>Roundtable, Delaware Business Roundtable Education<br>Committee (DBREC), the Delaware State Chamber of<br>Commerce, Delaware Workforce Development Board<br>(DWDB), district and charter schools, Rodel, and national<br>funders, we have made significant progress. To build on<br>what works and prompt the next wave of innovation our<br>project comprises three key strategies that build on our<br>Phase I work: 1) Go deeper on pathways, 2) Strengthen<br>employer co-ownership of talent pipelines, and 3) Invest in<br>innovation and scale. |
| Does this project include a capital expenditure?   | No   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions | \$2,500,000.00   |
| Is a program evaluation of the project being conducted?  | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?                                | 1 Imp General Public   |
| Is a program evaluation of the project being conducted?  | Yes  |
| Brief description of structure and objectives of assistance program(s), including public health or negative economic         | Focus on new skill, upskill, and reskill development<br>beginning from middle grades through workforce   |

| impact experienced  | development programs across Delaware through creating a seamless system between our K-12, higher education, and workforce development offices at the state level.  |
|---|--|
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | By focusing on students in career pathways in the public<br>school system and our community college system, both of<br>which have a majority minority enrollment, the project<br>reasonably targets a population experiencing negative<br>economic impact. |

## Project Name: OGOV DE Sustainable Energy

| Project Identification Number   | 18448   |
|---|---|
| Project Expenditure Category  | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory   | 2.22-Strong Healthy Communities: Neighborhood Features that Promote Health and Safety   |
| Status To Completion  | Completed 50% or more   |
| Adopted Budget  | \$2,500,000.00  |
| Program Income Earned   | \$1,153,821.78  |
| Program Income Expended   | \$1,153,821.78  |
| Total Cumulative Obligations  | \$2,500,000.00  |
| Total Cumulative Expenditures   | \$2,500,000.00  |
| Current Period Obligations  | \$0.00  |
| Current Period Expenditures   | \$0.00  |
| Project Description   | Call Center to manage inquiries (1) Health and Safety Needs<br>(2) Education and enrollment in Household<br>assistance-Internet Access programs. Train and deploy<br>safety ambassadors in communities. Energy and safety<br>assessments for small business serving LMI communities.<br>Train and deploy health ambassadors to do healthy home<br>assessments. Education and assistance to Civic and home<br>owner associations. Provide repair and mitigation for health<br>and safety in identified homes. Prepare to collect data on<br>interventions. |
| Does this project include a capital expenditure?  | No  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 2 Imp Low or moderate income HHs or populations   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Public Health Assessment and Safety of Homes in LMI homes and populations adversely affected by Covid-19.   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Track outreach and education. Streamline intake process.<br>Integrate analysis and management tools to expand services.<br>Align services with other agencies.  |

#### Project Name: DOL WORKFORCE DEVELOPMENT INITIATIVE

| Project Identification Number   | 18050   |
|---------------------------------|---|
| Project Expenditure Category    | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory | 2.10-Assistance to Unemployed or Underemployed Workers<br>(e.g. job training, subsidized employment, employment |

|   | supports or incentives)  |
|---|--|
| Status To Completion  | Completed  |
| Adopted Budget  | \$2,127,469.87   |
| Total Cumulative Obligations  | \$2,127,469.87   |
| Total Cumulative Expenditures   | \$2,127,469.87   |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | Forward Delaware extension workforce development<br>training and supportive services for unemployed and<br>underemployed as a result of the negative economic impacts<br>of COVID on the economy in the State. |
| Does this project include a capital expenditure?  | No   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00   |
| Is a program evaluation of the project being conducted?   | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | develop the workforce in Delaware  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Provide workforce development to assist with bringing back jobs after the COVID-19 pandemic.   |

# Project Name: OGOV Zip Code Wilmington

| Project Identification Number   | 18444   |
|---------------------------------|---|
| Project Expenditure Category    | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory | 2.10-Assistance to Unemployed or Underemployed Workers<br>(e.g. job training, subsidized employment, employment<br>supports or incentives)                                |
| Status To Completion            | Completed less than 50%   |
| Adopted Budget                  | \$4,500,000.00  |
| Program Income Earned           | \$763,980.00  |
| Program Income Expended         | \$763,980.00  |
| Total Cumulative Obligations    | \$1,500,000.00  |
| Total Cumulative Expenditures   | \$1,500,000.00  |
| Current Period Obligations      | \$0.00  |
| Current Period Expenditures     | \$0.00  |
|                                 | Funding for a one-time grant to provide scholarschips and<br>stipends for approximately 75 low-income Delaware<br>residents per year over a three-year period who will be |
| Project Description             |   |

|   | admitted to its immersive 12-week software programming<br>training for workforce development technology training<br>purposes.  |
|---|--|
| Does this project include a capital expenditure?  | No   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00   |
| Is a program evaluation of the project being conducted?   | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 2 Imp Low or moderate income HHs or populations  |
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | The project is proposed under a "Pay for Success" model<br>that provides financial support for low- to middle-income<br>Delaware residents transitioning from minimum wage jobs,<br>underemployment, or unemployment into good paying tech<br>careers. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Zip Code Wilmington will identify Delaware-resident<br>applicants who qualify for full training scholarships and<br>bi-weekly stipends. Graduates receive job placement<br>assistance with local companies including corporate hiring<br>partners.     |

# Project Name: OGOV Delaware Restaurant Association

| Project Identification Number  | 18446   |
|--|---|
| Project Expenditure Category   | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory  | 2.10-Assistance to Unemployed or Underemployed Workers<br>(e.g. job training, subsidized employment, employment<br>supports or incentives)  |
| Status To Completion   | Completed 50% or more   |
| Adopted Budget   | \$900,000.00  |
| Total Cumulative Obligations   | \$900,000.00  |
| Total Cumulative Expenditures  | \$900,000.00  |
| Current Period Obligations   | \$0.00  |
| Current Period Expenditures  | \$0.00  |
| Project Description  | Funding to provide workforce development training and<br>other supportive services. The restaurant and hospitality<br>industries have been significantly negatively impacted as a<br>result of the economic effects that the COVID-19 pandemic<br>had on the economy of the State and those industries in<br>particular. DRA and its philathropic educational foundation<br>(DRAEF) seek to provide natinally recognized curriculum<br>and workforce development management and offer career<br>advancement for Delaware's restaurant and hospitality<br>workforce. |
| Does this project include a capital expenditure?   | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions | \$259,926.10  |

| Is a program evaluation of the project being conducted?   | Yes   |
|---|---|
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 12 Imp Travel tourism or hospitality sectors  |
| Secondary Impacted and/or Disproportionately Impacted populations   | 20 Dis Imp Other HHs or populations that experienced a disproportionate   |
| Tertiary Impacted and/or Disproportionately Impacted populations  | 1 Imp General Public  |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | 6,000+ hospitality jobs remain open in DE. Pre-pandemic<br>hospitality workforce was 53,000+ (1 in 10). Our mission is<br>to create pathways for under/unemployed or low-skilled<br>workers to jobs with strong earning potential and<br>advancement opportunities. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Offering online certifications for those entering or upskilling (includes minority, underserved and disability populations), expanding the H.O.P.E.S. reentry pilot program, and building a virtual platform for industry job/career/resource expos.                |

## Project Name: OGOV Legal Counsel for NEUs

| Project Identification Number                    | 18436  |
|--|--|
| Project Expenditure Category                     | 7-Administrative   |
| Project Expenditure Subcategory                  | 7.1-Administrative Expenses  |
| Status To Completion                             | Cancelled  |
| Adopted Budget                                   | \$0.00   |
| Total Cumulative Obligations                     | \$0.00   |
| Total Cumulative Expenditures                    | \$0.00   |
| Current Period Obligations                       | \$0.00   |
| Current Period Expenditures                      | \$0.00   |
| Project Description                              | Funding for non-entitlement units (NEU) legal counsel to<br>assist with eligibility determinations and monthly reporting<br>obligations for ARPA expenditures. NEUs will refund the<br>State for these expenses at a later date. |
| Does this project include a capital expenditure? | No   |

## Project Name: DOF Admin & Oversight Personnel

| Project Identification Number   | 18475                       |
|---------------------------------|-----------------------------|
| Project Expenditure Category    | 7-Administrative            |
| Project Expenditure Subcategory | 7.1-Administrative Expenses |
| Status To Completion            | Completed                   |
| Adopted Budget                  | \$278,143.55                |
| Total Cumulative Obligations    | \$278,143.55                |
| Total Cumulative Expenditures   | \$278,143.55                |
| Current Period Obligations      | \$32,401.25                 |
|                                 |                             |

| Current Period Expenditures                      | \$32,401.25   |
|--|---|
| Project Description                              | Funding for dual incumbency positions to administer ARPA SLFRF funding. |
| Does this project include a capital expenditure? | No  |

#### Project Name: OMB Admin & Oversight Personnel

| Project Identification Number                    | 18480   |
|--|---|
| Project Expenditure Category                     | 7-Administrative  |
| Project Expenditure Subcategory                  | 7.1-Administrative Expenses   |
| Status To Completion                             | Completed   |
| Adopted Budget                                   | \$101,200.99  |
| Total Cumulative Obligations                     | \$101,200.99  |
| Total Cumulative Expenditures                    | \$101,200.99  |
| Current Period Obligations                       | \$15,513.16   |
| Current Period Expenditures                      | \$15,513.16   |
| Project Description                              | Funding for dual incumbency positions to administer ARPA SLFRF funding. |
| Does this project include a capital expenditure? | No  |

#### Project Name: OMB Admin & Oversight Personnel

| Project Identification Number                    | 18481   |
|--|---|
| Project Expenditure Category                     | 7-Administrative  |
| Project Expenditure Subcategory                  | 7.1-Administrative Expenses   |
| Status To Completion                             | Completed   |
| Adopted Budget                                   | \$397,827.42  |
| Total Cumulative Obligations                     | \$397,827.42  |
| Total Cumulative Expenditures                    | \$397,827.42  |
| Current Period Obligations                       | \$32,977.36   |
| Current Period Expenditures                      | \$32,977.36   |
| Project Description                              | Funding for dual incumbency positions to administer ARPA SLFRF funding. |
| Does this project include a capital expenditure? | No  |

#### **Project Name: DEMA Emergency Operations Center Upgrades**

| Project Identification Number   | 18015                             |
|---------------------------------|-----------------------------------|
| Project Expenditure Category    | 1-Public Health                   |
| Project Expenditure Subcategory | 1.14-Other Public Health Services |
| Status To Completion            | Completed less than 50%           |
| Adopted Budget                  | \$2,050,000.00                    |
| Total Cumulative Obligations    | \$1,302,995.14                    |
|                                 |                                   |

| Total Cumulative Expenditures   | \$1,264,605.14  |
|---|---|
| Current Period Obligations  | \$48,337.14   |
| Current Period Expenditures   | \$811,744.28  |
| Project Description   | DEMA coordinates and responds to emergencies, including<br>to public health emergencies as the designated public safety<br>authority. This project will modify the State's Emergency<br>Operations Center to update and configure capabilities for<br>improved pandemic response. There will be physical capital<br>improvements made to this facility. |
| Does this project include a capital expenditure?  | Yes   |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$2,000,000.00  |
| Type of capital expenditures, based on the following enumerated uses  | Emergency operations centers and acquisition of emergency response equipment  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Modify the State's Emergency Operations Center.   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | will provide better services through the emergency management agency  |

# Project Name: DEMA Mobile Emergency Command Vehicle

| Project Identification Number  | 18016  |
|--|--|
| Project Expenditure Category   | 1-Public Health  |
| Project Expenditure Subcategory  | 1.14-Other Public Health Services  |
| Status To Completion   | Not Started  |
| Adopted Budget   | \$500,000.00   |
| Total Cumulative Obligations   | \$0.00   |
| Total Cumulative Expenditures  | \$0.00   |
| Current Period Obligations   | \$0.00   |
| Current Period Expenditures  | \$0.00   |
| Project Description  | DEMA Mobile Emergency Operations Center vehicles to be<br>used as a mobile emergency operations center and disaster<br>recovery center for impacted survivors of a pandemic,<br>natural, or man-made disaster. The vehicle would also offer<br>local broadband access for communications to the<br>community as part of the recovery process for any<br>emergency. |
| Does this project include a capital expenditure?   | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable | \$1,000,000.00   |
| Type of capital expenditures, based on the following enumerated uses                           | Emergency operations centers and acquisition of emergency response equipment   |

# Project Name: DEMA COVID Testing Program

| Project Identification Number   | 17949  |
|---|--|
| Project Expenditure Category  | 1-Public Health  |
| Project Expenditure Subcategory   | 1.2-COVID-19 Testing   |
| Status To Completion  | Completed  |
| Adopted Budget  | \$27,599,668.00  |
| Total Cumulative Obligations  | \$27,599,668.00  |
| Total Cumulative Expenditures   | \$27,599,668.00  |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | DEMA COVID Testing program to procure and distribute<br>COVID test kits. This program will deliver test kits<br>throughout the state and provide testing at various sites<br>during the COVID-19 pandemic. |
| Does this project include a capital expenditure?  | No   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Provide COVID test kits to support public Health   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Delaware's COVID-19 testing results.   |

# Project Name: DSP Mobile Command Unit Vehicle

| Project Identification Number  | 18014  |
|--|--|
| Project Expenditure Category   | 1-Public Health  |
| Project Expenditure Subcategory  | 1.11-Community Violence Interventions  |
| Status To Completion   | Completed 50% or more  |
| Adopted Budget   | \$2,250,000.00   |
| Total Cumulative Obligations   | \$2,208,011.05   |
| Total Cumulative Expenditures  | \$2,169,464.32   |
| Current Period Obligations   | \$41,830.48  |
| Current Period Expenditures  | \$2,076,665.75   |
| Project Description  | Purchase and customization of a Mobile Command Vehicle<br>to provide command and control during critical incidents<br>and public events including COVID-19 related events. |
| Does this project include a capital expenditure?   | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable                               | \$2,250,000.00   |
| Type of capital expenditures, based on the following enumerated uses   | Emergency operations centers and acquisition of emergency response equipment   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions | \$0.00   |

| Is a program evaluation of the project being conducted?   | Yes  |
|---|--|
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public                                     |
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Hardware to support emergency communications operations. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Enhancement of State's 911 Centers capabilities.         |

# **Project Name: DOC Ventilation Chillers**

| Project Identification Number   | 18013  |
|---|--|
| Project Expenditure Category  | 1-Public Health  |
| Project Expenditure Subcategory   | 1.14-Other Public Health Services  |
| Status To Completion  | Cancelled  |
| Adopted Budget  | \$0.00   |
| Total Cumulative Obligations  | \$0.00   |
| Total Cumulative Expenditures   | \$0.00   |
| Current Period Obligations  |  |
| Current Period Expenditures   |  |
| Project Description   | Replacement of ventilation chillers at all DOC facilities to<br>support COVID-19 mitigation efforts and to support public<br>health in key settings such as correctional facilities. |
| Does this project include a capital expenditure?  | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$3,600,000.00   |
| Type of capital expenditures, based on the following enumerated uses  | Installation and improvement of ventilation systems  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Provide improved ventilation to DOC Inmate Population  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Needed for improvement of general public   |

# Project Name: OMB HVAC Upgrades

| 18551                             |
|-----------------------------------|
| 1-Public Health                   |
| 1.14-Other Public Health Services |
| Cancelled                         |
| \$0.00                            |
|                                   |

| Total Cumulative Obligations  | \$0.00  |
|---|---|
| Total Cumulative Expenditures   | \$0.00  |
| Current Period Obligations  |   |
| Current Period Expenditures   |   |
| Project Description   | Funding for two Office of Management and Budget projects<br>for Heating, Ventilation, and Air Conditioning (HVAC)<br>upgrades and/or replacements in the Carvel State Building<br>and the Jesse Cooper Building, both State facilities. OMB<br>anticipates the cost of the two HVAC improvements to be in<br>the range of \$10 million. |
| Does this project include a capital expenditure?  | Yes   |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$0.00  |
| Type of capital expenditures, based on the following enumerated uses  | Installation and improvement of ventilation systems   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Upgrade HVAC systems in State facilities to provide better<br>air quality for staff and visitors.   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Upgrade HVAC units to provide better airflow in State facilities as the current systems were substandard and made apparent during the COVID-19 pandemic.  |

# Project Name: Courts Holding Cell Upgrades

| Project Identification Number   | 18490   |
|---|---|
| Project Expenditure Category  | 1-Public Health   |
| Project Expenditure Subcategory   | 1.14-Other Public Health Services   |
| Status To Completion  | Completed less than 50%   |
| Adopted Budget  | \$2,626,572.00  |
| Total Cumulative Obligations  | \$2,126,572.00  |
| Total Cumulative Expenditures   | \$216,721.60  |
| Current Period Obligations  | \$1,855,170.00  |
| Current Period Expenditures   | \$32,508.24   |
| Project Description   | Funding to construct a replacement holding cell water closet<br>and lavatory within the Leonard L. Williams Justice Center. |
| Does this project include a capital expenditure?  | Yes   |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$2,626,572.00  |
| Type of capital expenditures, based on the following enumerated uses  | Improvements to existing facilities   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced | Provide improved holding cells at Leonard L Williams<br>Justice Center (LLWJC)  |

| L   |                            |  |
|---|----------------------------|--|
| Brief description of recipient's appr<br>response is reasonable and proportion<br>negative economic impact of Covid | onal to a public health or | Needed improvement for the holding cells to support due to COVID-19. |

#### Project Name: OMB DHCI Project

| Project Identification Number   | 18396  |
|---|--|
| Project Expenditure Category  | 1-Public Health  |
| Project Expenditure Subcategory   | 1.14-Other Public Health Services  |
| Status To Completion  | Completed less than 50%  |
| Adopted Budget  | \$50,000,000.00  |
| Total Cumulative Obligations  | \$4,876,624.50   |
| Total Cumulative Expenditures   | \$2,770,729.55   |
| Current Period Obligations  | \$343,950.50   |
| Current Period Expenditures   | \$828,799.52   |
| Project Description   | Funding for the renovation and construction of a new<br>Delaware Hospital for the Chronically Ill (DHCI) in Smyrna,<br>Delaware.   |
| Does this project include a capital expenditure?  | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$50,000,000.00  |
| Type of capital expenditures, based on the following enumerated uses  | Medical equipment and facilities   |
| Capital Expenditure Justification   | New Skilled nursing facility to replace previous structure<br>built in the 1930's. New structure will have more zero<br>pressure rooms, more spacing, better donning and doffing<br>areas and other 'in-compliance' means to deter viral spread. |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Provide updated facility to chronically ill patients   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Needed for improvement of general public   |
| Does the project prioritize local hires?  | Yes  |
| Does the project have a Community Benefit Agreement, with a description of any such agreement?  | No   |

#### **Project Name: OMB Food Warehouse**

| Project Identification Number   | 18541                             |
|---------------------------------|-----------------------------------|
| Project Expenditure Category    | 1-Public Health                   |
| Project Expenditure Subcategory | 1.14-Other Public Health Services |
| Status To Completion            | Completed less than 50%           |
| Adopted Budget                  | \$10,000,000.00                   |
|                                 |                                   |

| Total Cumulative Obligations  | \$9,980,066.43  |
|---|---|
| Total Cumulative Expenditures   | \$562,220.00  |
| Current Period Obligations  | \$9,258,916.43  |
| Current Period Expenditures   | \$30,470.00   |
| Project Description   | Funding for new construction of a dry, cold, and frozen food<br>warehouse, including space for program administration. This<br>will allow the centralization and expansion of the programs<br>capacity. Operationally, the program will be able to expand<br>its cold storage allowing for more perishable foods to be<br>received. In addition, the new location will make for a more<br>centralized distribution center.  |
| Does this project include a capital expenditure?  | Yes   |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$10,000,000.00   |
| Type of capital expenditures, based on the following enumerated uses  | Food banks and other facilities   |
| Capital Expenditure Justification   | A relocated and improved facility provides central access for<br>food distribution throughout the state, including the south of<br>the C&D canal which includes the fastest growing<br>population centers. The existing warehouse is a decades old<br>facility which is outdated and inefficient and relies on<br>equipment where replacement parts may need to be custom<br>manufactured. Further, the existing food warehouse sits in a<br>flood plain but within a redevelopment district. Moving<br>south below the canal, centralizes operations and serves as<br>an emergency feeding location on the Delmarva peninsula. |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Provide updated warehouse to distribute food throughout Delaware.   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Needed to provide additional services to the general public.  |
| Does the project prioritize local hires?  | Yes   |
| Does the project have a Community Benefit Agreement,<br>with a description of any such agreement?   | No  |

# Project Name: DNREC Lab

| Project Identification Number   | 18550                             |
|---------------------------------|-----------------------------------|
| Project Expenditure Category    | 1-Public Health                   |
| Project Expenditure Subcategory | 1.14-Other Public Health Services |
| Status To Completion            | Completed less than 50%           |
| Adopted Budget                  | \$27,270,000.00                   |
| Total Cumulative Obligations    | \$1,892,732.50                    |
| Total Cumulative Expenditures   | \$1,177,390.00                    |
| Current Period Obligations      | \$0.00                            |
|                                 |                                   |

| Current Period Expenditures   | \$378,220.00   |
|---|--|
| Project Description   | Funding to support construction of a new DNREC laboratory building.  |
| Does this project include a capital expenditure?  | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable  | \$27,270,000.00  |
| Type of capital expenditures, based on the following enumerated uses  | COVID-19 testing sites and laboratories, and acquisition of related equipment  |
| Capital Expenditure Justification   | COVID-19 alerted our State to the need for expanding,<br>coordinating, and integrating laboratory systems and<br>services by restructuring laboratory areas and workflows. In<br>this process it became clear that the current laboratory<br>building is inadequate nor appropriate for personnel and new<br>technolologies, In fact, the current laboratory is housed<br>within an old, adapted, canning factory (Richardson &<br>Robbibns building, Dover). If the Sate intends to continue to<br>support and protect Delaware citizens effectively, a new<br>laboratory is necessary that can support the work of expert<br>personnel (chemists, biologists, microbiologists, molecular<br>scientists, field personnel, administrative staff, etc.) and<br>newer, more effective technolgies with adequate space and<br>infrastructure systems (clean rooms, etc.). This will<br>signifcantly enghance the effectives of work and programs<br>when dealing with pandemics, outbreaks and emergencies<br>that can have human and environmental health impacts.<br>Beyond this, the proximity between the new DNREC<br>laboratory and teh new DPH laboratory allows the State to<br>benefit from the cross suppot that can happen among<br>technical experts as well as materials and supplies when<br>critical situations, such as a apandemic, ocurr. |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Provide updated facility for DNREC laboratory to conduct testing and research.   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Provide research and testing to mitigate COVID and other potential diseases.   |
| Does the project prioritize local hires?  | Yes  |
| Does the project have a Community Benefit Agreement, with a description of any such agreement?  | No   |

# Project Name: Judicial Branch COVID Testing Program

| Project Identification Number   | 18017                |
|---------------------------------|----------------------|
| Project Expenditure Category    | 1-Public Health      |
| Project Expenditure Subcategory | 1.2-COVID-19 Testing |
| Status To Completion            | Cancelled            |
| Adopted Budget                  | \$0.00               |
| Total Cumulative Obligations    | \$0.00               |
| Total Cumulative Expenditures   | \$0.00               |

| Current Period Obligations  |  |
|---|--|
| Current Period Expenditures   |  |
| Project Description   | Providing COVID-19 testing to unvaccinated employees within the Judicial Branch in all three counties in Delaware. |
| Does this project include a capital expenditure?  | No   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Reduce the spread of COVID-19 by testing unvaccinated employees before entering the courthouses                    |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Vendor will provide staff and testing kits to administer to court employees  |

# Project Name: DelDOT CDL Training

| Project Identification Number   | 18298  |
|---|--|
| Project Expenditure Category  | 2-Negative Economic Impacts  |
| Project Expenditure Subcategory   | 2.10-Assistance to Unemployed or Underemployed Workers<br>(e.g. job training, subsidized employment, employment<br>supports or incentives)         |
| Status To Completion  | Completed less than 50%  |
| Adopted Budget  | \$240,000.00   |
| Total Cumulative Obligations  | \$238,000.00   |
| Total Cumulative Expenditures   | \$237,250.00   |
| Current Period Obligations  | (\$3,000.00)   |
| Current Period Expenditures   | \$750.00   |
| Project Description   | Training and development for classifed drivers that meet certain qualifications  |
| Does this project include a capital expenditure?  | No   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00   |
| Is a program evaluation of the project being conducted?   | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Provide driver training courses for classified drivers to<br>promote the workforce in Delaware which was hard hit due<br>to the COVID-19 pandemic. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Will retain number of indivduals that complete the program<br>and obtain CDL licenses  |

# Project Name: DelDOT Keep DE Litter Free

| Project Identification Number | 18300 |
|-------------------------------|-------|
|                               | 1     |

| Project Expenditure Category  | 1-Public Health  |
|---|--|
| Project Expenditure Subcategory   | 1.7-Other COVID-19 Public Health Expenses (including<br>Communications, Enforcement, Isolation/Quarantine) |
| Status To Completion  | Completed  |
| Adopted Budget  | \$228,662.70   |
| Total Cumulative Obligations  | \$228,662.70   |
| Total Cumulative Expenditures   | \$228,662.70   |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | Clean-up of Delaware's Highways and other transportation areas   |
| Does this project include a capital expenditure?  | No   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Provide services to cleanup Delaware's highways to make a more safe and healthy Delaware                   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Will review cleanup areas  |

# Project Name: DelDOT Western Sussex NSTI

| Project Identification Number   | 18299   |
|---------------------------------|---|
| Project Expenditure Category    | 2-Negative Economic Impacts   |
| Project Expenditure Subcategory | 2.10-Assistance to Unemployed or Underemployed Workers<br>(e.g. job training, subsidized employment, employment<br>supports or incentives)  |
| Status To Completion            | Completed less than 50%   |
| Adopted Budget                  | \$210,000.00  |
| Total Cumulative Obligations    | \$80,000.00   |
| Total Cumulative Expenditures   | \$60,952.42   |
| Current Period Obligations      | \$0.00  |
| Current Period Expenditures     | \$0.00  |
| Project Description             | The National Summer Transportation Institute (NSTI) is an<br>intensive summer program that seeks to aid in developing a<br>diverse and robust workforce for the transportation industry<br>by exposing students to transportation careers. The Western<br>Sussex Summer Transportation Institute seeks to create<br>awareness and stimulate interest among high school students<br>on the western part of Sussex County of Delaware including:<br>Delmar, Dagsboro, Milford, Seaford, Laurel and<br>Georgetown, about the vast transportation and science,<br>technology, mathematics and engineering (STEM) related<br>careers available. It provides them with the opportunities to<br>explore many exciting fields in the Transportation and<br>STEM Industry through field trips and hands on activities<br>during the four week program. |

| Does this project include a capital expenditure?  | No  |
|---|---|
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00  |
| Is a program evaluation of the project being conducted?   | Yes   |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Secondary Impacted and/or Disproportionately Impacted populations   | 2 Imp Low or moderate income HHs or populations   |
| Tertiary Impacted and/or Disproportionately Impacted populations  | 3 Imp HHs that experienced unemployment   |
| Is a program evaluation of the project being conducted?   | Yes   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | The National Summer Transportation Institute (NSTI) is an intensive summer program that seeks to aid in developing a diverse and robust workforce for the transportation industry by exposing students to transportation careers. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA projects are reviewed by Delaware DOJ for eligibility.   |

# Project Name: DelDOT Workforce Development

| Project Identification Number  | 18048  |
|--|--|
| Project Expenditure Category   | 2-Negative Economic Impacts  |
| Project Expenditure Subcategory  | 2.10-Assistance to Unemployed or Underemployed Workers<br>(e.g. job training, subsidized employment, employment<br>supports or incentives)   |
| Status To Completion   | Completed less than 50%  |
| Adopted Budget   | \$600,000.00   |
| Total Cumulative Obligations   | \$24,823.00  |
| Total Cumulative Expenditures  | \$24,823.00  |
| Current Period Obligations   | \$13,173.00  |
| Current Period Expenditures  | \$13,173.00  |
| Project Description  | DelDOT workforce development program to offer trainings<br>through the DelDOT Workforce Development Academy<br>(WDA) that would be administered by an accredited<br>organization(s) identified by DelDOT to increase the<br>participation of women, minorities, and disadvantaged<br>persons in job classifications in the highway construction<br>industry. |
| Does this project include a capital expenditure?   | No   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions | \$0.00   |
| Is a program evaluation of the project being conducted?  | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?                                | 2 Imp Low or moderate income HHs or populations  |
| Secondary Impacted and/or Disproportionately Impacted  |  |

| populations   | 3 Imp HHs that experienced unemployment  |
|---|--|
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | DelDOT workforce development program to offer trainings<br>through the DelDOT Workforce Development Academy<br>$({}_{i}WDA_{i})$ that would be administered by an accredited<br>organization(s) identified by DelDOT to increase the<br>participation of women, minorities, and disadvantaged<br>persons in job classifications in the highway construction<br>industry. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | All ARPA projects are reviewed by Delaware DOJ for<br>eligibility. DelDOT Workforce Development Academy<br>administered by an accredited organization(s) identified by<br>DelDOT to increase the participation of women, minorities,<br>and disadvantaged persons in job classifications in the<br>highway construction industry.  |

# Project Name: DPH POINT OF CARE RAPID TESTING

|   | 1   |
|---|---|
| Project Identification Number   | 17998   |
| Project Expenditure Category  | 1-Public Health   |
| Project Expenditure Subcategory   | 1.2-COVID-19 Testing  |
| Status To Completion  | Completed   |
| Adopted Budget  | \$934,494.08  |
| Total Cumulative Obligations  | \$510,054.60  |
| Total Cumulative Expenditures   | \$510,054.60  |
| Current Period Obligations  | \$0.00  |
| Current Period Expenditures   | \$0.00  |
| Project Description   | DHSS Division of Public Health purchase and distribution<br>of testing kits. Testing kits will be distributed throughout the<br>state.                |
| Does this project include a capital expenditure?  | No  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 1 Imp General Public  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Provide free Covid-19 test kits to the public to better facilitate DPH testing strategy in the state for preventing unnecessary covid related deaths. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | COVID testing kits purchase and distribution.   |

# Project Name: K12 COVID Leave Extension

| Project Identification Number   | 18019   |
|---------------------------------|---|
| Project Expenditure Category    | 3-Public Health-Negative Economic Impact: Public Sector<br>Capacity |
| Project Expenditure Subcategory | 3.5-Public Sector Capacity: Administrative Needs                    |
| Status To Completion            | Completed   |
| Adopted Budget                  | \$0.00  |
|                                 |   |

| Total Cumulative Obligations  | \$0.00   |
|---|--|
| Total Cumulative Expenditures   | \$0.00   |
| Current Period Obligations  | \$0.00   |
| Current Period Expenditures   | \$0.00   |
| Project Description   | K12 COVID Leave Extension program to provide paid leave<br>for local education agencies and Delaware school district<br>employees for employee leave to quarantine, self-isolate,<br>become vaccinated, or care for family members impacted by<br>COVID-19. The state may fund up to 10 days of paid<br>COVID leave for any LEA/School District whose local<br>school board adopts a policy to provide this leave to its<br>employees. |
| Does this project include a capital expenditure?  | No   |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Funding to provide staffing coverage for when teachers, bus drivers or other school staff are out due to COVID-19  |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Schools monitor COVID-19 infections and ensure staff coverage when anyone is out due to a COVID illness.   |

# Project Name: DDA Local Food Loan System

| Project Identification Number  | 18394  |
|--|--|
| Project Expenditure Category   | 2-Negative Economic Impacts  |
| Project Expenditure Subcategory  | 2.29-Loans or Grants to Mitigate Financial Hardship  |
| Status To Completion   | Completed 50% or more  |
| Adopted Budget   | \$2,000,000.00   |
| Total Cumulative Obligations   | \$1,355,872.00   |
| Total Cumulative Expenditures  | \$1,355,872.00   |
| Current Period Obligations   | \$1,171.00   |
| Current Period Expenditures  | \$1,171.00   |
| Project Description  | Funding to create an umbrella structure designed to include a<br>diverse portfolio of local food access and food system loan<br>programs. Local small-scale food businesses could access<br>financing needed to achieve short-term or immediate<br>improvements that strengthen the capacity and sustainability<br>of their operations, which sustains jobs and food security.<br>Food enterprises who access the loan/grant portfolio would<br>include retail food businesses that offer prepared packaged<br>food product direct to customers, such as convenience<br>stores, neighborhood markets, restaurants, farmers markets,<br>commercial kitchen spaces, processing facilities, storage<br>facilities, food trucks, grocery stores and food kiosks. |
| Does this project include a capital expenditure?   | No   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions | \$2,000,000.00   |
| Is a program evaluation of the project being conducted?  | Yes  |
| What Impacted and/or Disproportionally Impacted  |  |

| population does this project primarily serve?   | 1 Imp General Public   |
|---|--|
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | Food program to provide small businesses an opportunity to<br>obtain funding to provide food to local communities<br>throughout Delaware that have been negatively impacted by<br>the COVID-19 pandemic.   |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | Application process will occur each year for this 3-year<br>program. Applicants will use grant funding to provide food<br>assistance to local communities negatively impacted by the<br>COVID-19 pandemic. |
| Number of small businesses served (by program if recipient<br>establishes multiple separate small businesses assistance<br>programs)                                | 14   |

#### Project Name: OGOV REACH Riverside

| Project Identification Number  | 18447  |
|--|--|
| Project Expenditure Category   | 2-Negative Economic Impacts  |
| Project Expenditure Subcategory  | 2.15-Long-Term Housing Security: Affordable Housing  |
| Status To Completion   | Not Started  |
| Adopted Budget   | \$26,400,000.00  |
| Total Cumulative Obligations   | \$26,400,000.00  |
| Total Cumulative Expenditures  | \$26,400,000.00  |
| Current Period Obligations   | \$0.00   |
| Current Period Expenditures  | \$0.00   |
| Project Description  | Funding for REACH Riverside Development Corporation<br>which has partnered with the Wilmington Housing Authority<br>and developer Pennrose Bricks & Mortar to build affordable<br>housing in the low income Riverside neighborhood of<br>Wilmington. |
| Does this project include a capital expenditure?   | Yes  |
| What is the Total expected capital expenditure, including pre-development costs, if applicable | \$26,400,000.00  |
| Type of capital expenditures, based on the following enumerated uses                           | Affordable housing, supportive housing, or recovery housing  |
| Capital Expenditure Justification  | To provide affordable housing to hard hit areas on the riverside in Wilmington, DE.  |
| Does the project prioritize local hires?   | Yes  |
| Does the project have a Community Benefit Agreement, with a description of any such agreement? | No   |

# Project Name: DOJ Community Engagement Unit

| 18548                                 |
|---------------------------------------|
| 1-Public Health                       |
| 1.11-Community Violence Interventions |
| Completed less than 50%               |
|                                       |

| Adopted Budget  | \$150,000.00   |
|---|--|
| Total Cumulative Obligations  | \$54,384.28  |
| Total Cumulative Expenditures   | \$54,384.28  |
| Current Period Obligations  | \$11,880.46  |
| Current Period Expenditures   | \$11,880.46  |
| Project Description   | Funding to prevent at-risk individuals from entering the<br>criminal justice system and provide resources and supports<br>to help ensure successful reentry for those who have been in<br>the system. The Community Engagement Unit (CEU)<br>implements its mission through a variet of projects and<br>events in hard hit areas throughout the State. |
| Does this project include a capital expenditure?  | No   |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions  | \$0.00   |
| Is a program evaluation of the project being conducted?   | Yes  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?   | 2 Imp Low or moderate income HHs or populations  |
| Is a program evaluation of the project being conducted?   | Yes  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced                       | DDOJ will distribute food and various supplies to the<br>members of the most vulnerable communities in DE during<br>the community events. Entertainment and various services<br>will be provided during the events that will enhance<br>togetherness of the community and foster good relationship<br>and trust between DDOJ and the communities.      |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19 | DDOJ will spend the allocated funds in the accordance with<br>the provided budget, the supplies and services will be<br>provided to the members of the most vulnerable<br>communities in DE.   |

# Project Name: DSCYF PREMIUM PAY

| Project Identification Number   | 18212  |
|---------------------------------|--|
| Project Expenditure Category    | 4-Premium Pay  |
| Project Expenditure Subcategory | 4.1-Public Sector Employees  |
| Status To Completion            | Completed  |
| Adopted Budget                  | \$3,517,120.09   |
| Total Cumulative Obligations    | \$3,517,120.09   |
| Total Cumulative Expenditures   | \$3,517,120.09   |
| Current Period Obligations      | \$0.00   |
| Current Period Expenditures     | \$0.00   |
| Project Description             | Premium pay for essential workers, offering additional<br>support to those who have borne and will bear the greatest<br>health risks because of their service in critical infrastructure<br>sectors. Delaware State employees who have worked at 24/7<br>state facilities throughout the pandemic in DSCYF are front |

|  | line workers who have put themselves at high-risk to assure<br>that those essential facilities have remained open and<br>adequately staffed. |
|--|--|
| Sectors Designated as Essential Critical Infrastructure<br>Sectors | Department of Services for Children, Youth & Their<br>Families - Youth facilities  |
| Number of workers to be served                                     | 100  |
| Premium Pay Narrative  | Premium pay to provide an incentive to employees for<br>working additional shifts in order to alleviate the burden of<br>staff shortages.    |
| Number of workers to be served with premium pay in K-12 schools    | 0  |

#### Project Name: DOC PREMIUM PAY

|  | 1 1  |
|--|--|
| Project Identification Number                                      | 18213  |
| Project Expenditure Category                                       | 4-Premium Pay  |
| Project Expenditure Subcategory                                    | 4.1-Public Sector Employees  |
| Status To Completion   | Completed  |
| Adopted Budget   | \$5,234,389.21   |
| Total Cumulative Obligations                                       | \$5,234,389.21   |
| Total Cumulative Expenditures                                      | \$5,234,389.21   |
| Current Period Obligations   | (\$459.13)   |
| Current Period Expenditures  | (\$459.13)   |
| Project Description  | Premium pay for essential workers, offering additional<br>support to those who have borne and will bear the greatest<br>health risks because of their service in critical infrastructure<br>sectors. Delaware State employees who have worked at 24/7<br>state facilities throughout the pandemic in DOC are front<br>line workers who have put themselves at high-risk to assure<br>that those essential facilities have remained open and<br>adequately staffed. |
| Sectors Designated as Essential Critical Infrastructure<br>Sectors | Department of Corrections - Correctional Officers, probation<br>and parole officers, youth rehab facility officers.  |
| Number of workers to be served                                     | 100  |
| Premium Pay Narrative  | To provide bonuses for employees willing to work<br>additional shifts in order to alleviate the burden of staff<br>shortages caused by COVID-19.   |
| Number of workers to be served with premium pay in K-12 schools    | 0  |

# Project Name: OGOV Wilmington Parking Garage Relief

| Project Identification Number   | 18471                                 |
|---------------------------------|---------------------------------------|
| Project Expenditure Category    | 2-Negative Economic Impacts           |
| Project Expenditure Subcategory | 2.36-Aid to Other Impacted Industries |
| Status To Completion            | Completed                             |
| Adopted Budget                  | \$5,000,000.00                        |
|                                 |                                       |

| Total Cumulative Obligations   | \$5,000,000.00  |
|--|---|
| Total Cumulative Expenditures  | \$5,000,000.00  |
| Current Period Obligations   | \$0.00  |
| Current Period Expenditures  | \$0.00  |
| Project Description  | The State used \$5 million of its ARPA award to establish a fund to assist parking garages in the City of Wilmington that were adversely economically impacted by the COVID-19 pandemic.  |
| Does this project include a capital expenditure?   | No  |
| Please identify the dollar amount of the total project<br>spending that is allocated towards evidence-based<br>interventions   | \$0.00  |
| Is a program evaluation of the project being conducted?  | No  |
| What Impacted and/or Disproportionally Impacted population does this project primarily serve?  | 13 Imp Industry outside the travel tourism or hospitality sectors specify   |
| Is a program evaluation of the project being conducted?  | No  |
| Brief description of structure and objectives of assistance<br>program(s), including public health or negative economic<br>impact experienced  | The State of Delaware agreed to contribute \$5M of ARPA<br>funds while the City of Wilmington contributed \$500k of its<br>ARPA funds creating a Parking Garage Relief Fund totaling<br>\$5.5M. The city agreed to administer the fund application,<br>underwriting, and disbursement of funds. |
| Brief description of recipient's approach to ensuring that<br>response is reasonable and proportional to a public health or<br>negative economic impact of Covid-19  | To address the negative economic impacts on the parking<br>garage industry and help to ensure that sufficient parking is<br>available within the City, as its workplaces, retail businesses,<br>and cultural attractions emerge from the pandemic and<br>return to normal.                      |
| If aid is provided to industries other than travel, tourism, and<br>hospitality, please describe if the industry experienced at<br>least 8 percent employment loss from pre-pandemic levels,<br>or the industry is experiencing comparable or worse<br>economic impacts as the national tourism, travel, and<br>hospitality industries as of the date of the Final Rule, and<br>rationale for providing aide to the industry | Parking garages in Wilmington suffered, on average, a 65% reduction of revenues resulting from the pandemic and pandemic mitigation efforts. These revenue losses crippled the industry causing severe employment loss as well.   |

# Project Name: DTI Broadband Infrastructure

| Project Identification Number   | 17850   |
|---------------------------------|---|
| Project Expenditure Category    | 5-Infrastructure  |
| Project Expenditure Subcategory | 5.19-Broadband: 'Last Mile' projects  |
| Status To Completion            | Completed 50% or more   |
| Adopted Budget                  | \$43,000,000.00   |
| Total Cumulative Obligations    | \$35,008,795.68   |
| Total Cumulative Expenditures   | \$33,173,750.80   |
| Current Period Obligations      | \$804,799.08  |
| Current Period Expenditures     | \$13,850,613.88   |
|                                 | The State of Delaware Department of Technology &<br>Information (DTI) released a grant application to award<br>grant funds to construct broadband infrastructure as part of |

| Project Description  | the Delaware Broadband Infrastructure Grant (DBIG)<br>program. Through this grant application process, DTI seeks<br>to provide federal funding to private partners that commit to<br>building, expanding, and sustaining new broadband service<br>capabilities to unserved rural areas throughout the state<br>cover the "last mile" connections throughout Delaware.<br>DTI's analysis of which areas are unserved can be found in<br>the 2020 Delaware Broadband Strategic Plan. It is estimated<br>that there are more than 11,600 homes and businesses in<br>Delaware that lack high-speed, wired broadband access. |
|--|---|
| Projected/actual construction start date   | 9/9/2021  |
| Projected/actual initiation of operations date   | 9/9/2021  |
| Location Type(for broadband, geospatial location data)   | Address Range   |
| Location Details   | Delaware  |
| Does the project prioritize local hires?   | Yes   |
| Does the project have a Community Benefit Agreement, with a description of any such agreement? | No  |

# Subrecipients

#### Subrecipient Name: JOSEPH RIZZO & SONS

| TIN                                     |              |
|---|--------------|
| Unique Entity Identifer                 | UENALUMBV9R4 |
| POC Email Address                       |              |
| Address Line 1                          | 13 RIZZO AVE |
| Address Line 2                          |              |
| Address Line 3                          |              |
| City                                    | NEW CASTLE   |
| State                                   | DE           |
| Zip                                     | 19720        |
| Zip+4                                   |              |
| Entity Type                             | Contractor   |
| Is the Recipient Registered in SAM.Gov? | Yes          |

#### Subrecipient Name: DUREX COVERINGS INC

| TIN                                     |                  |
|---|------------------|
| Unique Entity Identifer                 | MW25HZMFQ937     |
| POC Email Address                       |                  |
| Address Line 1                          | 53 INDUSTRIAL RD |
| Address Line 2                          |                  |
| Address Line 3                          |                  |
| City                                    | BROWNSTOWN       |
| State                                   | PA               |
| Zip                                     | 17508            |
| Zip+4                                   |                  |
| Entity Type                             | Contractor       |
| Is the Recipient Registered in SAM.Gov? | Yes              |

#### Subrecipient Name: WALKER AND LABERGE OF DELAWARE INC

| TIN                     |                 |
|-------------------------|-----------------|
| Unique Entity Identifer | QNLVJ2JC5CT5    |
| POC Email Address       |                 |
| Address Line 1          | 30235 FOSKEY LN |
| Address Line 2          |                 |
| Address Line 3          |                 |
| City                    | DELMAR          |
|                         |                 |

| State                                   | MD         |
|---|------------|
| Zip                                     | 21875      |
| Zip+4                                   |            |
| Entity Type                             | Contractor |
| Is the Recipient Registered in SAM.Gov? | Yes        |

#### Subrecipient Name: A & H METALS INC

| TIN                                     |                           |
|---|---------------------------|
| Unique Entity Identifer                 | EC9WJJDM3L17              |
| POC Email Address                       |                           |
| Address Line 1                          | 249 EAST CHESTNUT HILL RD |
| Address Line 2                          |                           |
| Address Line 3                          |                           |
| City                                    | NEWARK                    |
| State                                   | DE                        |
| Zip                                     | 19713                     |
| Zip+4                                   |                           |
| Entity Type                             | Contractor                |
| Is the Recipient Registered in SAM.Gov? | Yes                       |

# Subrecipient Name: DELAWARE ELEVATOR INC

| TIN                                     |                          |
|---|--------------------------|
| Unique Entity Identifer                 | F8ANJQ5WMKZ2             |
| POC Email Address                       |                          |
| Address Line 1                          | 2210 ALLEN DR, SALISBURY |
| Address Line 2                          |                          |
| Address Line 3                          |                          |
| City                                    | SALISBURY                |
| State                                   | MD                       |
| Zip                                     | 21801                    |
| Zip+4                                   |                          |
| Entity Type                             | Contractor               |
| Is the Recipient Registered in SAM.Gov? | Yes                      |

#### Subrecipient Name: Delaware Department of Education Special Needs Programs

| TIN                     |                |
|-------------------------|----------------|
| Unique Entity Identifer | PNANGNXC8LA8   |
| POC Email Address       |                |
| Address Line 1          | 401 Federal St |
|                         |                |

| Address Line 2                          | JOHN G TOWNSEND BLDG |
|---|----------------------|
| Address Line 3                          |                      |
| City                                    | DOVER                |
| State                                   | DE                   |
| Zip                                     | 19901                |
| Zip+4                                   |                      |
| Entity Type                             | Contractor           |
| Is the Recipient Registered in SAM.Gov? | Yes                  |

# Subrecipient Name: REYBOLD CONSTRUCTION GROUP LLC

| TIN                                     |                         |
|---|-------------------------|
| Unique Entity Identifer                 | PRDGS8NL9ES1            |
| POC Email Address                       |                         |
| Address Line 1                          | 116 EAST SCOTLAND DRIVE |
| Address Line 2                          |                         |
| Address Line 3                          |                         |
| City                                    | BEAR                    |
| State                                   | DE                      |
| Zip                                     | 19701                   |
| Zip+4                                   |                         |
| Entity Type                             | Contractor              |
| Is the Recipient Registered in SAM.Gov? | Yes                     |

# Subrecipient Name: Town of Smyrna

| TIN                                     |                    |
|---|--------------------|
| Unique Entity Identifer                 | QFQUEH8L6JW3       |
| POC Email Address                       |                    |
| Address Line 1                          | 325 W Glenwood Ave |
| Address Line 2                          |                    |
| Address Line 3                          |                    |
| City                                    | SMYRNA             |
| State                                   | DE                 |
| Zip                                     | 19977              |
| Zip+4                                   |                    |
| Entity Type                             | Beneficiary        |
| Is the Recipient Registered in SAM.Gov? | N/A                |

# Subrecipient Name: QUALITY EXTERIORS

| TIN |  |
|-----|--|
|     |  |

| Unique Entity Identifer                 | GQDFTH5NF429           |
|---|------------------------|
| POC Email Address                       |                        |
| Address Line 1                          | 60 HOPKINS CEMETERY RD |
| Address Line 2                          |                        |
| Address Line 3                          |                        |
| City                                    | HARRINGTON             |
| State                                   | DE                     |
| Zip                                     | 19952                  |
| Zip+4                                   |                        |
| Entity Type                             | Contractor             |
| Is the Recipient Registered in SAM.Gov? | Yes                    |

# Subrecipient Name: WALLWORKS INC

| TIN                                     |                           |
|---|---------------------------|
| Unique Entity Identifer                 | S8DSZKF9QXM9              |
| POC Email Address                       |                           |
| Address Line 1                          | 610 E BALTIMORE PIKE FL 2 |
| Address Line 2                          |                           |
| Address Line 3                          |                           |
| City                                    | MEDIA                     |
| State                                   | PA                        |
| Zip                                     | 19063                     |
| Zip+4                                   |                           |
| Entity Type                             | Contractor                |
| Is the Recipient Registered in SAM.Gov? | Yes                       |

# Subrecipient Name: VERDANTAS LLC NATIONAL EC SERVICES INC DBA

| TIN                                     |                     |
|---|---------------------|
| Unique Entity Identifer                 | L5SNNSBAPL83        |
| POC Email Address                       |                     |
| Address Line 1                          | 5400 LIMESTONE ROAD |
| Address Line 2                          |                     |
| Address Line 3                          |                     |
| City                                    | WILMINGTON          |
| State                                   | DE                  |
| Zip                                     | 19808               |
| Zip+4                                   |                     |
| Entity Type                             | Contractor          |
| Is the Recipient Registered in SAM.Gov? | Yes                 |

# Subrecipient Name: KIMBALL CONSTRUCTION CO INC

| TIN                                     |                      |
|---|----------------------|
| Unique Entity Identifer                 | DJR5CJ6NCAC5         |
| POC Email Address                       |                      |
| Address Line 1                          | 9615 PHILADELPHIA RD |
| Address Line 2                          |                      |
| Address Line 3                          |                      |
| City                                    | ROSEDALE             |
| State                                   | MD                   |
| Zip                                     | 21237                |
| Zip+4                                   |                      |
| Entity Type                             | Contractor           |
| Is the Recipient Registered in SAM.Gov? | Yes                  |

#### Subrecipient Name: GATEWAY CONSTRUCTION INC

| TIN                                     |                     |
|---|---------------------|
| Unique Entity Identifer                 | UY8YWMAJFQ26        |
| POC Email Address                       |                     |
| Address Line 1                          | 498 SUDLERSVILLE RD |
| Address Line 2                          |                     |
| Address Line 3                          |                     |
| City                                    | CLAYTON             |
| State                                   | DE                  |
| Zip                                     | 19938               |
| Zip+4                                   |                     |
| Entity Type                             | Contractor          |
| Is the Recipient Registered in SAM.Gov? | Yes                 |

#### Subrecipient Name: ECOSERVICES LLC

| TIN                     |                  |  |
|-------------------------|------------------|--|
| Unique Entity Identifer | QJSCQMWGVN63     |  |
| POC Email Address       |                  |  |
| Address Line 1          | 303B NATIONAL RD |  |
| Address Line 2          |                  |  |
| Address Line 3          |                  |  |
| City                    | Exton            |  |
| State                   | PA               |  |
| Zip                     | 19341            |  |
|                         |                  |  |

| Zip+4                                   |            |
|---|------------|
| Entity Type                             | Contractor |
| Is the Recipient Registered in SAM.Gov? | Yes        |

#### Subrecipient Name: JOSEPH T RICHARDSON INC

| TIN   | 522230338     |
|---|---------------|
| Unique Entity Identifer   | TDMDHJKPNC21  |
| POC Email Address   |               |
| Address Line 1  | 105 CENTER ST |
| Address Line 2  |               |
| Address Line 3  |               |
| City  | Harrington    |
| State   | DE            |
| Zip   | 19952         |
| Zip+4   |               |
| Entity Type   | Contractor    |
| Is the Recipient Registered in SAM.Gov?   | Yes           |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No            |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No            |

#### Subrecipient Name: NETSTREAM TECHNOLOGY INC

| TIN   | 472838999             |
|---|-----------------------|
| Unique Entity Identifer   | YYXNUYS6EAR9          |
| POC Email Address   |                       |
| Address Line 1  | 26 SHEFFIELD MANOR DR |
| Address Line 2  |                       |
| Address Line 3  |                       |
| City  | Newark                |
| State   | DE                    |
| Zip   | 19771                 |
| Zip+4   |                       |
| Entity Type   | Contractor            |
| Is the Recipient Registered in SAM.Gov?   | Yes                   |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                    |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                    |

# Subrecipient Name: VISUAL SOUND INC

| TIN                                     |              |
|---|--------------|
| Unique Entity Identifer                 | EKPLM8YCUPV5 |
| POC Email Address                       |              |
| Address Line 1                          | 485 Park Way |
| Address Line 2                          |              |
| Address Line 3                          |              |
| City                                    | Broomall     |
| State                                   | PA           |
| Zip                                     | 19008        |
| Zip+4                                   |              |
| Entity Type                             | Contractor   |
| Is the Recipient Registered in SAM.Gov? | Yes          |

# Subrecipient Name: INSIGHT PUBLIC SECTOR

| TIN                                     | 363949000       |
|---|-----------------|
| Unique Entity Identifer                 | LVK1C1V1B1J4    |
| POC Email Address                       |                 |
| Address Line 1                          | 6820 S HARL AVE |
| Address Line 2                          |                 |
| Address Line 3                          |                 |
| City                                    | TEMPE           |
| State                                   | AZ              |
| Zip                                     | 85283           |
| Zip+4                                   |                 |
| Entity Type                             | Contractor      |
| Is the Recipient Registered in SAM.Gov? | Yes             |

#### Subrecipient Name: G A Blanco and Sons Inc

| TIN                     | 020327245     |  |
|-------------------------|---------------|--|
| Unique Entity Identifer | XL67PPU8P7Y3  |  |
| POC Email Address       |               |  |
| Address Line 1          | 186 TIMBER LN |  |
| Address Line 2          |               |  |
| Address Line 3          |               |  |
| City                    | CLARKSBORO    |  |
| State                   | NJ            |  |
| Zip                     | 08020         |  |
| Zip+4                   |               |  |
| Entity Type             | Contractor    |  |

| Is the Recipient Registered in SAM.Gov?   | Yes |
|---|-----|
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No  |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No  |

#### Subrecipient Name: Love and Hope Rescue Mission

| TIN                                     | 872643550          |  |
|---|--------------------|--|
| Unique Entity Identifer                 | TLLCCZR1L2V1       |  |
| POC Email Address                       |                    |  |
| Address Line 1                          | 101 Mederia Circle |  |
| Address Line 2                          |                    |  |
| Address Line 3                          |                    |  |
| City                                    | Newark             |  |
| State                                   | DE                 |  |
| Zip                                     | 19702              |  |
| Zip+4                                   |                    |  |
| Entity Type                             | Subrecipient       |  |
| Is the Recipient Registered in SAM.Gov? | Yes                |  |

#### Subrecipient Name: Gamma Theta Lambda Education Foundation Inc

| TIN   | 510286704    |
|---|--------------|
| Unique Entity Identifer   | PMEJW4PPGJC4 |
| POC Email Address   |              |
| Address Line 1  | PO Box 25209 |
| Address Line 2  |              |
| Address Line 3  |              |
| City  | Wilmington   |
| State   | DE           |
| Zip   | 19899        |
| Zip+4   |              |
| Entity Type   | Subrecipient |
| Is the Recipient Registered in SAM.Gov?   | Yes          |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No           |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No           |

#### Subrecipient Name: Supporting Kidds

| TIN                     | 611961292    |
|-------------------------|--------------|
| Unique Entity Identifer | D8GLEZF7SE83 |

| POC Email Address                       |                         |
|---|-------------------------|
| Address Line 1                          | 1213 Old Lancaster Pike |
| Address Line 2                          |                         |
| Address Line 3                          |                         |
| City                                    | Hockessin               |
| State                                   | DE                      |
| Zip                                     | 19707                   |
| Zip+4                                   |                         |
| Entity Type                             | Subrecipient            |
| Is the Recipient Registered in SAM.Gov? | Yes                     |

# Subrecipient Name: DELAWARE STATE HOUSING AUTHORITY

| TIN                                     | 510116653    |
|---|--------------|
| Unique Entity Identifer                 | EJKUX9DWQK65 |
| POC Email Address                       |              |
| Address Line 1                          | 18 The Green |
| Address Line 2                          |              |
| Address Line 3                          |              |
| City                                    | Dover        |
| State                                   | DE           |
| Zip                                     | 19901        |
| Zip+4                                   |              |
| Entity Type                             | Subrecipient |
| Is the Recipient Registered in SAM.Gov? | Yes          |

# Subrecipient Name: Limen Recovery + Wellness

| TIN                                     | 237029073       |
|---|-----------------|
| Unique Entity Identifer                 | K6X2YXCS3M79    |
| POC Email Address                       |                 |
| Address Line 1                          | 600 W Tenth St, |
| Address Line 2                          |                 |
| Address Line 3                          |                 |
| City                                    | Wilmington      |
| State                                   | DE              |
| Zip                                     | 19801           |
| Zip+4                                   |                 |
| Entity Type                             | Subrecipient    |
| Is the Recipient Registered in SAM.Gov? | Yes             |

#### Subrecipient Name: Wilmington Hope Commission

| TIN                                     | 262280375                     |
|---|-------------------------------|
| Unique Entity Identifer                 | CN4DDLL4N395                  |
| POC Email Address                       |                               |
| Address Line 1                          | 38 Vandever Avenue Wilmington |
| Address Line 2                          |                               |
| Address Line 3                          |                               |
| City                                    | Wilmington                    |
| State                                   | DE                            |
| Zip                                     | 19802                         |
| Zip+4                                   |                               |
| Entity Type                             | Subrecipient                  |
| Is the Recipient Registered in SAM.Gov? | Yes                           |

# Subrecipient Name: Wilmington Neighborhood Conservancy Land Bank

| TIN                                     | 811773249           |
|---|---------------------|
| Unique Entity Identifer                 | V918MVBF3A19        |
| POC Email Address                       |                     |
| Address Line 1                          | 404 N Market Street |
| Address Line 2                          |                     |
| Address Line 3                          |                     |
| City                                    | Wilmington          |
| State                                   | DE                  |
| Zip                                     | 19801               |
| Zip+4                                   |                     |
| Entity Type                             | Subrecipient        |
| Is the Recipient Registered in SAM.Gov? | Yes                 |

#### Subrecipient Name: Todmorden Foundation

| TIN                     | 383857086            |
|-------------------------|----------------------|
| Unique Entity Identifer | EMLDPSK7JCQ1         |
| POC Email Address       |                      |
| Address Line 1          | 100 West 10th Street |
| Address Line 2          | Suite 1104           |
| Address Line 3          |                      |
| City                    | Wilmington           |
| State                   | DE                   |
| Zip                     | 19801                |
| Zip+4                   |                      |

| Entity Type                             | Subrecipient |
|---|--------------|
| Is the Recipient Registered in SAM.Gov? | Yes          |

#### Subrecipient Name: BDO USA LLP

| TIN                                     |                |
|---|----------------|
| Unique Entity Identifer                 | WRKSAN1MUJV7   |
| POC Email Address                       |                |
| Address Line 1                          | 770 KENMOOR SE |
| Address Line 2                          |                |
| Address Line 3                          |                |
| City                                    | GRAND RAPIDS   |
| State                                   | MI             |
| Zip                                     | 49546          |
| Zip+4                                   |                |
| Entity Type                             | Contractor     |
| Is the Recipient Registered in SAM.Gov? | Yes            |

# Subrecipient Name: Booth Management Consulting, LLC

| TIN                                     |                              |
|---|------------------------------|
| Unique Entity Identifer                 | K5DVUN4SFMF4                 |
| POC Email Address                       |                              |
| Address Line 1                          | 7230 Lee Deforest Dr Ste 202 |
| Address Line 2                          |                              |
| Address Line 3                          |                              |
| City                                    | Columbia                     |
| State                                   | MD                           |
| Zip                                     | 21046                        |
| Zip+4                                   |                              |
| Entity Type                             | Contractor                   |
| Is the Recipient Registered in SAM.Gov? | Yes                          |

#### Subrecipient Name: GAUDELLI BROTHERS INC

| TIN                     |                 |
|-------------------------|-----------------|
| Unique Entity Identifer | D4HWKEWM8TT3    |
| POC Email Address       |                 |
| Address Line 1          | 202 S WADE BLVD |
| Address Line 2          |                 |
| Address Line 3          |                 |
| City                    | MILLVILLE       |

| State                                   | NJ         |
|---|------------|
| Zip                                     | 08332      |
| Zip+4                                   |            |
| Entity Type                             | Contractor |
| Is the Recipient Registered in SAM.Gov? | Yes        |

# Subrecipient Name: NEIGHBORHOOD HOUSE COMMUNITY DEVELOPMENT CORPORATION

| TIN                                     |              |
|---|--------------|
| Unique Entity Identifer                 | X5E1S11SXAA5 |
| POC Email Address                       |              |
| Address Line 1                          | 414 N COX ST |
| Address Line 2                          |              |
| Address Line 3                          |              |
| City                                    | MIDDLETOWN   |
| State                                   | DE           |
| Zip                                     | 19709        |
| Zip+4                                   |              |
| Entity Type                             | Subrecipient |
| Is the Recipient Registered in SAM.Gov? | Yes          |

#### Subrecipient Name: PENNI ENAMA

| TIN   |                   |
|---|-------------------|
| Unique Entity Identifer   | H7PPPBJ45ZN7      |
| POC Email Address   |                   |
| Address Line 1  | 4931 MERMAID BLVD |
| Address Line 2  |                   |
| Address Line 3  |                   |
| City  | WILMINGTON        |
| State   | DE                |
| Zip   | 19808             |
| Zip+4   |                   |
| Entity Type   | Contractor        |
| Is the Recipient Registered in SAM.Gov?   | Yes               |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                |

#### Subrecipient Name: KATHERINE HOSEY CONSULTING

| TIN                                     |              |
|---|--------------|
| Unique Entity Identifer                 | GP9CS7GLVGC6 |
| POC Email Address                       |              |
| Address Line 1                          | 1417 JAN DR  |
| Address Line 2                          |              |
| Address Line 3                          |              |
| City                                    | WILMINGTON   |
| State                                   | DE           |
| Zip                                     | 19803        |
| Zip+4                                   |              |
| Entity Type                             | Contractor   |
| Is the Recipient Registered in SAM.Gov? | Yes          |

# Subrecipient Name: OVP MANAGEMENT CONSULTING GROUP INC

| TIN   |                       |
|---|-----------------------|
| Unique Entity Identifer   | U2EZDDHNEES7          |
| POC Email Address   |                       |
| Address Line 1  | 4905 CREST VIEW DRIVE |
| Address Line 2  |                       |
| Address Line 3  |                       |
| City  | HYATTSVILLE           |
| State   | MD                    |
| Zip   | 20782                 |
| Zip+4   |                       |
| Entity Type   | Contractor            |
| Is the Recipient Registered in SAM.Gov?   | Yes                   |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                    |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                    |

#### Subrecipient Name: ABT SRBI INC

| TIN                     |                    |
|-------------------------|--------------------|
| Unique Entity Identifer | DHSS00171231       |
| POC Email Address       |                    |
| Address Line 1          | 275 SEVENTH AVENUE |
| Address Line 2          |                    |
| Address Line 3          |                    |
| City                    | New York           |
| State                   | NY                 |

| Zip   | 10001      |
|---|------------|
| Zip+4   |            |
| Entity Type   | Contractor |
| Is the Recipient Registered in SAM.Gov?   | No         |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No         |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No         |

#### Subrecipient Name: NTT DATA INC

| TIN                                     |                  |
|---|------------------|
| Unique Entity Identifer                 | NVS7W9NAPEW3     |
| POC Email Address                       |                  |
| Address Line 1                          | 7950 LEGACY BLVD |
| Address Line 2                          |                  |
| Address Line 3                          |                  |
| City                                    | PLANO            |
| State                                   | ТХ               |
| Zip                                     | 75024            |
| Zip+4                                   |                  |
| Entity Type                             | Contractor       |
| Is the Recipient Registered in SAM.Gov? | Yes              |

#### Subrecipient Name: State of Delaware

| TIN                                     |                  |
|---|------------------|
| Unique Entity Identifer                 | DUX6LETM8MN1     |
| POC Email Address                       |                  |
| Address Line 1                          | WEBB BLDG 2ND FL |
| Address Line 2                          |                  |
| Address Line 3                          |                  |
| City                                    | Dover            |
| State                                   | DE               |
| Zip                                     | 19904            |
| Zip+4                                   |                  |
| Entity Type                             | Contractor       |
| Is the Recipient Registered in SAM.Gov? | Yes              |

#### Subrecipient Name: SOFTWARE AG USA INC

| TIN                     |              |
|-------------------------|--------------|
| Unique Entity Identifer | DTI000031655 |
|                         | 1            |

| POC Email Address   |               |
|---|---------------|
| Address Line 1  | PO BOX 910600 |
| Address Line 2  |               |
| Address Line 3  |               |
| City  | DALLAS        |
| State   | TX            |
| Zip   | 75391         |
| Zip+4   |               |
| Entity Type   | Contractor    |
| Is the Recipient Registered in SAM.Gov?   | No            |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No            |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No            |

#### Subrecipient Name: ENSONO LLC

| TIN                                     |                |
|---|----------------|
| Unique Entity Identifer                 | ZLE7D6CNL8Z3   |
| POC Email Address                       |                |
| Address Line 1                          | 3333 FINLEY RD |
| Address Line 2                          |                |
| Address Line 3                          |                |
| City                                    | DOWNERS GROVE  |
| State                                   | IL             |
| Zip                                     | 60515          |
| Zip+4                                   |                |
| Entity Type                             | Contractor     |
| Is the Recipient Registered in SAM.Gov? | Yes            |

# Subrecipient Name: BREAKLINE DIGITAL LLC

| TIN                     |                       |
|-------------------------|-----------------------|
| Unique Entity Identifer | NZ11NBKKGWN5          |
| POC Email Address       |                       |
| Address Line 1          | 330 WASHINGTON STREET |
| Address Line 2          |                       |
| Address Line 3          |                       |
| City                    | Hoboken               |
| State                   | NJ                    |
| Zip                     | 07030                 |
| Zip+4                   |                       |

| Entity Type                             | Contractor |
|---|------------|
| Is the Recipient Registered in SAM.Gov? | Yes        |

#### Subrecipient Name: PSC CONTRACTING INC

| TIN   |               |
|---|---------------|
| Unique Entity Identifer   | MJFPN3J44W21  |
| POC Email Address   |               |
| Address Line 1  | PO BOX 319    |
| Address Line 2  |               |
| Address Line 3  |               |
| City  | DELAWARE CITY |
| State   | DE            |
| Zip   | 19706         |
| Zip+4   |               |
| Entity Type   | Contractor    |
| Is the Recipient Registered in SAM.Gov?   | No            |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No            |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No            |

#### Subrecipient Name: UNIVERSITY OF MD

| TIN   |                      |
|---|----------------------|
| Unique Entity Identifer   | LNUBJQ26R2M5         |
| POC Email Address   |                      |
| Address Line 1  | 737 W LOMBARD STREET |
| Address Line 2  |                      |
| Address Line 3  |                      |
| City  | BALTIMORE            |
| State   | MD                   |
| Zip   | 21201                |
| Zip+4   |                      |
| Entity Type   | Contractor           |
| Is the Recipient Registered in SAM.Gov?   | Yes                  |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                   |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                   |

#### Subrecipient Name: SILVER LAKE REALTY LLC

| Unique Entity Identifer   | HSG9VMKHG6U6  |
|---|---------------|
| POC Email Address   |               |
| Address Line 1  | PO BOX 781631 |
| Address Line 2  |               |
| Address Line 3  |               |
| City  | PHILADELPHIA  |
| State   | РА            |
| Zip   | 19178         |
| Zip+4   |               |
| Entity Type   | Contractor    |
| Is the Recipient Registered in SAM.Gov?   | Yes           |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No            |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No            |

# Subrecipient Name: BARNES & THORNBURG LLP

| TIN   | 350900596                |
|---|--------------------------|
| Unique Entity Identifer   |                          |
| POC Email Address   |                          |
| Address Line 1  | 11 SOUTH MERIDIAN STREET |
| Address Line 2  |                          |
| Address Line 3  |                          |
| City  | INDIANAPOLIS             |
| State   | IN                       |
| Zip   | 46204                    |
| Zip+4   |                          |
| Entity Type   | Beneficiary              |
| Is the Recipient Registered in SAM.Gov?   | No                       |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                       |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                       |

#### Subrecipient Name: UHY Advisors Inc

| TIN                     |                      |
|-------------------------|----------------------|
| Unique Entity Identifer | URXSL6YM3QH3         |
| POC Email Address       |                      |
| Address Line 1          | 27725 STANSBURY BLVD |
| Address Line 2          | SUITE 385            |
|                         |                      |

| Address Line 3                          |                  |
|---|------------------|
| City                                    | FARMINGTON HILLS |
| State                                   | MI               |
| Zip                                     | 48334            |
| Zip+4                                   |                  |
| Entity Type                             | Contractor       |
| Is the Recipient Registered in SAM.Gov? | Yes              |

# Subrecipient Name: BERRY DUNN MCNEIL AND PARKER LLC

| TIN                                     |                      |
|---|----------------------|
| Unique Entity Identifer                 | MDCAWE9GZKP4         |
| POC Email Address                       |                      |
| Address Line 1                          | 2211 CONGRESS STREET |
| Address Line 2                          |                      |
| Address Line 3                          |                      |
| City                                    | PORTLAND             |
| State                                   | ME                   |
| Zip                                     | 04102                |
| Zip+4                                   |                      |
| Entity Type                             | Contractor           |
| Is the Recipient Registered in SAM.Gov? | Yes                  |

#### Subrecipient Name: Latin American Community Center

| TIN                                     |                    |
|---|--------------------|
| Unique Entity Identifer                 | W8G7N5TY8WP3       |
| POC Email Address                       |                    |
| Address Line 1                          | 403 N Van Buren ST |
| Address Line 2                          |                    |
| Address Line 3                          |                    |
| City                                    | Wilmington         |
| State                                   | DE                 |
| Zip                                     | 19805              |
| Zip+4                                   |                    |
| Entity Type                             | Subrecipient       |
| Is the Recipient Registered in SAM.Gov? | Yes                |

#### Subrecipient Name: CODE DIFFERENTLY, LLC

| TIN                     |              |
|-------------------------|--------------|
| Unique Entity Identifer | RLREKNKLHAN3 |
|                         |              |

| POC Email Address                       |                 |
|---|-----------------|
| Address Line 1                          | 625 N Orange ST |
| Address Line 2                          |                 |
| Address Line 3                          |                 |
| City                                    | Wilmington      |
| State                                   | DE              |
| Zip                                     | 19801           |
| Zip+4                                   |                 |
| Entity Type                             | Subrecipient    |
| Is the Recipient Registered in SAM.Gov? | Yes             |

#### Subrecipient Name: CDW GOVERNMENT LLC

| TIN                                     |                     |
|---|---------------------|
| Unique Entity Identifer                 | PHZDZ8SJ5CM1        |
| POC Email Address                       |                     |
| Address Line 1                          | 230 N Milwaukee AVE |
| Address Line 2                          |                     |
| Address Line 3                          |                     |
| City                                    | Vernon Hills        |
| State                                   | IL                  |
| Zip                                     | 60061               |
| Zip+4                                   |                     |
| Entity Type                             | Contractor          |
| Is the Recipient Registered in SAM.Gov? | Yes                 |

#### Subrecipient Name: DELAWARE TECHNOLOGY PARK, INC.

| TIN                                     |                       |
|---|-----------------------|
| Unique Entity Identifer                 | VQ93GP1K3KR7          |
| POC Email Address                       |                       |
| Address Line 1                          | 591 Collaboration WAY |
| Address Line 2                          |                       |
| Address Line 3                          |                       |
| City                                    | Newark                |
| State                                   | DE                    |
| Zip                                     | 19713                 |
| Zip+4                                   |                       |
| Entity Type                             | Subrecipient          |
| Is the Recipient Registered in SAM.Gov? | Yes                   |

#### Subrecipient Name: ID GRIFFITH INC

| TIN   |                 |
|---|-----------------|
| Unique Entity Identifer   | DSU000024293    |
| POC Email Address   |                 |
| Address Line 1  | 735 S MARKET ST |
| Address Line 2  |                 |
| Address Line 3  |                 |
| City  | Wilmington      |
| State   | DE              |
| Zip   | 19801           |
| Zip+4   |                 |
| Entity Type   | Contractor      |
| Is the Recipient Registered in SAM.Gov?   | No              |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No              |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No              |

# Subrecipient Name: SURVIVORS OF ABUSE IN RECOVERY, INC.

| TIN                                     |              |
|---|--------------|
| Unique Entity Identifer                 | KEP1C4LKVT16 |
| POC Email Address                       |              |
| Address Line 1                          | 405 Foulk RD |
| Address Line 2                          |              |
| Address Line 3                          |              |
| City                                    | Wilmington   |
| State                                   | DE           |
| Zip                                     | 19803        |
| Zip+4                                   |              |
| Entity Type                             | Subrecipient |
| Is the Recipient Registered in SAM.Gov? | Yes          |

# Subrecipient Name: AVI-SPL LLC

| TIN                     |                    |
|-------------------------|--------------------|
| Unique Entity Identifer | GZS7HPH81GM3       |
| POC Email Address       |                    |
| Address Line 1          | 6301 BENJAMIN ROAD |
| Address Line 2          | Suite 101          |
| Address Line 3          |                    |
| City                    | ТАМРА              |
|                         |                    |

| State                                   | FL         |
|---|------------|
| Zip                                     | 33634      |
| Zip+4                                   |            |
| Entity Type                             | Contractor |
| Is the Recipient Registered in SAM.Gov? | Yes        |

#### Subrecipient Name: Delaware Psychological Association

| TIN                                     | 510255015        |
|---|------------------|
| Unique Entity Identifer                 | H6SJT54G8TP5     |
| POC Email Address                       |                  |
| Address Line 1                          | 1732A Marsh Road |
| Address Line 2                          | Suite 155        |
| Address Line 3                          |                  |
| City                                    | Wilmington       |
| State                                   | DE               |
| Zip                                     | 19810            |
| Zip+4                                   |                  |
| Entity Type                             | Subrecipient     |
| Is the Recipient Registered in SAM.Gov? | Yes              |

# Subrecipient Name: CHINOOK SYSTEMS INC

| TIN                                     |                 |
|---|-----------------|
| Unique Entity Identifer                 | JNXFD3JXM8C8    |
| POC Email Address                       |                 |
| Address Line 1                          | 1235 S CLARK ST |
| Address Line 2                          |                 |
| Address Line 3                          |                 |
| City                                    | ARLINGTON       |
| State                                   | VA              |
| Zip                                     | 22202           |
| Zip+4                                   |                 |
| Entity Type                             | Contractor      |
| Is the Recipient Registered in SAM.Gov? | Yes             |

### Subrecipient Name: U S ELECTRICAL SERVICES Inc

| TIN                     |                        |
|-------------------------|------------------------|
| Unique Entity Identifer | VWQNZYWPCK49           |
| POC Email Address       |                        |
| Address Line 1          | 1336 Hiram Acworth Hwy |
|                         |                        |

| Address Line 2                          | Ste 205    |
|---|------------|
| Address Line 3                          |            |
| City                                    | Dallas     |
| State                                   | GA         |
| Zip                                     | 30157      |
| Zip+4                                   |            |
| Entity Type                             | Contractor |
| Is the Recipient Registered in SAM.Gov? | Yes        |

### Subrecipient Name: CAREER T E A M LLC

| TIN                                     |                  |
|---|------------------|
| Unique Entity Identifer                 | GWA7WGMY2MJ5     |
| POC Email Address                       |                  |
| Address Line 1                          | 250 STATE STREET |
| Address Line 2                          |                  |
| Address Line 3                          |                  |
| City                                    | NORTH HAVEN      |
| State                                   | СТ               |
| Zip                                     | 06473            |
| Zip+4                                   |                  |
| Entity Type                             | Subrecipient     |
| Is the Recipient Registered in SAM.Gov? | Yes              |

## Subrecipient Name: JOBS FOR DE GRADUATES

| TIN                                     |                |
|---|----------------|
| Unique Entity Identifer                 | EJGNGVJKQK67   |
| POC Email Address                       |                |
| Address Line 1                          | 381 W NORTH ST |
| Address Line 2                          |                |
| Address Line 3                          |                |
| City                                    | DOVER          |
| State                                   | DE             |
| Zip                                     | 19904          |
| Zip+4                                   |                |
| Entity Type                             | Subrecipient   |
| Is the Recipient Registered in SAM.Gov? | Yes            |

# Subrecipient Name: STATE OF KANSAS DEPARTMENT OF COMMERCE

| TIN |  |
|-----|--|
|     |  |

| Unique Entity Identifer                 | SSV2A1VEVFL4        |
|---|---------------------|
| POC Email Address                       |                     |
| Address Line 1                          | 2800 SW TOPEKA BLVD |
| Address Line 2                          |                     |
| Address Line 3                          |                     |
| City                                    | ТОРЕКА              |
| State                                   | KS                  |
| Zip                                     | 66612               |
| Zip+4                                   |                     |
| Entity Type                             | Contractor          |
| Is the Recipient Registered in SAM.Gov? | Yes                 |

### Subrecipient Name: Food Bank of Delaware Inc

| TIN                                     |                |
|---|----------------|
| Unique Entity Identifer                 | CBEWK763KN99   |
| POC Email Address                       |                |
| Address Line 1                          | 222 LAKE DRIVE |
| Address Line 2                          |                |
| Address Line 3                          |                |
| City                                    | Newark         |
| State                                   | DE             |
| Zip                                     | 19702          |
| Zip+4                                   |                |
| Entity Type                             | Subrecipient   |
| Is the Recipient Registered in SAM.Gov? | Yes            |

# Subrecipient Name: Delaware Skills Center

| TIN                                     |                       |
|---|-----------------------|
| Unique Entity Identifer                 | X13BRCVLDHM5          |
| POC Email Address                       |                       |
| Address Line 1                          | 500 SHIPS LANDING WAY |
| Address Line 2                          |                       |
| Address Line 3                          |                       |
| City                                    | NEW CASTLE            |
| State                                   | DE                    |
| Zip                                     | 19720                 |
| Zip+4                                   |                       |
| Entity Type                             | Subrecipient          |
| Is the Recipient Registered in SAM.Gov? | Yes                   |

## Subrecipient Name: WEST END NEIGHBORHOOD HOUSE

| TIN                                     |                  |
|---|------------------|
| Unique Entity Identifer                 | N7C2AQS7XS81     |
| POC Email Address                       |                  |
| Address Line 1                          | 710 N LINCOLN ST |
| Address Line 2                          |                  |
| Address Line 3                          |                  |
| City                                    | WILMINGTON       |
| State                                   | DE               |
| Zip                                     | 19805            |
| Zip+4                                   |                  |
| Entity Type                             | Subrecipient     |
| Is the Recipient Registered in SAM.Gov? | Yes              |

### Subrecipient Name: DELAWARE FUTURES INC

| TIN                                     |                      |
|---|----------------------|
| Unique Entity Identifer                 | EK8TEP2A97V7         |
| POC Email Address                       |                      |
| Address Line 1                          | 192 Lexington Avenue |
| Address Line 2                          |                      |
| Address Line 3                          |                      |
| City                                    | NEW YORK             |
| State                                   | NY                   |
| Zip                                     | 10016                |
| Zip+4                                   |                      |
| Entity Type                             | Subrecipient         |
| Is the Recipient Registered in SAM.Gov? | Yes                  |

### Subrecipient Name: Nerdit Now LLC

| TIN                     |                |
|-------------------------|----------------|
| Unique Entity Identifer | WHKDEUA4CE43   |
| POC Email Address       |                |
| Address Line 1          | 3030 BOWERS ST |
| Address Line 2          |                |
| Address Line 3          |                |
| City                    | Wilmington     |
| State                   | DE             |
| Zip                     | 19802          |
|                         |                |

| Zip+4                                   |              |
|---|--------------|
| Entity Type                             | Subrecipient |
| Is the Recipient Registered in SAM.Gov? | Yes          |

### Subrecipient Name: BLINDSIGHT DELAWARE ENTERPRISES INC

| TIN                                     |                       |
|---|-----------------------|
| Unique Entity Identifer                 | KJD9VUTH2MH6          |
| POC Email Address                       |                       |
| Address Line 1                          | 2915 Newport Gap Pike |
| Address Line 2                          |                       |
| Address Line 3                          |                       |
| City                                    | Wilmington            |
| State                                   | DE                    |
| Zip                                     | 19808                 |
| Zip+4                                   |                       |
| Entity Type                             | Subrecipient          |
| Is the Recipient Registered in SAM.Gov? | Yes                   |

### Subrecipient Name: CHALLENGE PROGRAM

| TIN                                     |               |
|---|---------------|
| Unique Entity Identifer                 | EE9PALCQFGA7  |
| POC Email Address                       |               |
| Address Line 1                          | 1124 E 7TH ST |
| Address Line 2                          |               |
| Address Line 3                          |               |
| City                                    | WILMINGTON    |
| State                                   | DE            |
| Zip                                     | 19801         |
| Zip+4                                   |               |
| Entity Type                             | Subrecipient  |
| Is the Recipient Registered in SAM.Gov? | Yes           |

## Subrecipient Name: GAUDENZIA INC

| TIN                     | 231706895     |
|-------------------------|---------------|
| Unique Entity Identifer | DK5MMAQ7DMM6  |
| POC Email Address       |               |
| Address Line 1          | 106 W MAIN ST |
| Address Line 2          |               |
| Address Line 3          |               |
|                         |               |

| City                                    | NORRISTOWN   |
|---|--------------|
| State                                   | PA           |
| Zip                                     | 19401        |
| Zip+4                                   |              |
| Entity Type                             | Subrecipient |
| Is the Recipient Registered in SAM.Gov? | Yes          |

### Subrecipient Name: DELAWARE GEOLOGICAL SURVEY

| TIN                                     |                        |
|---|------------------------|
| Unique Entity Identifer                 | NJQMLNG5L8A5           |
| POC Email Address                       |                        |
| Address Line 1                          | UNIVERSITY OF DELAWARE |
| Address Line 2                          |                        |
| Address Line 3                          |                        |
| City                                    | Newark                 |
| State                                   | DE                     |
| Zip                                     | 19716                  |
| Zip+4                                   |                        |
| Entity Type                             | Contractor             |
| Is the Recipient Registered in SAM.Gov? | Yes                    |

### Subrecipient Name: RICOH USA INC

| TIN                                     |                          |
|---|--------------------------|
| Unique Entity Identifer                 | S33FXH3CVKJ5             |
| POC Email Address                       |                          |
| Address Line 1                          | 70 VALLEY STREAM PARKWAY |
| Address Line 2                          |                          |
| Address Line 3                          |                          |
| City                                    | MALVERN                  |
| State                                   | PA                       |
| Zip                                     | 19355                    |
| Zip+4                                   |                          |
| Entity Type                             | Contractor               |
| Is the Recipient Registered in SAM.Gov? | Yes                      |

## Subrecipient Name: PRESIDIO NETWORKED SOLUTIONS GROUP, LLC

| TIN                     |              |
|-------------------------|--------------|
| Unique Entity Identifer | XRJGB356LBW9 |
| POC Email Address       |              |
|                         |              |

| Address Line 1                          | 555 E NORTH LN STE 5045 |
|---|-------------------------|
| Address Line 2                          |                         |
| Address Line 3                          |                         |
| City                                    | CONSHOHOCKEN            |
| State                                   | PA                      |
| Zip                                     | 19182                   |
| Zip+4                                   |                         |
| Entity Type                             | Contractor              |
| Is the Recipient Registered in SAM.Gov? | Yes                     |

# Subrecipient Name: MALVERN GLASS INC

| TIN                                     |                         |
|---|-------------------------|
| Unique Entity Identifer                 | KR17ELEUDBF7            |
| POC Email Address                       |                         |
| Address Line 1                          | 33922 DARLINGTON STREET |
| Address Line 2                          |                         |
| Address Line 3                          |                         |
| City                                    | LEWES                   |
| State                                   | DE                      |
| Zip                                     | 19958                   |
| Zip+4                                   |                         |
| Entity Type                             | Contractor              |
| Is the Recipient Registered in SAM.Gov? | Yes                     |

### Subrecipient Name: M & S PAINTING INC

| TIN                                     |              |
|---|--------------|
| Unique Entity Identifer                 | KWDRDS1EM854 |
| POC Email Address                       |              |
| Address Line 1                          | PO BOX 6137  |
| Address Line 2                          |              |
| Address Line 3                          |              |
| City                                    | WILMINGTON   |
| State                                   | DE           |
| Zip                                     | 19804        |
| Zip+4                                   |              |
| Entity Type                             | Contractor   |
| Is the Recipient Registered in SAM.Gov? | Yes          |

### Subrecipient Name: BEAR INDUSTRIES INC

| TIN                                     |              |
|---|--------------|
| Unique Entity Identifer                 | U1C5CU4B7KC4 |
| POC Email Address                       |              |
| Address Line 1                          | 15 ALBE DR   |
| Address Line 2                          |              |
| Address Line 3                          |              |
| City                                    | NEWARK       |
| State                                   | DE           |
| Zip                                     | 19702        |
| Zip+4                                   |              |
| Entity Type                             | Contractor   |
| Is the Recipient Registered in SAM.Gov? | Yes          |

## Subrecipient Name: LIBERTY PARKS AND PLAYGROUNDS, INC.

| TIN                                     |                       |
|---|-----------------------|
| Unique Entity Identifer                 | YF5ZGKXL7JL1          |
| POC Email Address                       |                       |
| Address Line 1                          | 319 WHEATLEYS POND RD |
| Address Line 2                          |                       |
| Address Line 3                          |                       |
| City                                    | CLAYTON               |
| State                                   | DE                    |
| Zip                                     | 19938                 |
| Zip+4                                   |                       |
| Entity Type                             | Contractor            |
| Is the Recipient Registered in SAM.Gov? | Yes                   |

### Subrecipient Name: BRANDYWINE CONTRACTORS INC.

| TIN                     |                    |
|-------------------------|--------------------|
| Unique Entity Identifer | JUBZJ39EFW45       |
| POC Email Address       |                    |
| Address Line 1          | 34 INDUSTRIAL BLVD |
| Address Line 2          |                    |
| Address Line 3          |                    |
| City                    | NEW CASTLE         |
| State                   | DE                 |
| Zip                     | 19720              |
| Zip+4                   |                    |
| Entity Type             | Contractor         |
|                         |                    |

### Subrecipient Name: FLOORING SOLUTIONS INC

| TIN                                     |              |
|---|--------------|
| Unique Entity Identifer                 | CCMJKWAE7KL1 |
| POC Email Address                       |              |
| Address Line 1                          | 500 A STREET |
| Address Line 2                          |              |
| Address Line 3                          |              |
| City                                    | WILMINGTON   |
| State                                   | DE           |
| Zip                                     | 19801        |
| Zip+4                                   |              |
| Entity Type                             | Contractor   |
| Is the Recipient Registered in SAM.Gov? | Yes          |

#### Subrecipient Name: STEEL SUPPLIERS ERECTORS INC

| TIN                                     |                |
|---|----------------|
| Unique Entity Identifer                 | MZ2NFVWEKCV7   |
| POC Email Address                       |                |
| Address Line 1                          | 701 E FRONT ST |
| Address Line 2                          |                |
| Address Line 3                          |                |
| City                                    | WILMINGTON     |
| State                                   | DE             |
| Zip                                     | 19801          |
| Zip+4                                   |                |
| Entity Type                             | Contractor     |
| Is the Recipient Registered in SAM.Gov? | Yes            |

#### Subrecipient Name: MODULAR CONCEPTS

| TIN                     |               |
|-------------------------|---------------|
| Unique Entity Identifer | NS66NZB1HN33  |
| POC Email Address       |               |
| Address Line 1          | PO BOX 416803 |
| Address Line 2          |               |
| Address Line 3          |               |
| City                    | BOSTON        |
| State                   | DE            |
|                         |               |

| Zip                                     | 02241      |
|---|------------|
| Zip+4                                   |            |
| Entity Type                             | Contractor |
| Is the Recipient Registered in SAM.Gov? | Yes        |

### Subrecipient Name: VENTRESCA BROS INC

| TIN                                     |                   |
|---|-------------------|
| Unique Entity Identifer                 | C9ASKCLEB279      |
| POC Email Address                       |                   |
| Address Line 1                          | 2300 N DUPONT HWY |
| Address Line 2                          |                   |
| Address Line 3                          |                   |
| City                                    | NEW CASTLE        |
| State                                   | DE                |
| Zip                                     | 19720             |
| Zip+4                                   |                   |
| Entity Type                             | Contractor        |
| Is the Recipient Registered in SAM.Gov? | Yes               |

### Subrecipient Name: OLD WORLD TILEWORKS INC

| TIN                                     |               |  |
|---|---------------|--|
| Unique Entity Identifer                 | U57GBLMMUWN7  |  |
| POC Email Address                       |               |  |
| Address Line 1                          | P O BOX 15055 |  |
| Address Line 2                          |               |  |
| Address Line 3                          |               |  |
| City                                    | NEWARK        |  |
| State                                   | DE            |  |
| Zip                                     | 19711         |  |
| Zip+4                                   |               |  |
| Entity Type                             | Contractor    |  |
| Is the Recipient Registered in SAM.Gov? | Yes           |  |

### Subrecipient Name: NORTH EAST CONTRACTORS INC

| TIN                     |                |
|-------------------------|----------------|
| Unique Entity Identifer | U5Q6C5ZGYEJ6   |
| POC Email Address       |                |
| Address Line 1          | 87 BLUE HEN DR |
| Address Line 2          |                |
|                         |                |

| Address Line 3                          |            |
|---|------------|
| City                                    | NEWARK     |
| State                                   | DE         |
| Zip                                     | 19713      |
| Zip+4                                   |            |
| Entity Type                             | Contractor |
| Is the Recipient Registered in SAM.Gov? | Yes        |

### Subrecipient Name: MID-ATLANTIC DISMANTLEMENT CORPORATION

| TIN                                     |              |  |
|---|--------------|--|
| Unique Entity Identifer                 | MWJ8H5J25S65 |  |
| POC Email Address                       |              |  |
| Address Line 1                          | P O BOX 1192 |  |
| Address Line 2                          |              |  |
| Address Line 3                          |              |  |
| City                                    | DOVER        |  |
| State                                   | DE           |  |
| Zip                                     | 19903        |  |
| Zip+4                                   |              |  |
| Entity Type                             | Contractor   |  |
| Is the Recipient Registered in SAM.Gov? | Yes          |  |

### Subrecipient Name: UNION WHOLESALE COMPANY

| TIN                                     |                |
|---|----------------|
| Unique Entity Identifer                 | GX18EXV3E9K8   |
| POC Email Address                       |                |
| Address Line 1                          | 500 E FRONT ST |
| Address Line 2                          |                |
| Address Line 3                          |                |
| City                                    | Wilmington     |
| State                                   | DE             |
| Zip                                     | 19801          |
| Zip+4                                   |                |
| Entity Type                             | Contractor     |
| Is the Recipient Registered in SAM.Gov? | Yes            |

### Subrecipient Name: R & R ELECTRIC INC

| TIN                     |              |
|-------------------------|--------------|
| Unique Entity Identifer | M8N4J2D74VD1 |
|                         |              |

| POC Email Address   |                         |
|---|-------------------------|
| Address Line 1  | 3782 BARRATTS CHAPEL RD |
| Address Line 2  |                         |
| Address Line 3  |                         |
| City  | FREDERICA               |
| State   | DE                      |
| Zip   | 19946                   |
| Zip+4   |                         |
| Entity Type   | Contractor              |
| Is the Recipient Registered in SAM.Gov?   | Yes                     |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                      |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                      |

## Subrecipient Name: THE RESTORATION GUYS LLC

| TIN   |              |
|---|--------------|
| Unique Entity Identifer   | E3Q4MRMTAGL7 |
| POC Email Address   |              |
| Address Line 1  | PO BOX 805   |
| Address Line 2  |              |
| Address Line 3  |              |
| City  | MILFORD      |
| State   | DE           |
| Zip   | 19963        |
| Zip+4   |              |
| Entity Type   | Contractor   |
| Is the Recipient Registered in SAM.Gov?   | Yes          |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No           |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No           |

## Subrecipient Name: SCHLOSSER & ASSOCIATES

| TIN                     |                     |
|-------------------------|---------------------|
| Unique Entity Identifer | HXN3DL2QUN23        |
| POC Email Address       |                     |
| Address Line 1          | 2047 Sunset Lake Rd |
| Address Line 2          |                     |
| Address Line 3          |                     |
| City                    | Newark              |

|   | 1          |
|---|------------|
| State   | DE         |
| Zip   | 19702      |
| Zip+4   |            |
| Entity Type   | Contractor |
| Is the Recipient Registered in SAM.Gov?   | No         |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No         |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No         |

### Subrecipient Name: Dover Police Department

| TIN                                     | 516000092              |
|---|------------------------|
| Unique Entity Identifer                 | XQEPG3KPBLQ9           |
| POC Email Address                       |                        |
| Address Line 1                          | 400 South Queen Street |
| Address Line 2                          |                        |
| Address Line 3                          |                        |
| City                                    | Dover                  |
| State                                   | DE                     |
| Zip                                     | 19904                  |
| Zip+4                                   |                        |
| Entity Type                             | Subrecipient           |
| Is the Recipient Registered in SAM.Gov? | Yes                    |

### Subrecipient Name: Wilmington Police Department

| TIN                                     |                      |
|---|----------------------|
| Unique Entity Identifer                 | J693K7ZV8A33         |
| POC Email Address                       |                      |
| Address Line 1                          | 300 N. Walnut Street |
| Address Line 2                          |                      |
| Address Line 3                          |                      |
| City                                    | Wilmington           |
| State                                   | DE                   |
| Zip                                     | 19801                |
| Zip+4                                   |                      |
| Entity Type                             | Subrecipient         |
| Is the Recipient Registered in SAM.Gov? | Yes                  |

### Subrecipient Name: Newark Housing Authority

| Unique Entity Identifer                 | M47GLFNYLEA7  |
|---|---------------|
| POC Email Address                       |               |
| Address Line 1                          | 313 E Main St |
| Address Line 2                          |               |
| Address Line 3                          |               |
| City                                    | Newark        |
| State                                   | DE            |
| Zip                                     | 19711         |
| Zip+4                                   |               |
| Entity Type                             | Subrecipient  |
| Is the Recipient Registered in SAM.Gov? | Yes           |

### Subrecipient Name: Stop the Violence Prayer Chain Foundation

| TIN                                     |                  |
|---|------------------|
| Unique Entity Identifer                 | GXZ1MEHN26Z3     |
| POC Email Address                       |                  |
| Address Line 1                          | 810 E Basin Road |
| Address Line 2                          | E2               |
| Address Line 3                          |                  |
| City                                    | New Castle       |
| State                                   | DE               |
| Zip                                     | 19720            |
| Zip+4                                   |                  |
| Entity Type                             | Subrecipient     |
| Is the Recipient Registered in SAM.Gov? | Yes              |

## Subrecipient Name: Faithful Friends Animal Society

| TIN                                     | 510410508       |
|---|-----------------|
| Unique Entity Identifer                 | SBLKD6FL28A3    |
| POC Email Address                       |                 |
| Address Line 1                          | 12 Germay Drive |
| Address Line 2                          |                 |
| Address Line 3                          |                 |
| City                                    | Wilmington,     |
| State                                   | DE              |
| Zip                                     | 19804           |
| Zip+4                                   |                 |
| Entity Type                             | Subrecipient    |
| Is the Recipient Registered in SAM.Gov? | Yes             |

## Subrecipient Name: LATINA MARKETING LLC

| TIN                                     |                |
|---|----------------|
| Unique Entity Identifer                 | PY4NZ9VLZ779   |
| POC Email Address                       |                |
| Address Line 1                          | 86 N DRAGON DR |
| Address Line 2                          |                |
| Address Line 3                          |                |
| City                                    | BEAR           |
| State                                   | DE             |
| Zip                                     | 19701          |
| Zip+4                                   |                |
| Entity Type                             | Subrecipient   |
| Is the Recipient Registered in SAM.Gov? | Yes            |

### Subrecipient Name: HELP Initiative, Inc.

| TIN                                     |                     |
|---|---------------------|
| Unique Entity Identifer                 | FR9KX4KKBBQ5        |
| POC Email Address                       |                     |
| Address Line 1                          | 100 W Loockerman St |
| Address Line 2                          | STE 1B              |
| Address Line 3                          |                     |
| City                                    | Dover               |
| State                                   | DE                  |
| Zip                                     | 19904               |
| Zip+4                                   |                     |
| Entity Type                             | Subrecipient        |
| Is the Recipient Registered in SAM.Gov? | Yes                 |

## Subrecipient Name: FOX ROTHSCHILD LLP

| TIN                     |                 |
|-------------------------|-----------------|
| Unique Entity Identifer | PE7CHHANET18    |
| POC Email Address       |                 |
| Address Line 1          | 919 N MARKET ST |
| Address Line 2          |                 |
| Address Line 3          |                 |
| City                    | WILMINGTON      |
| State                   | DE              |
| Zip                     | 19801           |
|                         |                 |

| Zip+4                                   |            |
|---|------------|
| Entity Type                             | Contractor |
| Is the Recipient Registered in SAM.Gov? | Yes        |

### Subrecipient Name: PLYMOUTH ENVIRONMENTAL CO INC

| TIN                                     |              |
|---|--------------|
| Unique Entity Identifer                 | L7ENRH7LNFL9 |
| POC Email Address                       |              |
| Address Line 1                          | 923 HAWS AVE |
| Address Line 2                          |              |
| Address Line 3                          |              |
| City                                    | NORRISTOWN   |
| State                                   | PA           |
| Zip                                     | 19401        |
| Zip+4                                   |              |
| Entity Type                             | Contractor   |
| Is the Recipient Registered in SAM.Gov? | Yes          |

#### Subrecipient Name: ADVANCED POWER CONTROL INC

| TIN                                     |              |
|---|--------------|
| Unique Entity Identifer                 | UEVHARXRSJJ7 |
| POC Email Address                       |              |
| Address Line 1                          | 15 READS WAY |
| Address Line 2                          |              |
| Address Line 3                          |              |
| City                                    | NEW CASTLE   |
| State                                   | DE           |
| Zip                                     | 19720        |
| Zip+4                                   |              |
| Entity Type                             | Contractor   |
| Is the Recipient Registered in SAM.Gov? | Yes          |

## Subrecipient Name: Facility Dynamics Engineering Corporation

| TIN                     |                        |
|-------------------------|------------------------|
| Unique Entity Identifer | DUNJZHTRACY1           |
| POC Email Address       |                        |
| Address Line 1          | 6760 ALEXANDER BELL DR |
| Address Line 2          | STE 200                |
| Address Line 3          |                        |
|                         |                        |

| City                                    | COLUMBIA   |
|---|------------|
| State                                   | MD         |
| Zip                                     | 21046      |
| Zip+4                                   |            |
| Entity Type                             | Contractor |
| Is the Recipient Registered in SAM.Gov? | Yes        |

## Subrecipient Name: TALKSPACE LLC

| TIN                                     |               |
|---|---------------|
| Unique Entity Identifer                 | Y1UXYA44HTF8  |
| POC Email Address                       |               |
| Address Line 1                          | 2578 BROADWAY |
| Address Line 2                          | #607          |
| Address Line 3                          |               |
| City                                    | NEW YORK      |
| State                                   | NY            |
| Zip                                     | 10025         |
| Zip+4                                   |               |
| Entity Type                             | Contractor    |
| Is the Recipient Registered in SAM.Gov? | Yes           |

## Subrecipient Name: JOURNAL TECHNOLOGIES INC

| TIN                                     |              |
|---|--------------|
| Unique Entity Identifer                 | UARVENPKH9L8 |
| POC Email Address                       |              |
| Address Line 1                          | 843 S 100 W  |
| Address Line 2                          |              |
| Address Line 3                          |              |
| City                                    | LOGAN        |
| State                                   | UT           |
| Zip                                     | 84321        |
| Zip+4                                   |              |
| Entity Type                             | Contractor   |
| Is the Recipient Registered in SAM.Gov? | Yes          |

### Subrecipient Name: RMR Inc

| TIN                     |              |
|-------------------------|--------------|
| Unique Entity Identifer | WAP5FJ1HUJA7 |
| POC Email Address       |              |
|                         |              |

| Address Line 1                          | 451 STELLA DR |
|---|---------------|
| Address Line 2                          |               |
| Address Line 3                          |               |
| City                                    | HOCKESSIN     |
| State                                   | DE            |
| Zip                                     | 19707         |
| Zip+4                                   |               |
| Entity Type                             | Contractor    |
| Is the Recipient Registered in SAM.Gov? | Yes           |

### Subrecipient Name: ENTERPRISE MASONRY CORPORATION

| TIN                                     |                   |
|---|-------------------|
| Unique Entity Identifer                 | T6BDZJKMBY91      |
| POC Email Address                       |                   |
| Address Line 1                          | 3010 BELLEVUE AVE |
| Address Line 2                          |                   |
| Address Line 3                          |                   |
| City                                    | WILMINGTON        |
| State                                   | DE                |
| Zip                                     | 19802             |
| Zip+4                                   |                   |
| Entity Type                             | Contractor        |
| Is the Recipient Registered in SAM.Gov? | Yes               |

## Subrecipient Name: DELAWARE AUDIO VISUAL INTEGRATION & DESIGN

| TIN                                     |              |
|---|--------------|
| Unique Entity Identifer                 | XDN2HJ4SZJF3 |
| POC Email Address                       |              |
| Address Line 1                          | 38 READS WAY |
| Address Line 2                          |              |
| Address Line 3                          |              |
| City                                    | NEW CASTLE   |
| State                                   | DE           |
| Zip                                     | 19720        |
| Zip+4                                   |              |
| Entity Type                             | Contractor   |
| Is the Recipient Registered in SAM.Gov? | Yes          |

#### Subrecipient Name: SYMBIOSYS CONSULTING LLC DBA BELSHAM

| TIN                                     |                     |
|---|---------------------|
| Unique Entity Identifer                 | Z95YYEJPR6P5        |
| POC Email Address                       |                     |
| Address Line 1                          | 920 JUSTISON STREET |
| Address Line 2                          |                     |
| Address Line 3                          |                     |
| City                                    | WILMINGTON          |
| State                                   | DE                  |
| Zip                                     | 19801               |
| Zip+4                                   |                     |
| Entity Type                             | Contractor          |
| Is the Recipient Registered in SAM.Gov? | Yes                 |

## Subrecipient Name: DITTMAR FAMILY FARMS LLC

| TIN                                     |                       |
|---|-----------------------|
| Unique Entity Identifer                 | GNNFGPYMWKK9          |
| POC Email Address                       |                       |
| Address Line 1                          | 644 PARADISE ALLEY RD |
| Address Line 2                          |                       |
| Address Line 3                          |                       |
| City                                    | FELTON                |
| State                                   | DE                    |
| Zip                                     | 19943                 |
| Zip+4                                   |                       |
| Entity Type                             | Subrecipient          |
| Is the Recipient Registered in SAM.Gov? | Yes                   |

### Subrecipient Name: ALLIANCE FOR HOPE INTERNATIONAL

| TIN                     |                           |
|-------------------------|---------------------------|
| Unique Entity Identifer | JJENMA7J9MT4              |
| POC Email Address       |                           |
| Address Line 1          | 101 W BROADWAY SUITE 1770 |
| Address Line 2          |                           |
| Address Line 3          |                           |
| City                    | SAN DIEGO                 |
| State                   | CA                        |
| Zip                     | 92101                     |
| Zip+4                   |                           |
| Entity Type             | Contractor                |

### Subrecipient Name: WILLIAM E POWERS JR

| TIN                                     |                          |
|---|--------------------------|
| Unique Entity Identifer                 | RBXYFK5KKYU2             |
| POC Email Address                       |                          |
| Address Line 1                          | 324 VANDYKE-MD LINE ROAD |
| Address Line 2                          |                          |
| Address Line 3                          |                          |
| City                                    | TOWNSEND                 |
| State                                   | DE                       |
| Zip                                     | 19734                    |
| Zip+4                                   |                          |
| Entity Type                             | Subrecipient             |
| Is the Recipient Registered in SAM.Gov? | Yes                      |

#### Subrecipient Name: SHANE MARVEL

| TIN   |                   |
|---|-------------------|
| Unique Entity Identifer   |                   |
| POC Email Address   |                   |
| Address Line 1  | 3429 HORSESHOE RD |
| Address Line 2  |                   |
| Address Line 3  |                   |
| City  | SEAFORD           |
| State   | DE                |
| Zip   | 19973             |
| Zip+4   |                   |
| Entity Type   | Subrecipient      |
| Is the Recipient Registered in SAM.Gov?   | No                |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                |

#### Subrecipient Name: BENNETT ORCHARDS LLC

| XF7AELE95G36    |
|-----------------|
|                 |
| 30993 ARMORY RD |
|                 |
|                 |

| Address Line 3                          |              |
|---|--------------|
| City                                    | FRANKFORD    |
| State                                   | DE           |
| Zip                                     | 19945        |
| Zip+4                                   |              |
| Entity Type                             | Subrecipient |
| Is the Recipient Registered in SAM.Gov? | Yes          |

# Subrecipient Name: FIFER ORCHARDS INC

| TIN                                     |                        |
|---|------------------------|
| Unique Entity Identifer                 | YJT8L27B94B4           |
| POC Email Address                       |                        |
| Address Line 1                          | 1919 ALLABANDS MILL RD |
| Address Line 2                          |                        |
| Address Line 3                          |                        |
| City                                    | WYOMING                |
| State                                   | DE                     |
| Zip                                     | 19934                  |
| Zip+4                                   |                        |
| Entity Type                             | Subrecipient           |
| Is the Recipient Registered in SAM.Gov? | Yes                    |

### Subrecipient Name: COMMONWEALTH CONSTRUCTION CO

| TIN                                     |                       |
|---|-----------------------|
| Unique Entity Identifer                 | HPUCSMLBNHH5          |
| POC Email Address                       |                       |
| Address Line 1                          | 2317 PENNSYLVANIA AVE |
| Address Line 2                          |                       |
| Address Line 3                          |                       |
| City                                    | Wilmington            |
| State                                   | DE                    |
| Zip                                     | 19806                 |
| Zip+4                                   |                       |
| Entity Type                             | Contractor            |
| Is the Recipient Registered in SAM.Gov? | Yes                   |

### Subrecipient Name: JOHNSON CONTROLS INC

| TIN                     |              |
|-------------------------|--------------|
| Unique Entity Identifer | Z2N8C3NL8FW5 |
|                         |              |

| POC Email Address                       |                    |
|---|--------------------|
| Address Line 1                          | 5757 N GREENBAY RD |
| Address Line 2                          |                    |
| Address Line 3                          |                    |
| City                                    | MILWAUKEE          |
| State                                   | WI                 |
| Zip                                     | 53209              |
| Zip+4                                   |                    |
| Entity Type                             | Contractor         |
| Is the Recipient Registered in SAM.Gov? | Yes                |

### Subrecipient Name: ARUGIE ENTERPRISES CORPORATION

| TIN                                     |                    |
|---|--------------------|
| Unique Entity Identifer                 | MG87L98JG3V9       |
| POC Email Address                       |                    |
| Address Line 1                          | 612 S COLONIAL AVE |
| Address Line 2                          |                    |
| Address Line 3                          |                    |
| City                                    | WILMINGTON         |
| State                                   | DE                 |
| Zip                                     | 19805              |
| Zip+4                                   |                    |
| Entity Type                             | Contractor         |
| Is the Recipient Registered in SAM.Gov? | Yes                |

### Subrecipient Name: Newark Senior Center

| TIN                                     |                     |
|---|---------------------|
| Unique Entity Identifer                 | VYNJXH7BMK17        |
| POC Email Address                       |                     |
| Address Line 1                          | 200 WHITE CHAPEL DR |
| Address Line 2                          |                     |
| Address Line 3                          |                     |
| City                                    | NEWARK              |
| State                                   | DE                  |
| Zip                                     | 19713               |
| Zip+4                                   |                     |
| Entity Type                             | Subrecipient        |
| Is the Recipient Registered in SAM.Gov? | Yes                 |

#### Subrecipient Name: CONDUENT PUBLIC HEALTH SOLUTIONS INC

| TIN                                     |                  |
|---|------------------|
| Unique Entity Identifer                 | JFWFMFN4KQ77     |
| POC Email Address                       |                  |
| Address Line 1                          | 100 CAMPUS DRIVE |
| Address Line 2                          |                  |
| Address Line 3                          |                  |
| City                                    | FLORHAM PARK     |
| State                                   | NJ               |
| Zip                                     | 07932            |
| Zip+4                                   |                  |
| Entity Type                             | Contractor       |
| Is the Recipient Registered in SAM.Gov? | Yes              |

## Subrecipient Name: EXPRESS SERVICES

| TIN                                     |                     |
|---|---------------------|
| Unique Entity Identifer                 | SZPTC94EX1H4        |
| POC Email Address                       |                     |
| Address Line 1                          | 9701 BOARDWALK BLVD |
| Address Line 2                          |                     |
| Address Line 3                          |                     |
| City                                    | OKLAHOMA CITY       |
| State                                   | OK                  |
| Zip                                     | 73162               |
| Zip+4                                   |                     |
| Entity Type                             | Contractor          |
| Is the Recipient Registered in SAM.Gov? | Yes                 |

# Subrecipient Name: FOREVER MEDIA OF DE LLC

| TIN                     |                   |
|-------------------------|-------------------|
| Unique Entity Identifer | W7MFB7BSP5N6      |
| POC Email Address       |                   |
| Address Line 1          | 2727 SHIPLEY ROAD |
| Address Line 2          |                   |
| Address Line 3          |                   |
| City                    | WILMINGTON        |
| State                   | DE                |
| Zip                     | 19810             |
| Zip+4                   |                   |
|                         |                   |

| Entity Type                             | Contractor |
|---|------------|
| Is the Recipient Registered in SAM.Gov? | Yes        |

### Subrecipient Name: R C FABRICATORS INC

| TIN                                     |                     |
|---|---------------------|
| Unique Entity Identifer                 | JL8NJALERA79        |
| POC Email Address                       |                     |
| Address Line 1                          | 824 N LOCUST STREET |
| Address Line 2                          |                     |
| Address Line 3                          |                     |
| City                                    | WILMINGTON          |
| State                                   | DE                  |
| Zip                                     | 19801               |
| Zip+4                                   |                     |
| Entity Type                             | Contractor          |
| Is the Recipient Registered in SAM.Gov? | Yes                 |

## Subrecipient Name: DELAWARE PHARMACISTS SOCIETY

| TIN   | 510076726    |
|---|--------------|
| Unique Entity Identifer   | TKPGACMQANS4 |
| POC Email Address   |              |
| Address Line 1  | PO BOX 454   |
| Address Line 2  |              |
| Address Line 3  |              |
| City  | SMYRNA       |
| State   | DE           |
| Zip   | 19977        |
| Zip+4   |              |
| Entity Type   | Contractor   |
| Is the Recipient Registered in SAM.Gov?   | Yes          |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No           |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No           |

### Subrecipient Name: GOODEN AVENUE LLC

| TIN                     | 873454666                 |
|-------------------------|---------------------------|
| Unique Entity Identifer |                           |
| POC Email Address       |                           |
| Address Line 1          | 1406 FORREST AVE, SUITE B |
|                         |                           |

| Address Line 2                          |            |
|---|------------|
| Address Line 3                          |            |
| City                                    | Dover      |
| State                                   | DE         |
| Zip                                     | 19904      |
| Zip+4                                   |            |
| Entity Type                             | Contractor |
| Is the Recipient Registered in SAM.Gov? | N/A        |

# Subrecipient Name: Millcroft

| TIN   | 842344739            |
|---|----------------------|
| Unique Entity Identifer   |                      |
| POC Email Address   |                      |
| Address Line 1  | 255 Possum Park Road |
| Address Line 2  |                      |
| Address Line 3  |                      |
| City  | Newark               |
| State   | DE                   |
| Zip   | 19711                |
| Zip+4   |                      |
| Entity Type   | Beneficiary          |
| Is the Recipient Registered in SAM.Gov?   | No                   |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                   |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                   |

### Subrecipient Name: Foulk Manor North

| TIN                                     | 842344739     |  |
|---|---------------|--|
| Unique Entity Identifer                 |               |  |
| POC Email Address                       |               |  |
| Address Line 1                          | 1212 Foulk Rd |  |
| Address Line 2                          |               |  |
| Address Line 3                          |               |  |
| City                                    | Wilmington    |  |
| State                                   | DE            |  |
| Zip                                     | 19803         |  |
| Zip+4                                   |               |  |
| Entity Type                             | Beneficiary   |  |
| Is the Recipient Registered in SAM.Gov? | No            |  |

| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No |
|---|----|
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No |

### Subrecipient Name: DELAWARE COMMUNITY FOUNDATION

| TIN                                     | 222804785    |
|---|--------------|
| Unique Entity Identifer                 | DFRSGEGKD6M6 |
| POC Email Address                       |              |
| Address Line 1                          | PO Box 1636  |
| Address Line 2                          |              |
| Address Line 3                          |              |
| City                                    | Wilmington   |
| State                                   | DE           |
| Zip                                     | 19899        |
| Zip+4                                   |              |
| Entity Type                             | Subrecipient |
| Is the Recipient Registered in SAM.Gov? | Yes          |

#### Subrecipient Name: DTCC Owens Campus

| TIN                                     | 516000279        |
|---|------------------|
| Unique Entity Identifer                 |                  |
| POC Email Address                       |                  |
| Address Line 1                          | 21179 COLLEGE DR |
| Address Line 2                          |                  |
| Address Line 3                          |                  |
| City                                    | GEORGETOWN       |
| State                                   | DE               |
| Zip                                     | 19947            |
| Zip+4                                   |                  |
| Entity Type                             | Contractor       |
| Is the Recipient Registered in SAM.Gov? | Yes              |

## Subrecipient Name: DTCC WILMINGTON CAMPUS

| TIN                     | 516000279       |
|-------------------------|-----------------|
| Unique Entity Identifer | YN4MB2F33BD7    |
| POC Email Address       |                 |
| Address Line 1          | 300 N ORANGE ST |
| Address Line 2          |                 |
| Address Line 3          |                 |

| City                                    | Wilmington |
|---|------------|
| State                                   | DE         |
| Zip                                     | 19801      |
| Zip+4                                   |            |
| Entity Type                             | Contractor |
| Is the Recipient Registered in SAM.Gov? | Yes        |

### Subrecipient Name: DTCC STANTON CAMPUS

| TIN                                     | 516000279                 |
|---|---------------------------|
| Unique Entity Identifer                 |                           |
| POC Email Address                       |                           |
| Address Line 1                          | 400 STANTON-CHRISTIANA RD |
| Address Line 2                          |                           |
| Address Line 3                          |                           |
| City                                    | NEWARK                    |
| State                                   | DE                        |
| Zip                                     | 19713                     |
| Zip+4                                   |                           |
| Entity Type                             | Contractor                |
| Is the Recipient Registered in SAM.Gov? | Yes                       |

## Subrecipient Name: DTCC TERRY CAMPUS

| TIN                                     | 516000279     |
|---|---------------|
| Unique Entity Identifer                 |               |
| POC Email Address                       |               |
| Address Line 1                          | 100 CAMPUS DR |
| Address Line 2                          |               |
| Address Line 3                          |               |
| City                                    | Dover         |
| State                                   | DE            |
| Zip                                     | 19901         |
| Zip+4                                   |               |
| Entity Type                             | Contractor    |
| Is the Recipient Registered in SAM.Gov? | Yes           |

## Subrecipient Name: LANDMARK ENGINEERING INC

| TIN                     | 510300485    |
|-------------------------|--------------|
| Unique Entity Identifer | ZLNYZLMSBGS9 |
| POC Email Address       |              |
|                         |              |

| Address Line 1                          | 200 CONTINENTAL DRIVE |
|---|-----------------------|
| Address Line 2                          |                       |
| Address Line 3                          |                       |
| City                                    | Newark                |
| State                                   | DE                    |
| Zip                                     | 19713                 |
| Zip+4                                   |                       |
| Entity Type                             | Contractor            |
| Is the Recipient Registered in SAM.Gov? | Yes                   |

## Subrecipient Name: SYNERFAC INC

| TIN                                     | 510302216             |
|---|-----------------------|
| Unique Entity Identifer                 | YGK7XZ3QNPY8          |
| POC Email Address                       |                       |
| Address Line 1                          | 100 WEST COMMONS BLVD |
| Address Line 2                          |                       |
| Address Line 3                          |                       |
| City                                    | NEW CASTLE            |
| State                                   | DE                    |
| Zip                                     | 19720                 |
| Zip+4                                   |                       |
| Entity Type                             | Contractor            |
| Is the Recipient Registered in SAM.Gov? | Yes                   |

# Subrecipient Name: BUCK SIMPERS ARCHITECT AND ASSOCIATES

| TIN                                     | 510267133           |
|---|---------------------|
| Unique Entity Identifer                 | L1ZYHMBKJFU3        |
| POC Email Address                       |                     |
| Address Line 1                          | 954 JUSTISON STREET |
| Address Line 2                          |                     |
| Address Line 3                          |                     |
| City                                    | Wilmington          |
| State                                   | DE                  |
| Zip                                     | 19801               |
| Zip+4                                   |                     |
| Entity Type                             | Contractor          |
| Is the Recipient Registered in SAM.Gov? | Yes                 |

#### Subrecipient Name: TEVEBAUGH ASSO

| TIN                                     | 510301521         |
|---|-------------------|
| Unique Entity Identifer                 | L8TLQ6DNAKN6      |
| POC Email Address                       |                   |
| Address Line 1                          | 2 MILL RD STE 210 |
| Address Line 2                          |                   |
| Address Line 3                          |                   |
| City                                    | Wilmington        |
| State                                   | DE                |
| Zip                                     | 19806             |
| Zip+4                                   |                   |
| Entity Type                             | Contractor        |
| Is the Recipient Registered in SAM.Gov? | Yes               |

# Subrecipient Name: GIPE ASSOC INC

| TIN                                     | 521164876         |
|---|-------------------|
| Unique Entity Identifer                 | FPTYJLCED6L9      |
| POC Email Address                       |                   |
| Address Line 1                          | 8719 Brooks Drive |
| Address Line 2                          |                   |
| Address Line 3                          |                   |
| City                                    | EASTON            |
| State                                   | MD                |
| Zip                                     | 21601             |
| Zip+4                                   |                   |
| Entity Type                             | Contractor        |
| Is the Recipient Registered in SAM.Gov? | Yes               |

## Subrecipient Name: PAWS for People

| TIN                     | 760780197        |  |
|-------------------------|------------------|--|
| Unique Entity Identifer |                  |  |
| POC Email Address       |                  |  |
| Address Line 1          | 703 Dawson Drive |  |
| Address Line 2          |                  |  |
| Address Line 3          |                  |  |
| City                    | Newark           |  |
| State                   | DE               |  |
| Zip                     | 19713            |  |
| Zip+4                   |                  |  |
| Entity Type             | Subrecipient     |  |
|                         |                  |  |

### Subrecipient Name: HEALTH MANAGEMENT ASSOC INC

| TIN                                     |                               |
|---|-------------------------------|
| Unique Entity Identifer                 | JGUCD3NLUGF5                  |
| POC Email Address                       |                               |
| Address Line 1                          | 5811 PELICAN BAY BLVD STE 500 |
| Address Line 2                          |                               |
| Address Line 3                          |                               |
| City                                    | NAPLES                        |
| State                                   | FL                            |
| Zip                                     | 34108                         |
| Zip+4                                   |                               |
| Entity Type                             | Contractor                    |
| Is the Recipient Registered in SAM.Gov? | Yes                           |

#### Subrecipient Name: Business Interface of Maryland

| TIN   | 161771385                         |
|---|-----------------------------------|
| Unique Entity Identifer   | RQQ6MGBD1K14                      |
| POC Email Address   |                                   |
| Address Line 1  | 800 North king Street Plaza Level |
| Address Line 2  |                                   |
| Address Line 3  |                                   |
| City  | Wilmington                        |
| State   | DE                                |
| Zip   | 19801                             |
| Zip+4   |                                   |
| Entity Type   | Contractor                        |
| Is the Recipient Registered in SAM.Gov?   | Yes                               |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                                |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                                |

#### Subrecipient Name: QUIDEL CORP

| VNAKZRHYAUC7          |
|-----------------------|
|                       |
| 9975 Summers Ridge Rd |
|                       |
|                       |

| Address Line 3                          |            |
|---|------------|
| City                                    | San Diego  |
| State                                   | CA         |
| Zip                                     | 92121      |
| Zip+4                                   |            |
| Entity Type                             | Contractor |
| Is the Recipient Registered in SAM.Gov? | Yes        |

## Subrecipient Name: LIVING WELL PHARMACY LLC

| TIN   | 451711997           |
|---|---------------------|
| Unique Entity Identifer   |                     |
| POC Email Address   |                     |
| Address Line 1  | 723 N. Broad Street |
| Address Line 2  |                     |
| Address Line 3  |                     |
| City  | Middletown          |
| State   | DE                  |
| Zip   | 19709               |
| Zip+4   |                     |
| Entity Type   | Contractor          |
| Is the Recipient Registered in SAM.Gov?   | No                  |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                  |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                  |

## Subrecipient Name: Brandywine Counseling and Community Service

| TIN                                     | 510278050             |
|---|-----------------------|
| Unique Entity Identifer                 | JK59QVK99EN7          |
| POC Email Address                       |                       |
| Address Line 1                          | 2713 Lancaster Avenue |
| Address Line 2                          |                       |
| Address Line 3                          |                       |
| City                                    | Wilmington            |
| State                                   | DE                    |
| Zip                                     | 19805                 |
| Zip+4                                   |                       |
| Entity Type                             | Subrecipient          |
| Is the Recipient Registered in SAM.Gov? | Yes                   |

#### Subrecipient Name: ASSURANCE MEDIA LLC

| TIN                                     | 270530435                |
|---|--------------------------|
| Unique Entity Identifer                 | XT18FNQVJHN9             |
| POC Email Address                       |                          |
| Address Line 1                          | 590 Century Blvd Suite B |
| Address Line 2                          |                          |
| Address Line 3                          |                          |
| City                                    | Wilmington               |
| State                                   | DE                       |
| Zip                                     | 19808                    |
| Zip+4                                   |                          |
| Entity Type                             | Contractor               |
| Is the Recipient Registered in SAM.Gov? | Yes                      |

## Subrecipient Name: GUIDESOFT INC DBA KNOWLEDGE SERVICES

| TIN                                     | 455595672                 |
|---|---------------------------|
| Unique Entity Identifer                 | MSCHME9R5N37              |
| POC Email Address                       |                           |
| Address Line 1                          | 1700 Market St Suite 1005 |
| Address Line 2                          |                           |
| Address Line 3                          |                           |
| City                                    | Philadelphia              |
| State                                   | PA                        |
| Zip                                     | 19103                     |
| Zip+4                                   |                           |
| Entity Type                             | Contractor                |
| Is the Recipient Registered in SAM.Gov? | Yes                       |

#### Subrecipient Name: BOYS & GIRLS CLUB OF DELAWARE

| TIN                     |                        |
|-------------------------|------------------------|
| Unique Entity Identifer | DNHQEHJG5TA7           |
| POC Email Address       |                        |
| Address Line 1          | 669 South Union Street |
| Address Line 2          |                        |
| Address Line 3          |                        |
| City                    | Wilmington             |
| State                   | DE                     |
| Zip                     | 19805                  |
| Zip+4                   |                        |

| Entity Type                             | Subrecipient |
|---|--------------|
| Is the Recipient Registered in SAM.Gov? | Yes          |

### Subrecipient Name: SEAFORD SCHOOL DISTRICT OFFICE

| TIN                                     |                              |
|---|------------------------------|
| Unique Entity Identifer                 | XPLXMN2W9SM8                 |
| POC Email Address                       |                              |
| Address Line 1                          | 390 North Market Street Ext. |
| Address Line 2                          |                              |
| Address Line 3                          |                              |
| City                                    | Seaford                      |
| State                                   | DE                           |
| Zip                                     | 19973                        |
| Zip+4                                   |                              |
| Entity Type                             | Subrecipient                 |
| Is the Recipient Registered in SAM.Gov? | Yes                          |

## Subrecipient Name: HEALTHY FOODS FOR HEALTHY KIDS

| TIN                                     |              |
|---|--------------|
| Unique Entity Identifer                 | JSMBK7TNPVH3 |
| POC Email Address                       |              |
| Address Line 1                          | PO Box 847   |
| Address Line 2                          |              |
| Address Line 3                          |              |
| City                                    | Hockessin    |
| State                                   | DE           |
| Zip                                     | 19707        |
| Zip+4                                   |              |
| Entity Type                             | Subrecipient |
| Is the Recipient Registered in SAM.Gov? | Yes          |

#### Subrecipient Name: T A FARMS LLC

| TIN                     |                  |
|-------------------------|------------------|
| Unique Entity Identifer | T3K4MAJK97F3     |
| POC Email Address       |                  |
| Address Line 1          | 4664 Mud Mill Rd |
| Address Line 2          |                  |
| Address Line 3          |                  |
| City                    | Camden Wyoming   |

| State                                   | DE           |
|---|--------------|
| Zip                                     | 19934        |
| Zip+4                                   |              |
| Entity Type                             | Subrecipient |
| Is the Recipient Registered in SAM.Gov? | Yes          |

### Subrecipient Name: CONSCIOUS CONNECTIONS INC

| TIN                                     |                   |
|---|-------------------|
| Unique Entity Identifer                 | R9BCZ2GV4XX3      |
| POC Email Address                       |                   |
| Address Line 1                          | 802 W 29th Street |
| Address Line 2                          |                   |
| Address Line 3                          |                   |
| City                                    | Wilmington        |
| State                                   | DE                |
| Zip                                     | 19802             |
| Zip+4                                   |                   |
| Entity Type                             | Subrecipient      |
| Is the Recipient Registered in SAM.Gov? | Yes               |

# Subrecipient Name: COLUMBIA TELECOMMUNICATIONS CORPORATION

| TIN                                     | 521442373            |
|---|----------------------|
| Unique Entity Identifer                 | GVJXGATFVKF1         |
| POC Email Address                       |                      |
| Address Line 1                          | 10613 Concord Street |
| Address Line 2                          |                      |
| Address Line 3                          |                      |
| City                                    | Kensington           |
| State                                   | MD                   |
| Zip                                     | 20895                |
| Zip+4                                   |                      |
| Entity Type                             | Contractor           |
| Is the Recipient Registered in SAM.Gov? | Yes                  |

### Subrecipient Name: MEDIACOM DELAWARE LLC

| TIN                     | 061433421      |
|-------------------------|----------------|
| Unique Entity Identifer | JDG4RELTQN44   |
| POC Email Address       |                |
| Address Line 1          | 1 Mediacom Way |
|                         |                |

| Address Line 2                          |            |
|---|------------|
| Address Line 3                          |            |
| City                                    | Chester    |
| State                                   | NY         |
| Zip                                     | 10918      |
| Zip+4                                   |            |
| Entity Type                             | Contractor |
| Is the Recipient Registered in SAM.Gov? | Yes        |

# Subrecipient Name: ROCKFORD CHAPMAN LLC

| TIN   | 813437351                   |
|---|-----------------------------|
| Unique Entity Identifer   | LVKVTBG3DME5                |
| POC Email Address   |                             |
| Address Line 1  | 219 W 9th Street, Suite 230 |
| Address Line 2  |                             |
| Address Line 3  |                             |
| City  | Wilmington                  |
| State   | DE                          |
| Zip   | 19801                       |
| Zip+4   |                             |
| Entity Type   | Contractor                  |
| Is the Recipient Registered in SAM.Gov?   | Yes                         |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                          |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                          |

## Subrecipient Name: DELAWARE ASSOCIATION OF REHABILITATION

| TIN                                     | 510310977             |
|---|-----------------------|
| Unique Entity Identifer                 | TBFHVU5TLCQ6          |
| POC Email Address                       |                       |
| Address Line 1                          | 100 W 10TH St Ste 103 |
| Address Line 2                          |                       |
| Address Line 3                          |                       |
| City                                    | Wilmington            |
| State                                   | DE                    |
| Zip                                     | 19801                 |
| Zip+4                                   |                       |
| Entity Type                             | Contractor            |
| Is the Recipient Registered in SAM.Gov? | Yes                   |

| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No |
|---|----|
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No |

## Subrecipient Name: THE CENTER FOR EMPLOYMENT SECURITY EDUCA (NASWA)

| TIN   | 520978073           |
|---|---------------------|
| Unique Entity Identifer   | WAHMCLFC56U5        |
| POC Email Address   |                     |
| Address Line 1  | 444 N CAPITOL ST NW |
| Address Line 2  |                     |
| Address Line 3  |                     |
| City  | Washington          |
| State   | DC                  |
| Zip   | 20001               |
| Zip+4   |                     |
| Entity Type   | Contractor          |
| Is the Recipient Registered in SAM.Gov?   | Yes                 |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                  |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                  |

#### Subrecipient Name: CX PARTNER SOURCE

| TIN   | 853771790                     |
|---|-------------------------------|
| Unique Entity Identifer   |                               |
| POC Email Address   |                               |
| Address Line 1  | Suite No. 334. 743 Horizon Ct |
| Address Line 2  |                               |
| Address Line 3  |                               |
| City  | Grand Junction                |
| State   | СО                            |
| Zip   | 81506                         |
| Zip+4   |                               |
| Entity Type   | Contractor                    |
| Is the Recipient Registered in SAM.Gov?   | No                            |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                            |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                            |

#### Subrecipient Name: Tabitha Medical Care- Dorcas Salvation Foundation

| TIN                                     | 822988466        |
|---|------------------|
| Unique Entity Identifer                 | YG67QLMGL1A5     |
| POC Email Address                       |                  |
| Address Line 1                          | 30668 Sussex Hwy |
| Address Line 2                          |                  |
| Address Line 3                          |                  |
| City                                    | Laurel           |
| State                                   | DE               |
| Zip                                     | 19956            |
| Zip+4                                   |                  |
| Entity Type                             | Subrecipient     |
| Is the Recipient Registered in SAM.Gov? | Yes              |

# Subrecipient Name: TeleHelp 24/7

| TIN   | 852207717                   |
|---|-----------------------------|
| Unique Entity Identifer   | R116SMT5GRL9                |
| POC Email Address   |                             |
| Address Line 1  | 2500 W. 4th Street, Suite 2 |
| Address Line 2  |                             |
| Address Line 3  |                             |
| City  | Wilmington                  |
| State   | DE                          |
| Zip   | 19805                       |
| Zip+4   |                             |
| Entity Type   | Subrecipient                |
| Is the Recipient Registered in SAM.Gov?   | Yes                         |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                          |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                          |

# Subrecipient Name: Trauma Matters Delaware

| TIN                     | 854073337         |
|-------------------------|-------------------|
| Unique Entity Identifer | EDF3RXBEDHR3      |
| POC Email Address       |                   |
| Address Line 1          | 55 Huntley Circle |
| Address Line 2          |                   |
| Address Line 3          |                   |
| City                    | Dover             |
|                         |                   |

| State   | DE           |
|---|--------------|
| Zip   | 19901        |
| Zip+4   |              |
| Entity Type   | Subrecipient |
| Is the Recipient Registered in SAM.Gov?   | Yes          |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No           |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No           |

# Subrecipient Name: Trauma Specialists of Delaware

| TIN   | 813703082               |
|---|-------------------------|
| Unique Entity Identifer   | U4F5AL8Y6BD4            |
| POC Email Address   |                         |
| Address Line 1  | 34011 Wescoats Road 1-B |
| Address Line 2  |                         |
| Address Line 3  |                         |
| City  | Lewes                   |
| State   | DE                      |
| Zip   | 19958                   |
| Zip+4   |                         |
| Entity Type   | Subrecipient            |
| Is the Recipient Registered in SAM.Gov?   | Yes                     |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                      |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                      |

# Subrecipient Name: A A DUCKETT

| TIN                                     | 221989638            |
|---|----------------------|
| Unique Entity Identifer                 | XEUTGNSAUN15         |
| POC Email Address                       |                      |
| Address Line 1                          | 134 Maple Leaf Court |
| Address Line 2                          |                      |
| Address Line 3                          |                      |
| City                                    | Glassboro            |
| State                                   | NJ                   |
| Zip                                     | 08028                |
| Zip+4                                   |                      |
| Entity Type                             | Contractor           |
| Is the Recipient Registered in SAM.Gov? | Yes                  |

| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No |
|---|----|
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No |

# Subrecipient Name: SID HARVEY INDUSTRIES

| TIN   | 112233773             |
|---|-----------------------|
| Unique Entity Identifer   | C3DJD1ML3FK7          |
| POC Email Address   |                       |
| Address Line 1  | 1285 College Park Dr. |
| Address Line 2  |                       |
| Address Line 3  |                       |
| City  | Dover                 |
| State   | DE                    |
| Zip   | 19904                 |
| Zip+4   |                       |
| Entity Type   | Contractor            |
| Is the Recipient Registered in SAM.Gov?   | Yes                   |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                    |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                    |

# Subrecipient Name: MODERN CONTROLS

| TIN   | 510320265        |
|---|------------------|
| Unique Entity Identifer   | DME9LC6CZ2P1     |
| POC Email Address   |                  |
| Address Line 1  | 7 Bellecor Drive |
| Address Line 2  |                  |
| Address Line 3  |                  |
| City  | New Castle       |
| State   | DE               |
| Zip   | 19720            |
| Zip+4   |                  |
| Entity Type   | Contractor       |
| Is the Recipient Registered in SAM.Gov?   | Yes              |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No               |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No               |

#### Subrecipient Name: Sussex Habitat for Humanity

| TIN                                     | 510334057          |
|---|--------------------|
| Unique Entity Identifer                 | FJ3QSR2BNQ53       |
| POC Email Address                       |                    |
| Address Line 1                          | 206 Academy Street |
| Address Line 2                          |                    |
| Address Line 3                          |                    |
| City                                    | Georgetown         |
| State                                   | DE                 |
| Zip                                     | 19947              |
| Zip+4                                   |                    |
| Entity Type                             | Subrecipient       |
| Is the Recipient Registered in SAM.Gov? | Yes                |

# Subrecipient Name: Delaware Pediatrics

| TIN                                     | 510355890              |
|---|------------------------|
| Unique Entity Identifer                 | PKLUMRN89AA7           |
| POC Email Address                       |                        |
| Address Line 1                          | 3920 South DuPont Pkwy |
| Address Line 2                          |                        |
| Address Line 3                          |                        |
| City                                    | Townsend               |
| State                                   | DE                     |
| Zip                                     | 19734                  |
| Zip+4                                   |                        |
| Entity Type                             | Subrecipient           |
| Is the Recipient Registered in SAM.Gov? | Yes                    |

### Subrecipient Name: NeighborGood Partners (NCALL)

| TIN                     | 526054476          |
|-------------------------|--------------------|
| Unique Entity Identifer | Y4DPG16NBUL1       |
| POC Email Address       |                    |
| Address Line 1          | 363 Saulsbury Road |
| Address Line 2          |                    |
| Address Line 3          |                    |
| City                    | Dover              |
| State                   | DE                 |
| Zip                     | 19904              |
| Zip+4                   |                    |

| Entity Type                             | Subrecipient |
|---|--------------|
| Is the Recipient Registered in SAM.Gov? | Yes          |

### Subrecipient Name: Wilmington Housing Authority

| TIN                                     | 516000327           |
|---|---------------------|
| Unique Entity Identifer                 | WM3NN4KPKUQ1        |
| POC Email Address                       |                     |
| Address Line 1                          | 400 N Walnut Street |
| Address Line 2                          |                     |
| Address Line 3                          |                     |
| City                                    | Wilmington          |
| State                                   | DE                  |
| Zip                                     | 19801               |
| Zip+4                                   |                     |
| Entity Type                             | Subrecipient        |
| Is the Recipient Registered in SAM.Gov? | Yes                 |

# Subrecipient Name: DYLAN J NICKERSON

| TIN                                     |              |
|---|--------------|
| Unique Entity Identifer                 | YU8BMLMMRL67 |
| POC Email Address                       |              |
| Address Line 1                          | 89 Myers Dr  |
| Address Line 2                          |              |
| Address Line 3                          |              |
| City                                    | Hartley      |
| State                                   | DE           |
| Zip                                     | 19953        |
| Zip+4                                   |              |
| Entity Type                             | Subrecipient |
| Is the Recipient Registered in SAM.Gov? | Yes          |

## Subrecipient Name: Cancer Support Community Delaware

| TIN                     | 510351863           |  |
|-------------------------|---------------------|--|
| Unique Entity Identifer | MC6VVAU7MPK3        |  |
| POC Email Address       |                     |  |
| Address Line 1          | 4810 Lancaster Pike |  |
| Address Line 2          |                     |  |
| Address Line 3          |                     |  |
| City                    | Wilmington          |  |

| State                                   | DE           |
|---|--------------|
| Zip                                     | 19807        |
| Zip+4                                   |              |
| Entity Type                             | Subrecipient |
| Is the Recipient Registered in SAM.Gov? | Yes          |

## Subrecipient Name: National Alliance on Mental Illness Delaware Foundation

| TIN   | 222490797          |
|---|--------------------|
| Unique Entity Identifer   | C8BNLKEV4NS6       |
| POC Email Address   |                    |
| Address Line 1  | 2400 W. 4th Street |
| Address Line 2  |                    |
| Address Line 3  |                    |
| City  | Wilmington         |
| State   | DE                 |
| Zip   | 19805              |
| Zip+4   |                    |
| Entity Type   | Subrecipient       |
| Is the Recipient Registered in SAM.Gov?   | Yes                |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                 |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                 |

# Subrecipient Name: GEORGE S FRANKEL

| TIN   | 222882678         |
|---|-------------------|
| Unique Entity Identifer   | F2WSR7Y4CPT9      |
| POC Email Address   |                   |
| Address Line 1  | 105 Chandler LANE |
| Address Line 2  |                   |
| Address Line 3  |                   |
| City  | Wilmington        |
| State   | DE                |
| Zip   | 19807             |
| Zip+4   |                   |
| Entity Type   | Contractor        |
| Is the Recipient Registered in SAM.Gov?   | Yes               |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                |

## Subrecipient Name: SHI INTERNATIONAL CORP

| TIN                                     | 223009648     |
|---|---------------|
| Unique Entity Identifer                 | CEFCD41CLDJ8  |
| POC Email Address                       |               |
| Address Line 1                          | PO BOX 952121 |
| Address Line 2                          |               |
| Address Line 3                          |               |
| City                                    | DALLAS        |
| State                                   | TX            |
| Zip                                     | 75395         |
| Zip+4                                   |               |
| Entity Type                             | Contractor    |
| Is the Recipient Registered in SAM.Gov? | Yes           |

## Subrecipient Name: NUHARBOR SECURITY INC

| TIN   |                       |
|---|-----------------------|
| Unique Entity Identifer   | T9KNS6K6MRV4          |
| POC Email Address   |                       |
| Address Line 1  | 553 ROOSEVELT HIGHWAY |
| Address Line 2  |                       |
| Address Line 3  |                       |
| City  | COLCHESTER            |
| State   | VT                    |
| Zip   | 05446                 |
| Zip+4   |                       |
| Entity Type   | Contractor            |
| Is the Recipient Registered in SAM.Gov?   | No                    |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                    |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                    |

# Subrecipient Name: AT&T MOBILITY

| TIN                     | 134924710                   |
|-------------------------|-----------------------------|
| Unique Entity Identifer | MNALR8D818N7                |
| POC Email Address       |                             |
| Address Line 1          | 7125 Columbia Gateway Drive |
| Address Line 2          |                             |
| Address Line 3          |                             |

| City                                    | Columbia   |
|---|------------|
| State                                   | MD         |
| Zip                                     | 21046      |
| Zip+4                                   |            |
| Entity Type                             | Contractor |
| Is the Recipient Registered in SAM.Gov? | Yes        |

## Subrecipient Name: VERSALIGN INC

| TIN                                     | 510285063         |
|---|-------------------|
| Unique Entity Identifer                 | GFUDH8W1T349      |
| POC Email Address                       |                   |
| Address Line 1                          | 701 Cornell Drive |
| Address Line 2                          | Suite F-13        |
| Address Line 3                          |                   |
| City                                    | Wilmington        |
| State                                   | DE                |
| Zip                                     | 19801             |
| Zip+4                                   |                   |
| Entity Type                             | Contractor        |
| Is the Recipient Registered in SAM.Gov? | Yes               |

## Subrecipient Name: DELL MARKETING LP

| TIN   | 742616805    |
|---|--------------|
| Unique Entity Identifer   | HJLSY7RZV8X6 |
| POC Email Address   |              |
| Address Line 1  | ONE DELL WAY |
| Address Line 2  |              |
| Address Line 3  |              |
| City  | ROUND ROCK,  |
| State   | TX           |
| Zip   | 78682        |
| Zip+4   |              |
| Entity Type   | Contractor   |
| Is the Recipient Registered in SAM.Gov?   | No           |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No           |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No           |

# Subrecipient Name: Info Solutions LLC

| TIN   | 651318495           |
|---|---------------------|
| Unique Entity Identifer   | MBQJKY4EXN98        |
| POC Email Address   |                     |
| Address Line 1  | 920 Justison Street |
| Address Line 2  |                     |
| Address Line 3  |                     |
| City  | Wilmington          |
| State   | DE                  |
| Zip   | 19801               |
| Zip+4   |                     |
| Entity Type   | Contractor          |
| Is the Recipient Registered in SAM.Gov?   | Yes                 |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                  |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                  |

# Subrecipient Name: LEADING EDGE DESIGN GROUP

| TIN   | 000006128           |
|---|---------------------|
| Unique Entity Identifer   | EFQPM651Q7J7        |
| POC Email Address   |                     |
| Address Line 1  | 86 CHOSEN VALE LANE |
| Address Line 2  |                     |
| Address Line 3  |                     |
| City  | ENFIELD             |
| State   | PA                  |
| Zip   | 03748               |
| Zip+4   |                     |
| Entity Type   | Contractor          |
| Is the Recipient Registered in SAM.Gov?   | Yes                 |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                  |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                  |

## Subrecipient Name: FSX HOLDINGS LLC

| TIN                     |                              |
|-------------------------|------------------------------|
| Unique Entity Identifer | L7FRNNTKMNG3                 |
| POC Email Address       |                              |
| Address Line 1          | 500 East John Carpenter FRWY |
|                         |                              |

| Address Line 2                          | STE 250    |
|---|------------|
| Address Line 3                          |            |
| City                                    | Irving     |
| State                                   | TX         |
| Zip                                     | 75062      |
| Zip+4                                   |            |
| Entity Type                             | Contractor |
| Is the Recipient Registered in SAM.Gov? | Yes        |

## Subrecipient Name: FTR LTD

| TIN                                     |                  |
|---|------------------|
| Unique Entity Identifer                 | JBY8FSWTNDM4     |
| POC Email Address                       |                  |
| Address Line 1                          | 1401 17th Street |
| Address Line 2                          | STE 525          |
| Address Line 3                          |                  |
| City                                    | Denver           |
| State                                   | СО               |
| Zip                                     | 80202            |
| Zip+4                                   |                  |
| Entity Type                             | Contractor       |
| Is the Recipient Registered in SAM.Gov? | Yes              |

# Subrecipient Name: A3 COMMUNICATIONS INC

| TIN                                     |                        |
|---|------------------------|
| Unique Entity Identifer                 | C178N5TPJPG8           |
| POC Email Address                       |                        |
| Address Line 1                          | 151 Garrison Oak Drive |
| Address Line 2                          |                        |
| Address Line 3                          |                        |
| City                                    | Dover                  |
| State                                   | DE                     |
| Zip                                     | 19901                  |
| Zip+4                                   |                        |
| Entity Type                             | Contractor             |
| Is the Recipient Registered in SAM.Gov? | Yes                    |

# Subrecipient Name: SUPERIOR ELECTRIC SVC CO

| TIN |  |
|-----|--|
|     |  |

| Unique Entity Identifer                 | JLR7JBHLEJ87    |
|---|-----------------|
| POC Email Address                       |                 |
| Address Line 1                          | 36 Germay Drive |
| Address Line 2                          |                 |
| Address Line 3                          |                 |
| City                                    | Wilmington      |
| State                                   | DE              |
| Zip                                     | 19804           |
| Zip+4                                   |                 |
| Entity Type                             | Contractor      |
| Is the Recipient Registered in SAM.Gov? | Yes             |

# Subrecipient Name: SAGITEC SOLUTIONS LLC

| TIN   | 200970684              |
|---|------------------------|
| Unique Entity Identifer   | VHV4VYP2CR56           |
| POC Email Address   |                        |
| Address Line 1  | 422 COUNTY ROAD D EAST |
| Address Line 2  |                        |
| Address Line 3  |                        |
| City  | ST. PAUL               |
| State   | MN                     |
| Zip   | 55117                  |
| Zip+4   |                        |
| Entity Type   | Contractor             |
| Is the Recipient Registered in SAM.Gov?   | Yes                    |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                     |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                     |

# Subrecipient Name: DIAMOND TECHNOLOGIES INC

| TIN                     | 510377847                |
|-------------------------|--------------------------|
| Unique Entity Identifer | NKU1HKMCPTD8             |
| POC Email Address       |                          |
| Address Line 1          | 4001 MILLER ROAD SUITE 3 |
| Address Line 2          |                          |
| Address Line 3          |                          |
| City                    | WILMINGTON               |
| State                   | DE                       |
| Zip                     | 19802                    |

| Zip+4   |            |
|---|------------|
| Entity Type   | Contractor |
| Is the Recipient Registered in SAM.Gov?   | No         |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No         |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No         |

# Subrecipient Name: AUM TECH INCORPORATED

| TIN   | 222923041                        |
|---|----------------------------------|
| Unique Entity Identifer   | SLPTJM6EJWM5                     |
| POC Email Address   |                                  |
| Address Line 1  | 710 OLD BRIDGE TPKE &EDGEBORO RD |
| Address Line 2  |                                  |
| Address Line 3  |                                  |
| City  | EAST BRUNSWICK                   |
| State   | NJ                               |
| Zip   | 08816                            |
| Zip+4   |                                  |
| Entity Type   | Contractor                       |
| Is the Recipient Registered in SAM.Gov?   | No                               |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                               |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                               |

# Subrecipient Name: RUSSELL ALLEN PARTNERS

| TIN  | 813449686      |
|--|----------------|
| Unique Entity Identifer  |                |
| POC Email Address  |                |
| Address Line 1   | 18 JAMES PLACE |
| Address Line 2   |                |
| Address Line 3   |                |
| City   | CINCINNATI     |
| State  | ОН             |
| Zip  | 45246          |
| Zip+4  |                |
| Entity Type  | Contractor     |
| Is the Recipient Registered in SAM.Gov?  | No             |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds? | No             |

#### Subrecipient Name: POLYTECH ADULT EDUCATION

| TIN                                     | 516000279                |
|---|--------------------------|
| Unique Entity Identifer                 | Y361QPHHRAN5             |
| POC Email Address                       |                          |
| Address Line 1                          | PO BOX 102               |
| Address Line 2                          |                          |
| Address Line 3                          |                          |
| City                                    | WOODSIDE                 |
| State                                   | DE                       |
| Zip                                     | 19980                    |
| Zip+4                                   |                          |
| Entity Type                             | Subrecipient; Contractor |
| Is the Recipient Registered in SAM.Gov? | Yes                      |

### Subrecipient Name: Delaware Tech Community College

| TIN                     | 516000279            |
|-------------------------|----------------------|
| Unique Entity Identifer |                      |
| POC Email Address       |                      |
| Address Line 1          | RT 13 & DENNY'S ROAD |
| Address Line 2          |                      |
| Address Line 3          |                      |
|                         |                      |
| City                    | Dover                |
| City<br>State           | Dover<br>DE          |
|                         |                      |
| State                   | DE                   |
| State<br>Zip            | DE                   |

### Subrecipient Name: CARAHSOFT TECHNOLOGY CORPORATION

| TIN                     | 522189693               |
|-------------------------|-------------------------|
| Unique Entity Identifer | DT8KJHZXVJH5            |
| POC Email Address       |                         |
| Address Line 1          | 11493 SUNSET HILLS ROAD |
| Address Line 2          |                         |
| Address Line 3          |                         |
| City                    | RESTON                  |
| State                   | VA                      |

| Zip                                     | 20190      |
|---|------------|
| Zip+4                                   |            |
| Entity Type                             | Contractor |
| Is the Recipient Registered in SAM.Gov? | Yes        |

# Subrecipient Name: ACRO SERVICE CORP

| TIN   | 382413629             |
|---|-----------------------|
| Unique Entity Identifer   | DNVXXUW4Y5F4          |
| POC Email Address   |                       |
| Address Line 1  | 39209 W SIX MILE ROAD |
| Address Line 2  |                       |
| Address Line 3  |                       |
| City  | LIVONIA               |
| State   | MI                    |
| Zip   | 48152                 |
| Zip+4   |                       |
| Entity Type   | Contractor            |
| Is the Recipient Registered in SAM.Gov?   | Yes                   |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                    |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                    |

# Subrecipient Name: ROI SOLUTIONS LLC

| TIN   | 263535658          |
|---|--------------------|
| Unique Entity Identifer   | PXBQGMJCMQY7       |
| POC Email Address   |                    |
| Address Line 1  | 792 EAST 280 SOUTH |
| Address Line 2  |                    |
| Address Line 3  |                    |
| City  | AMERICAN FORK      |
| State   | UT                 |
| Zip   | 84003              |
| Zip+4   |                    |
| Entity Type   | Contractor         |
| Is the Recipient Registered in SAM.Gov?   | No                 |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                 |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                 |

## Subrecipient Name: DELMARVA TEMP STAFFING INC

| TIN   | 510327373             |
|---|-----------------------|
| Unique Entity Identifer   |                       |
| POC Email Address   |                       |
| Address Line 1  | POST OFFICE BOX 75343 |
| Address Line 2  |                       |
| Address Line 3  |                       |
| City  | CHICAGO               |
| State   | IL                    |
| Zip   | 75343                 |
| Zip+4   |                       |
| Entity Type   | Contractor            |
| Is the Recipient Registered in SAM.Gov?   | No                    |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                    |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                    |

#### Subrecipient Name: AMAKOR INC

| TIN                                     | 510308351     |
|---|---------------|
| Unique Entity Identifer                 |               |
| POC Email Address                       |               |
| Address Line 1                          | 72 CLINTON ST |
| Address Line 2                          |               |
| Address Line 3                          |               |
| City                                    | Delaware City |
| State                                   | DE            |
| Zip                                     | 19706         |
| Zip+4                                   |               |
| Entity Type                             | Contractor    |
| Is the Recipient Registered in SAM.Gov? | N/A           |

# Subrecipient Name: MOTOROLA SOLUTIONS INC

| TIN                     |                          |
|-------------------------|--------------------------|
| Unique Entity Identifer | G2LUXP8ND8U6             |
| POC Email Address       |                          |
| Address Line 1          | 7031 Columbia Gateway Dr |
| Address Line 2          | 3rd Floor                |
| Address Line 3          |                          |
|                         |                          |

| City                                    | Columbia   |
|---|------------|
| State                                   | MD         |
| Zip                                     | 21046      |
| Zip+4                                   |            |
| Entity Type                             | Contractor |
| Is the Recipient Registered in SAM.Gov? | Yes        |

# Subrecipient Name: INSPIRIT GROUP LLC DBA STOPIT

| TIN                                     |                        |
|---|------------------------|
| Unique Entity Identifer                 | UB6LYNLY5NK8           |
| POC Email Address                       |                        |
| Address Line 1                          | 101 Crawford Corner Rd |
| Address Line 2                          | Suite 4 105R           |
| Address Line 3                          |                        |
| City                                    | Holmdel                |
| State                                   | NJ                     |
| Zip                                     | 07733                  |
| Zip+4                                   |                        |
| Entity Type                             | Contractor             |
| Is the Recipient Registered in SAM.Gov? | Yes                    |

## Subrecipient Name: Delaware Community Reinvestment Action Council

| TIN                                     |                           |
|---|---------------------------|
| Unique Entity Identifer                 | JA17Q98H7CD3              |
| POC Email Address                       |                           |
| Address Line 1                          | 600 SOUTH HARRISON STREET |
| Address Line 2                          |                           |
| Address Line 3                          |                           |
| City                                    | WILMINGTON                |
| State                                   | DE                        |
| Zip                                     | 19805                     |
| Zip+4                                   |                           |
| Entity Type                             | Subrecipient              |
| Is the Recipient Registered in SAM.Gov? | Yes                       |

## Subrecipient Name: Choir School of DE

| TIN                     |              |
|-------------------------|--------------|
| Unique Entity Identifer | MHL1YN3B7LC6 |
| POC Email Address       |              |
|                         |              |

| Address Line 1                          | 2013 N. MARKET STREET |
|---|-----------------------|
| Address Line 2                          |                       |
| Address Line 3                          |                       |
| City                                    | Wilmington            |
| State                                   | DE                    |
| Zip                                     | 19802                 |
| Zip+4                                   |                       |
| Entity Type                             | Subrecipient          |
| Is the Recipient Registered in SAM.Gov? | Yes                   |

# Subrecipient Name: Delaware Art Museum

| TIN                                     |                       |
|---|-----------------------|
| Unique Entity Identifer                 | SQK6L6TQK4G8          |
| POC Email Address                       |                       |
| Address Line 1                          | 2301 Kentmere Parkway |
| Address Line 2                          |                       |
| Address Line 3                          |                       |
| City                                    | WILMINGTON            |
| State                                   | DE                    |
| Zip                                     | 19806                 |
| Zip+4                                   |                       |
| Entity Type                             | Subrecipient          |
| Is the Recipient Registered in SAM.Gov? | Yes                   |

## Subrecipient Name: Wilmington Senior Center

| TIN                                     |                       |
|---|-----------------------|
| Unique Entity Identifer                 | VEUSWQWBUYK7          |
| POC Email Address                       |                       |
| Address Line 1                          | 1901 N. Market Street |
| Address Line 2                          |                       |
| Address Line 3                          |                       |
| City                                    | WILMINGTON            |
| State                                   | DE                    |
| Zip                                     | 19802                 |
| Zip+4                                   |                       |
| Entity Type                             | Subrecipient          |
| Is the Recipient Registered in SAM.Gov? | Yes                   |

#### **Subrecipient Name: DETV Foundation**

| TIN                                     |                       |
|---|-----------------------|
| Unique Entity Identifer                 | RYDCM5SRJT95          |
| POC Email Address                       |                       |
| Address Line 1                          | 2801 Lancaster Avenue |
| Address Line 2                          | Suite I               |
| Address Line 3                          |                       |
| City                                    | WILMINGTON            |
| State                                   | DE                    |
| Zip                                     | 19805                 |
| Zip+4                                   |                       |
| Entity Type                             | Subrecipient          |
| Is the Recipient Registered in SAM.Gov? | Yes                   |

# Subrecipient Name: PORSHA HARGROVE PR AND CONSULTING

| TIN                                     |                 |
|---|-----------------|
| Unique Entity Identifer                 | HXKSKDF4Z8F3    |
| POC Email Address                       |                 |
| Address Line 1                          | 406 Delaware St |
| Address Line 2                          |                 |
| Address Line 3                          |                 |
| City                                    | New Castle      |
| State                                   | DE              |
| Zip                                     | 19720           |
| Zip+4                                   |                 |
| Entity Type                             | Subrecipient    |
| Is the Recipient Registered in SAM.Gov? | Yes             |

## Subrecipient Name: SAFE UNITED NEIGHBORHOODS

| TIN                     |                     |
|-------------------------|---------------------|
| Unique Entity Identifer | FPFXH789NWW9        |
| POC Email Address       |                     |
| Address Line 1          | 41 East 22nd Street |
| Address Line 2          |                     |
| Address Line 3          |                     |
| City                    | WILMINGTON          |
| State                   | DE                  |
| Zip                     | 19802               |
| Zip+4                   |                     |
| Entity Type             | Subrecipient        |
|                         |                     |

## Subrecipient Name: NETWORK CONNECT INC

| TIN                                     |                    |
|---|--------------------|
| Unique Entity Identifer                 | P6ZVK76H5UK1       |
| POC Email Address                       |                    |
| Address Line 1                          | 1200 N. FRENCH ST. |
| Address Line 2                          |                    |
| Address Line 3                          |                    |
| City                                    | WILMINGTON         |
| State                                   | DE                 |
| Zip                                     | 19801              |
| Zip+4                                   |                    |
| Entity Type                             | Subrecipient       |
| Is the Recipient Registered in SAM.Gov? | Yes                |

#### Subrecipient Name: WOMEN OF EXCEPTION

| TIN                                     |                 |
|---|-----------------|
| Unique Entity Identifer                 | WC86HKYW2YJ9    |
| POC Email Address                       |                 |
| Address Line 1                          | 631 PLUM RUN CT |
| Address Line 2                          |                 |
| Address Line 3                          |                 |
| City                                    | BEAR            |
| State                                   | DE              |
| Zip                                     | 19701           |
| Zip+4                                   |                 |
| Entity Type                             | Subrecipient    |
| Is the Recipient Registered in SAM.Gov? | Yes             |

#### Subrecipient Name: MILFORD HOUSING DEVELOPMENT CORP

| TIN                     |                        |
|-------------------------|------------------------|
| Unique Entity Identifer | PP5VQC9BC598           |
| POC Email Address       |                        |
| Address Line 1          | 977 East Masten Circle |
| Address Line 2          |                        |
| Address Line 3          |                        |
| City                    | MILFORD                |
| State                   | DE                     |
|                         |                        |

| Zip                                     | 19963        |
|---|--------------|
| Zip+4                                   |              |
| Entity Type                             | Subrecipient |
| Is the Recipient Registered in SAM.Gov? | Yes          |

#### Subrecipient Name: DELAWARE ALLIANCE FOR NONPROFIT ADVANCEMENT

| TIN                                     |                        |
|---|------------------------|
| Unique Entity Identifer                 | U22WKQ6VAPP4           |
| POC Email Address                       |                        |
| Address Line 1                          | 100 W 10TH ST STE 1012 |
| Address Line 2                          |                        |
| Address Line 3                          |                        |
| City                                    | WILMINGTON             |
| State                                   | DE                     |
| Zip                                     | 19801                  |
| Zip+4                                   |                        |
| Entity Type                             | Subrecipient           |
| Is the Recipient Registered in SAM.Gov? | Yes                    |

#### Subrecipient Name: MINISTRY OF CARING INC

| TIN                                     |                      |
|---|----------------------|
| Unique Entity Identifer                 | JKDPRJ4VJFS9         |
| POC Email Address                       |                      |
| Address Line 1                          | 115 EAST 14TH STREET |
| Address Line 2                          |                      |
| Address Line 3                          |                      |
| City                                    | WILMINGTON           |
| State                                   | DE                   |
| Zip                                     | 19801                |
| Zip+4                                   |                      |
| Entity Type                             | Subrecipient         |
| Is the Recipient Registered in SAM.Gov? | Yes                  |

### Subrecipient Name: FAMILY COUNSELING CENTER OF ST PAULS INC

| TIN                     |                      |
|-------------------------|----------------------|
| Unique Entity Identifer | MD6LCM99E566         |
| POC Email Address       |                      |
| Address Line 1          | 301 N. VAN BUREN ST. |
| Address Line 2          |                      |
|                         |                      |

| Address Line 3                          |              |
|---|--------------|
| City                                    | WILMINGTON   |
| State                                   | DE           |
| Zip                                     | 19805        |
| Zip+4                                   |              |
| Entity Type                             | Subrecipient |
| Is the Recipient Registered in SAM.Gov? | Yes          |

## Subrecipient Name: SHEPHERD PLACE INC

| TIN                                     |                      |
|---|----------------------|
| Unique Entity Identifer                 | NT1RJB94KNF9         |
| POC Email Address                       |                      |
| Address Line 1                          | 1362 S GOVERNORS AVE |
| Address Line 2                          |                      |
| Address Line 3                          |                      |
| City                                    | Dover                |
| State                                   | DE                   |
| Zip                                     | 19904                |
| Zip+4                                   |                      |
| Entity Type                             | Subrecipient         |
| Is the Recipient Registered in SAM.Gov? | Yes                  |

## Subrecipient Name: NEW LIFE FOUNDATION RECOVERY INC

| TIN                                     |                   |
|---|-------------------|
| Unique Entity Identifer                 | N6SPHHU3YEW1      |
| POC Email Address                       |                   |
| Address Line 1                          | 11 PARKWAY CIRCLE |
| Address Line 2                          |                   |
| Address Line 3                          |                   |
| City                                    | New Castle        |
| State                                   | DE                |
| Zip                                     | 19720             |
| Zip+4                                   |                   |
| Entity Type                             | Subrecipient      |
| Is the Recipient Registered in SAM.Gov? | Yes               |

## Subrecipient Name: MATTHEWS SPECIALTY VEHICLES INC

| TIN                     |              |
|-------------------------|--------------|
| Unique Entity Identifer | J8PDYL5A9DD5 |
|                         |              |

| POC Email Address                       |                     |
|---|---------------------|
| Address Line 1                          | 211 AMERICAN AVENUE |
| Address Line 2                          |                     |
| Address Line 3                          |                     |
| City                                    | Greensboro          |
| State                                   | NC                  |
| Zip                                     | 27409               |
| Zip+4                                   |                     |
| Entity Type                             | Subrecipient        |
| Is the Recipient Registered in SAM.Gov? | Yes                 |

#### Subrecipient Name: VISION TO LEARN

| TIN                                     |                        |
|---|------------------------|
| Unique Entity Identifer                 | JTD4K152CBT6           |
| POC Email Address                       |                        |
| Address Line 1                          | 11611 SAN VICENTE BLVD |
| Address Line 2                          |                        |
| Address Line 3                          |                        |
| City                                    | LOS ANGELES            |
| State                                   | CA                     |
| Zip                                     | 90049                  |
| Zip+4                                   |                        |
| Entity Type                             | Subrecipient           |
| Is the Recipient Registered in SAM.Gov? | Yes                    |

## Subrecipient Name: COMMUNITY HOUSING & EMPOWERMENT CONNECT

| TIN                                     |               |
|---|---------------|
| Unique Entity Identifer                 | D5KJLNHA9K15  |
| POC Email Address                       |               |
| Address Line 1                          | 403 SUN BLVD. |
| Address Line 2                          |               |
| Address Line 3                          |               |
| City                                    | BEAR          |
| State                                   | DE            |
| Zip                                     | 19702         |
| Zip+4                                   |               |
| Entity Type                             | Subrecipient  |
| Is the Recipient Registered in SAM.Gov? | Yes           |

#### Subrecipient Name: DELAWARE HEALTH EQUITY COALITION INC

| TIN                                     |                    |
|---|--------------------|
| Unique Entity Identifer                 | SA3NDBR2C4H8       |
| POC Email Address                       |                    |
| Address Line 1                          | 2100 Baynard Blvd. |
| Address Line 2                          | Suite A            |
| Address Line 3                          |                    |
| City                                    | WILMINGTON         |
| State                                   | DE                 |
| Zip                                     | 19802              |
| Zip+4                                   |                    |
| Entity Type                             | Subrecipient       |
| Is the Recipient Registered in SAM.Gov? | Yes                |

## Subrecipient Name: SEAN LOCKE 24 FOUNDATION

| TIN                                     |              |
|---|--------------|
| Unique Entity Identifer                 | DGHCW2NM9MV5 |
| POC Email Address                       |              |
| Address Line 1                          | 100 Dean Dr. |
| Address Line 2                          |              |
| Address Line 3                          |              |
| City                                    | Newark       |
| State                                   | DE           |
| Zip                                     | 19711        |
| Zip+4                                   |              |
| Entity Type                             | Subrecipient |
| Is the Recipient Registered in SAM.Gov? | Yes          |

# Subrecipient Name: CENTRAL BAPTIST COMMUNITY DEVELOPMENT CO

| TIN                     |                 |
|-------------------------|-----------------|
| Unique Entity Identifer | D9ENMSV8SZE6    |
| POC Email Address       |                 |
| Address Line 1          | 839 PINE STREET |
| Address Line 2          |                 |
| Address Line 3          |                 |
| City                    | WILMINGTON      |
| State                   | DE              |
| Zip                     | 19801           |
| Zip+4                   |                 |
|                         |                 |

| Entity Type                             | Subrecipient |
|---|--------------|
| Is the Recipient Registered in SAM.Gov? | Yes          |

#### Subrecipient Name: EZION FAIR COMMUNITY DEVELOPMENT CORP

| TIN                                     |               |
|---|---------------|
| Unique Entity Identifer                 | G3DARELFGEZ6  |
| POC Email Address                       |               |
| Address Line 1                          | 1400 B STREET |
| Address Line 2                          |               |
| Address Line 3                          |               |
| City                                    | WILMINGTON    |
| State                                   | DE            |
| Zip                                     | 19801         |
| Zip+4                                   |               |
| Entity Type                             | Subrecipient  |
| Is the Recipient Registered in SAM.Gov? | Yes           |

## Subrecipient Name: CORAS WELLNESS AND BEHAVIOR HEALTH LLC

| TIN                                     |                     |
|---|---------------------|
| Unique Entity Identifer                 | GK24BN5644K9        |
| POC Email Address                       |                     |
| Address Line 1                          | 3821 LANCASTER PIKE |
| Address Line 2                          |                     |
| Address Line 3                          |                     |
| City                                    | WILMINGTON          |
| State                                   | DE                  |
| Zip                                     | 19805               |
| Zip+4                                   |                     |
| Entity Type                             | Subrecipient        |
| Is the Recipient Registered in SAM.Gov? | Yes                 |

# Subrecipient Name: SUSSEX COMMUNITY CRISIS HOUSING SERVICES

| TIN                     |                     |
|-------------------------|---------------------|
| Unique Entity Identifer | SJVYCKJLNTR5        |
| POC Email Address       |                     |
| Address Line 1          | 110 N. RAILROAD AVE |
| Address Line 2          |                     |
| Address Line 3          |                     |
| City                    | GEORGETOWN          |
|                         |                     |

| State                                   | DE           |
|---|--------------|
| Zip                                     | 19947        |
| Zip+4                                   |              |
| Entity Type                             | Subrecipient |
| Is the Recipient Registered in SAM.Gov? | Yes          |

# Subrecipient Name: UHS of Rockford LLC

| TIN   | 205093162          |
|---|--------------------|
| Unique Entity Identifer   | CFTNVKZ2LLD8       |
| POC Email Address   |                    |
| Address Line 1  | 100 Rockford Drive |
| Address Line 2  |                    |
| Address Line 3  |                    |
| City  | Newark             |
| State   | DE                 |
| Zip   | 19713              |
| Zip+4   |                    |
| Entity Type   | Beneficiary        |
| Is the Recipient Registered in SAM.Gov?   | Yes                |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                 |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                 |

# Subrecipient Name: St. Francis Hospital, Inc

| TIN   | 510064326                 |
|---|---------------------------|
| Unique Entity Identifer   | E1H1QB7PGMG5              |
| POC Email Address   |                           |
| Address Line 1  | 701 North Clayton Street  |
| Address Line 2  |                           |
| Address Line 3  |                           |
| City  | Wilmington                |
| State   | DE                        |
| Zip   | 19805                     |
| Zip+4   |                           |
| Entity Type   | Subrecipient; Beneficiary |
| Is the Recipient Registered in SAM.Gov?   | Yes                       |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                        |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                        |

#### Subrecipient Name: SUN Behavioral Delaware

| TIN   | 352571461                 |
|---|---------------------------|
| Unique Entity Identifer   | E1PXN5AL27Z4              |
| POC Email Address   |                           |
| Address Line 1  | 21655 Biden Avenue        |
| Address Line 2  |                           |
| Address Line 3  |                           |
| City  | Georgetown                |
| State   | DE                        |
| Zip   | 19947                     |
| Zip+4   |                           |
| Entity Type   | Subrecipient; Beneficiary |
| Is the Recipient Registered in SAM.Gov?   | Yes                       |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                        |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                        |

## Subrecipient Name: Tidal Health Nanticoke Memorial Hospital

| TIN   | 510069243           |
|---|---------------------|
| Unique Entity Identifer   |                     |
| POC Email Address   |                     |
| Address Line 1  | 801 Middleford Road |
| Address Line 2  |                     |
| Address Line 3  |                     |
| City  | Seaford             |
| State   | DE                  |
| Zip   | 19973               |
| Zip+4   |                     |
| Entity Type   | Beneficiary         |
| Is the Recipient Registered in SAM.Gov?   | Yes                 |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                  |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                  |

## Subrecipient Name: The Nemours Foundation

| TIN                     | 590634433    |
|-------------------------|--------------|
| Unique Entity Identifer | ETGMYV7CKAJ7 |
|                         |              |

| POC Email Address   |                           |
|---|---------------------------|
| Address Line 1  | 1600 Rockland Road        |
| Address Line 2  |                           |
| Address Line 3  |                           |
| City  | Wilmington                |
| State   | DE                        |
| Zip   | 19803                     |
| Zip+4   |                           |
| Entity Type   | Subrecipient; Beneficiary |
| Is the Recipient Registered in SAM.Gov?   | Yes                       |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                        |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                        |

# Subrecipient Name: Beebe Medical Center Inc

| TIN   | 510067938                 |
|---|---------------------------|
| Unique Entity Identifer   | QYJ4E9YAL5B3              |
| POC Email Address   |                           |
| Address Line 1  | 424 Savannah Road         |
| Address Line 2  |                           |
| Address Line 3  |                           |
| City  | Lewes                     |
| State   | DE                        |
| Zip   | 19958                     |
| Zip+4   |                           |
| Entity Type   | Subrecipient; Beneficiary |
| Is the Recipient Registered in SAM.Gov?   | Yes                       |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                        |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                        |

# Subrecipient Name: Bayhealth Medical Center, Inc.

| TIN                     | 510064318           |
|-------------------------|---------------------|
| Unique Entity Identifer | WF21JGK7W5D3        |
| POC Email Address       |                     |
| Address Line 1          | 640 S. State Street |
| Address Line 2          |                     |
| Address Line 3          |                     |
| City                    | Dover               |

| State   | DE          |
|---|-------------|
| Zip   | 19907       |
| Zip+4   |             |
| Entity Type   | Beneficiary |
| Is the Recipient Registered in SAM.Gov?   | Yes         |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No          |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No          |

# Subrecipient Name: Christiana Care Health Services Inc

| TIN   | 510103684                 |
|---|---------------------------|
| Unique Entity Identifer   | X4ADJRZ3Q1H4              |
| POC Email Address   |                           |
| Address Line 1  | 501 W 14th Street         |
| Address Line 2  |                           |
| Address Line 3  |                           |
| City  | Wilmington                |
| State   | DE                        |
| Zip   | 19801                     |
| Zip+4   |                           |
| Entity Type   | Subrecipient; Beneficiary |
| Is the Recipient Registered in SAM.Gov?   | Yes                       |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                        |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                        |

# Subrecipient Name: Gilpin Hall

| TIN                     | 510075766          |  |
|-------------------------|--------------------|--|
| Unique Entity Identifer |                    |  |
| POC Email Address       |                    |  |
| Address Line 1          | 1101 Gilpin Avenue |  |
| Address Line 2          |                    |  |
| Address Line 3          |                    |  |
| City                    | Wilmington         |  |
| State                   | DE                 |  |
| Zip                     | 19801              |  |
| Zip+4                   |                    |  |
| Entity Type             | Beneficiary        |  |
|                         |                    |  |

| Is the Recipient Registered in SAM.Gov?   | No |
|---|----|
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No |

# Subrecipient Name: Regency Healthcare and Rehabilitation Center LLC

| TIN   | 208901567           |
|---|---------------------|
| Unique Entity Identifer   | NBJYFT26PKW5        |
| POC Email Address   |                     |
| Address Line 1  | 801 N. Broom Street |
| Address Line 2  |                     |
| Address Line 3  |                     |
| City  | Wilmington          |
| State   | DE                  |
| Zip   | 19806               |
| Zip+4   |                     |
| Entity Type   | Beneficiary         |
| Is the Recipient Registered in SAM.Gov?   | Yes                 |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                  |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                  |

## Subrecipient Name: Courtland Manor Inc.

| TIN   | 510109416                   |
|---|-----------------------------|
| Unique Entity Identifer   |                             |
| POC Email Address   |                             |
| Address Line 1  | 889 South Little Creek Road |
| Address Line 2  |                             |
| Address Line 3  |                             |
| City  | Dover                       |
| State   | DE                          |
| Zip   | 19901                       |
| Zip+4   |                             |
| Entity Type   | Beneficiary                 |
| Is the Recipient Registered in SAM.Gov?   | No                          |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                          |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                          |

## Subrecipient Name: Coral Springs Rehab & Healthcare

| TIN   | 862858618          |
|---|--------------------|
| Unique Entity Identifer   |                    |
| POC Email Address   |                    |
| Address Line 1  | 505 Greenbank Road |
| Address Line 2  |                    |
| Address Line 3  |                    |
| City  | Wilmington         |
| State   | DE                 |
| Zip   | 19808              |
| Zip+4   |                    |
| Entity Type   | Beneficiary        |
| Is the Recipient Registered in SAM.Gov?   | No                 |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                 |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                 |

# Subrecipient Name: Kutz Rehab & Nursing

| TIN   | 510070786      |
|---|----------------|
| Unique Entity Identifer   | U4FTVLTMCS56   |
| POC Email Address   |                |
| Address Line 1  | 704 River Road |
| Address Line 2  |                |
| Address Line 3  |                |
| City  | Wilmington     |
| State   | DE             |
| Zip   | 19809          |
| Zip+4   |                |
| Entity Type   | Beneficiary    |
| Is the Recipient Registered in SAM.Gov?   | Yes            |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No             |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No             |

# Subrecipient Name: Churchman Village

| TIN                     | 842412774 |
|-------------------------|-----------|
| Unique Entity Identifer |           |
| POC Email Address       |           |
|                         |           |

| Address Line 1  | 4949 Ogletown Stanton Road |
|---|----------------------------|
| Address Line 2  |                            |
| Address Line 3  |                            |
| City  | Newark                     |
| State   | DE                         |
| Zip   | 19713                      |
| Zip+4   |                            |
| Entity Type   | Beneficiary                |
| Is the Recipient Registered in SAM.Gov?   | Yes                        |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                         |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                         |

# Subrecipient Name: Kentmere Rehab & Healthcare

| TIN   | 510077156            |
|---|----------------------|
| Unique Entity Identifer   | Q983JFV7AGC5         |
| POC Email Address   |                      |
| Address Line 1  | 1900 Lovering Avenue |
| Address Line 2  |                      |
| Address Line 3  |                      |
| City  | Wilmington           |
| State   | DE                   |
| Zip   | 19806                |
| Zip+4   |                      |
| Entity Type   | Beneficiary          |
| Is the Recipient Registered in SAM.Gov?   | Yes                  |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                   |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                   |

## Subrecipient Name: Parkview Nursing & Rehab Center

| TIN                     | 842421746          |
|-------------------------|--------------------|
| Unique Entity Identifer | C83SLEQ75MD4       |
| POC Email Address       |                    |
| Address Line 1          | 2801 W. 6th Street |
| Address Line 2          |                    |
| Address Line 3          |                    |
| City                    | Wilmington         |
| State                   | DE                 |

| Zip   | 19805       |
|---|-------------|
| Zip+4   |             |
| Entity Type   | Beneficiary |
| Is the Recipient Registered in SAM.Gov?   | Yes         |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No          |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No          |

## Subrecipient Name: Harbor Health Care & Rehab Center

| TIN   | 842463793                |
|---|--------------------------|
| Unique Entity Identifer   |                          |
| POC Email Address   |                          |
| Address Line 1  | 301 Ocean View Boulevard |
| Address Line 2  |                          |
| Address Line 3  |                          |
| City  | Lewes                    |
| State   | DE                       |
| Zip   | 19958                    |
| Zip+4   |                          |
| Entity Type   | Beneficiary              |
| Is the Recipient Registered in SAM.Gov?   | Yes                      |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                       |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                       |

## Subrecipient Name: The Mary Campbell Center

| TIN                                     | 237089122        |
|---|------------------|
| Unique Entity Identifer                 | PCDDFFD2GTN9     |
| POC Email Address                       |                  |
| Address Line 1                          | 4641 Weldin Road |
| Address Line 2                          |                  |
| Address Line 3                          |                  |
| City                                    | Wilmington       |
| State                                   | DE               |
| Zip                                     | 19803            |
| Zip+4                                   |                  |
| Entity Type                             | Beneficiary      |
| Is the Recipient Registered in SAM.Gov? | Yes              |
|   |                  |

| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No |
|---|----|
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No |

#### Subrecipient Name: Regal Heights Health Rehab Center LLC

| TIN   | 204912212           |
|---|---------------------|
| Unique Entity Identifer   |                     |
| POC Email Address   |                     |
| Address Line 1  | 6525 Lancaster Pike |
| Address Line 2  |                     |
| Address Line 3  |                     |
| City  | Hockessin           |
| State   | DE                  |
| Zip   | 19707               |
| Zip+4   |                     |
| Entity Type   | Beneficiary         |
| Is the Recipient Registered in SAM.Gov?   | No                  |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                  |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                  |

#### Subrecipient Name: Atlantic Shore Rehab & Health Center

| TIN   | 261700318                |
|---|--------------------------|
| Unique Entity Identifer   |                          |
| POC Email Address   |                          |
| Address Line 1  | 231 S. Washington Street |
| Address Line 2  |                          |
| Address Line 3  |                          |
| City  | Millsboro                |
| State   | DE                       |
| Zip   | 19966                    |
| Zip+4   |                          |
| Entity Type   | Beneficiary              |
| Is the Recipient Registered in SAM.Gov?   | No                       |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                       |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                       |

## Subrecipient Name: New Castle Health & Rehab

| TIN   | 823535782            |
|---|----------------------|
| Unique Entity Identifer   |                      |
| POC Email Address   |                      |
| Address Line 1  | 32 Buena Vista Drive |
| Address Line 2  |                      |
| Address Line 3  |                      |
| City  | New Castle           |
| State   | DE                   |
| Zip   | 19720                |
| Zip+4   |                      |
| Entity Type   | Beneficiary          |
| Is the Recipient Registered in SAM.Gov?   | Yes                  |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                   |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                   |

## Subrecipient Name: Newark Manor Nursing Home

| TIN   | 510305447          |
|---|--------------------|
| Unique Entity Identifer   |                    |
| POC Email Address   |                    |
| Address Line 1  | 254 W. Main Street |
| Address Line 2  |                    |
| Address Line 3  |                    |
| City  | Newark             |
| State   | DE                 |
| Zip   | 19711              |
| Zip+4   |                    |
| Entity Type   | Beneficiary        |
| Is the Recipient Registered in SAM.Gov?   | No                 |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                 |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                 |

# Subrecipient Name: Pinnacle Rehabilitation and Health Center

| TIN                     | 261700251                   |
|-------------------------|-----------------------------|
| Unique Entity Identifer |                             |
| POC Email Address       |                             |
| Address Line 1          | 3034 South DuPont Boulevard |
|                         |                             |

| Address Line 2  |             |
|---|-------------|
| Address Line 3  |             |
| City  | Smyrna      |
| State   | DE          |
| Zip   | 19977       |
| Zip+4   |             |
| Entity Type   | Beneficiary |
| Is the Recipient Registered in SAM.Gov?   | No          |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No          |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No          |

## Subrecipient Name: Manor House - ACTS

| TIN   | 231900132          |
|---|--------------------|
| Unique Entity Identifer   |                    |
| POC Email Address   |                    |
| Address Line 1  | 420 Delaware Drive |
| Address Line 2  |                    |
| Address Line 3  |                    |
| City  | Fort Washington    |
| State   | PA                 |
| Zip   | 19034              |
| Zip+4   |                    |
| Entity Type   | Beneficiary        |
| Is the Recipient Registered in SAM.Gov?   | No                 |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                 |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                 |

## Subrecipient Name: Aloysius, Butler & Clark Associates, Inc.

| TIN                     | 510116400                |
|-------------------------|--------------------------|
| Unique Entity Identifer | LF96L3TDMRM6             |
| POC Email Address       |                          |
| Address Line 1          | 819 N. Washington Street |
| Address Line 2          |                          |
| Address Line 3          |                          |
| City                    | Wilmington               |
| State                   | DE                       |
| Zip                     | 19801                    |

| Zip+4   |            |
|---|------------|
| Entity Type   | Contractor |
| Is the Recipient Registered in SAM.Gov?   | Yes        |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No         |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No         |

# Subrecipient Name: "ABBOTT RAPID DX NORTH AMERICA, LLC"

| TIN   |                |
|---|----------------|
| Unique Entity Identifer   | P782RNU1NNK3   |
| POC Email Address   |                |
| Address Line 1  | 30 S Keller Rd |
| Address Line 2  | Ste 100        |
| Address Line 3  |                |
| City  | Orlando        |
| State   | FL             |
| Zip   | 32810          |
| Zip+4   |                |
| Entity Type   | Contractor     |
| Is the Recipient Registered in SAM.Gov?   | Yes            |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No             |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No             |

### Subrecipient Name: FISHER SCIENTIFIC

| TIN  |                   |
|--|-------------------|
| Unique Entity Identifer  | N3TTP71B2SY9      |
| POC Email Address  |                   |
| Address Line 1   | 4500 Turnberry DR |
| Address Line 2   |                   |
| Address Line 3   |                   |
| City   | Hanover Park      |
| State  | IL                |
| Zip  | 60133             |
| Zip+4  |                   |
| Entity Type  | Contractor        |
| Is the Recipient Registered in SAM.Gov?  | Yes               |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds? | No                |

| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No |
|---|----|

#### Subrecipient Name: ANP TECHNOLOGIES INC

| TIN   |                      |
|---|----------------------|
| Unique Entity Identifer   | PNL1U1FNPLF9         |
| POC Email Address   |                      |
| Address Line 1  | 824 INTERCHANGE BLVD |
| Address Line 2  |                      |
| Address Line 3  |                      |
| City  | NEWARK               |
| State   | DE                   |
| Zip   | 19711                |
| Zip+4   |                      |
| Entity Type   | Contractor           |
| Is the Recipient Registered in SAM.Gov?   | No                   |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                   |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                   |

#### Subrecipient Name: LEEP Inc Labor Economics Education emPowerment

| TIN                                     | 831079563                |
|---|--------------------------|
| Unique Entity Identifer                 | V1LQP92C9C16             |
| POC Email Address                       |                          |
| Address Line 1                          | 19 Lambson Lane          |
| Address Line 2                          | Suite 001                |
| Address Line 3                          |                          |
| City                                    | New Castle               |
| State                                   | DE                       |
| Zip                                     | 19720                    |
| Zip+4                                   |                          |
| Entity Type                             | Subrecipient; Contractor |
| Is the Recipient Registered in SAM.Gov? | Yes                      |

### Subrecipient Name: Amer Driver Training ACAD

| TIN                     | 810554275    |
|-------------------------|--------------|
| Unique Entity Identifer | ZDBPYZKZSYS3 |
| POC Email Address       |              |
| Address Line 1          | PO Box 875   |
|                         |              |

| Address Line 2                          |                          |
|---|--------------------------|
| Address Line 3                          |                          |
| City                                    | New Castle               |
| State                                   | DE                       |
| Zip                                     | 19720                    |
| Zip+4                                   |                          |
| Entity Type                             | Subrecipient; Contractor |
| Is the Recipient Registered in SAM.Gov? | Yes                      |

### Subrecipient Name: Delaware Coalition Against Domestic Violence

| TIN                                     | 510354794         |
|---|-------------------|
| Unique Entity Identifer                 | QTT8HMKMNXG5      |
| POC Email Address                       |                   |
| Address Line 1                          | 100 W 10th Street |
| Address Line 2                          | Suite 903         |
| Address Line 3                          |                   |
| City                                    | Wilmington        |
| State                                   | DE                |
| Zip                                     | 19801             |
| Zip+4                                   |                   |
| Entity Type                             | Subrecipient      |
| Is the Recipient Registered in SAM.Gov? | Yes               |

#### Subrecipient Name: Perinatal Prana

| TIN                                     | 874216087          |
|---|--------------------|
| Unique Entity Identifer                 | WJXDDK8531K6       |
| POC Email Address                       |                    |
| Address Line 1                          | 197 Possum Park Rd |
| Address Line 2                          |                    |
| Address Line 3                          |                    |
| City                                    | Newark             |
| State                                   | DE                 |
| Zip                                     | 19711              |
| Zip+4                                   | 3817               |
| Entity Type                             | Subrecipient       |
| Is the Recipient Registered in SAM.Gov? | Yes                |

### Subrecipient Name: R G ARCHITECTS

| TIN | 202907862 |
|-----|-----------|
|     |           |

| Unique Entity Identifer                 | EAV7NMTC36Y7      |
|---|-------------------|
| POC Email Address                       |                   |
| Address Line 1                          | 200 W Main Street |
| Address Line 2                          |                   |
| Address Line 3                          |                   |
| City                                    | Middletown        |
| State                                   | DE                |
| Zip                                     | 19709             |
| Zip+4                                   |                   |
| Entity Type                             | Subrecipient      |
| Is the Recipient Registered in SAM.Gov? | Yes               |

# Subrecipient Name: EDIS COMPANY

| TIN                                     | 510257059    |
|---|--------------|
| Unique Entity Identifer                 | JBB8HNP6D9D9 |
| POC Email Address                       |              |
| Address Line 1                          | PO Box 2697  |
| Address Line 2                          |              |
| Address Line 3                          |              |
| City                                    | Wilmington   |
| State                                   | DE           |
| Zip                                     | 19805        |
| Zip+4                                   | 0697         |
| Entity Type                             | Contractor   |
| Is the Recipient Registered in SAM.Gov? | Yes          |

# Subrecipient Name: ATLANTIC EMERGENCY SOLUTIONS INC

| TIN                                     | 273187193             |
|---|-----------------------|
| Unique Entity Identifer                 | NF9CK1Q966N3          |
| POC Email Address                       |                       |
| Address Line 1                          | 743 BICENTENNIAL BLVD |
| Address Line 2                          |                       |
| Address Line 3                          |                       |
| City                                    | DOVER                 |
| State                                   | DE                    |
| Zip                                     | 19904                 |
| Zip+4                                   |                       |
| Entity Type                             | Contractor            |
| Is the Recipient Registered in SAM.Gov? | Yes                   |

## Subrecipient Name: Delaware Community Foundation

| TIN                                     | 222804785    |
|---|--------------|
| Unique Entity Identifer                 | UQ1NNDTJMJD4 |
| POC Email Address                       |              |
| Address Line 1                          | PO Box 1636  |
| Address Line 2                          |              |
| Address Line 3                          |              |
| City                                    | Wilmington   |
| State                                   | DE           |
| Zip                                     | 19899        |
| Zip+4                                   |              |
| Entity Type                             | Subrecipient |
| Is the Recipient Registered in SAM.Gov? | Yes          |

### Subrecipient Name: Tech Impact

| TIN                                     | 743062511          |
|---|--------------------|
| Unique Entity Identifer                 | CM6LM48K5567       |
| POC Email Address                       |                    |
| Address Line 1                          | 100 W. 10th Street |
| Address Line 2                          | Suite 915          |
| Address Line 3                          |                    |
| City                                    | Wilmington         |
| State                                   | DE                 |
| Zip                                     | 19801              |
| Zip+4                                   |                    |
| Entity Type                             | Subrecipient       |
| Is the Recipient Registered in SAM.Gov? | Yes                |

### Subrecipient Name: First State Squash

| TIN                     | 811843120         |  |
|-------------------------|-------------------|--|
| Unique Entity Identifer | K91YNY8GMNY1      |  |
| POC Email Address       |                   |  |
| Address Line 1          | 501 W 11th Street |  |
| Address Line 2          |                   |  |
| Address Line 3          |                   |  |
| City                    | Wilmington        |  |
| State                   | DE                |  |
| Zip                     | 19801             |  |
|                         |                   |  |

| Zip+4                                   |              |
|---|--------------|
| Entity Type                             | Subrecipient |
| Is the Recipient Registered in SAM.Gov? | Yes          |

#### Subrecipient Name: Delaware Restaurant Association

| TIN                                     | 510248572           |
|---|---------------------|
| Unique Entity Identifer                 | SLPADEV4XP71        |
| POC Email Address                       |                     |
| Address Line 1                          | 500 Creek View Road |
| Address Line 2                          |                     |
| Address Line 3                          |                     |
| City                                    | Newark              |
| State                                   | DE                  |
| Zip                                     | 19711               |
| Zip+4                                   |                     |
| Entity Type                             | Subrecipient        |
| Is the Recipient Registered in SAM.Gov? | Yes                 |

#### Subrecipient Name: REACH Riverside

| TIN                                     | 821401986          |
|---|--------------------|
| Unique Entity Identifer                 | ZF6AN45LECL2       |
| POC Email Address                       |                    |
| Address Line 1                          | 1121 Thatcher St.  |
| Address Line 2                          | Teen Warehouse Way |
| Address Line 3                          |                    |
| City                                    | Wilmington         |
| State                                   | DE                 |
| Zip                                     | 19802              |
| Zip+4                                   |                    |
| Entity Type                             | Subrecipient       |
| Is the Recipient Registered in SAM.Gov? | Yes                |

## Subrecipient Name: Delaware Sustainable Energy Utility DBA Energize Delaware

| TIN                     | 263963904            |
|-------------------------|----------------------|
| Unique Entity Identifer | JENUXSJMZ585         |
| POC Email Address       |                      |
| Address Line 1          | 500 W. Loockerman St |
| Address Line 2          | Suite 400            |
| Address Line 3          |                      |
|                         |                      |

| City                                    | Dover        |
|---|--------------|
| State                                   | DE           |
| Zip                                     | 19904        |
| Zip+4                                   |              |
| Entity Type                             | Subrecipient |
| Is the Recipient Registered in SAM.Gov? | Yes          |

### Subrecipient Name: City of Wilmington

| TIN                                     | 510176414            |
|---|----------------------|
| Unique Entity Identifer                 | FN7FAJ2XMHL9         |
| POC Email Address                       |                      |
| Address Line 1                          | 800 N. French Street |
| Address Line 2                          |                      |
| Address Line 3                          |                      |
| City                                    | Wilmington           |
| State                                   | DE                   |
| Zip                                     | 19801                |
| Zip+4                                   |                      |
| Entity Type                             | Subrecipient         |
| Is the Recipient Registered in SAM.Gov? | Yes                  |

## Subrecipient Name: Zip Code Wilmington

| TIN                                     | 473853334          |
|---|--------------------|
| Unique Entity Identifer                 | XGLNUJ493PY9       |
| POC Email Address                       |                    |
| Address Line 1                          | 1007 N. Orange St. |
| Address Line 2                          | Floor Four         |
| Address Line 3                          |                    |
| City                                    | Wilmington         |
| State                                   | DE                 |
| Zip                                     | 19801              |
| Zip+4                                   |                    |
| Entity Type                             | Subrecipient       |
| Is the Recipient Registered in SAM.Gov? | Yes                |

## Subrecipient Name: Dover Interfaith Mission for Housing, Inc.

| TIN                     | 412280212    |
|-------------------------|--------------|
| Unique Entity Identifer | EKC6CMQJERK9 |
| POC Email Address       |              |
|                         |              |

| Address Line 1                          | 684 Forest Street |
|---|-------------------|
| Address Line 2                          |                   |
| Address Line 3                          |                   |
| City                                    | Dover             |
| State                                   | DE                |
| Zip                                     | 19904             |
| Zip+4                                   |                   |
| Entity Type                             | Subrecipient      |
| Is the Recipient Registered in SAM.Gov? | Yes               |

# Subrecipient Name: Bancroft Construction Co.

| TIN   |                   |
|---|-------------------|
| Unique Entity Identifer   | EGHMRJ2GS146      |
| POC Email Address   |                   |
| Address Line 1  | 1300 Grant Avenue |
| Address Line 2  |                   |
| Address Line 3  |                   |
| City  | Wilmington        |
| State   | DE                |
| Zip   | 19805             |
| Zip+4   |                   |
| Entity Type   | Subrecipient      |
| Is the Recipient Registered in SAM.Gov?   | Yes               |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?                  | No                |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds?         | No                |
| Is the "total compensation" for the organization's five<br>highest paid officers publicly listed or otherwise listed in<br>SAM.gov? | No                |

### Subrecipient Name: Tetra Tech Inc

| TIN                     |                       |
|-------------------------|-----------------------|
| Unique Entity Identifer | S1LCDNNEMJK7          |
| POC Email Address       |                       |
| Address Line 1          | 240 Continental Drive |
| Address Line 2          | Ste. 200              |
| Address Line 3          |                       |
| City                    | Newark                |
| State                   | DE                    |
| Zip                     | 19713                 |

| Zip+4   |            |
|---|------------|
| Entity Type   | Contractor |
| Is the Recipient Registered in SAM.Gov?   | Yes        |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?                  | No         |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds?         | No         |
| Is the "total compensation" for the organization's five<br>highest paid officers publicly listed or otherwise listed in<br>SAM.gov? | No         |

### Subrecipient Name: Jaed Corp

| TIN   |                      |
|---|----------------------|
| Unique Entity Identifer   | M12AM5WFY985         |
| POC Email Address   |                      |
| Address Line 1  | 2500 Wrangle Hill Rd |
| Address Line 2  | Ste. 100             |
| Address Line 3  |                      |
| City  | Bear                 |
| State   | DE                   |
| Zip   | 19701                |
| Zip+4   |                      |
| Entity Type   | Subrecipient         |
| Is the Recipient Registered in SAM.Gov?   | Yes                  |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?                  | No                   |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds?         | No                   |
| Is the "total compensation" for the organization's five<br>highest paid officers publicly listed or otherwise listed in<br>SAM.gov? | No                   |

## Subrecipient Name: Fayda Engineering

| TIN                     |                     |
|-------------------------|---------------------|
| Unique Entity Identifer | RJX3WSPXVGP3        |
| POC Email Address       |                     |
| Address Line 1          | 801 W. Newport Pike |
| Address Line 2          |                     |
| Address Line 3          |                     |
| City                    | Wilmington          |
| State                   | DE                  |
| Zip                     | 19804               |

| Zip+4   |              |
|---|--------------|
| Entity Type   | Subrecipient |
| Is the Recipient Registered in SAM.Gov?   | Yes          |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?                  | No           |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds?         | No           |
| Is the "total compensation" for the organization's five<br>highest paid officers publicly listed or otherwise listed in<br>SAM.gov? | No           |

# Subrecipient Name: DEDC LLC

| TIN   |                      |
|---|----------------------|
| Unique Entity Identifer   | VKJNTM7SJ9Q8         |
| POC Email Address   |                      |
| Address Line 1  | 315 S. Chapel Street |
| Address Line 2  |                      |
| Address Line 3  |                      |
| City  | Newark               |
| State   | DE                   |
| Zip   | 19711                |
| Zip+4   |                      |
| Entity Type   | Subrecipient         |
| Is the Recipient Registered in SAM.Gov?   | Yes                  |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?                  | No                   |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds?         | No                   |
| Is the "total compensation" for the organization's five<br>highest paid officers publicly listed or otherwise listed in<br>SAM.gov? | No                   |

### Subrecipient Name: Davis Bowen & Friedel Inc

| TIN                     |                      |  |
|-------------------------|----------------------|--|
| Unique Entity Identifer | T7QGN6WGDCA3         |  |
| POC Email Address       |                      |  |
| Address Line 1          | 601 East Main Street |  |
| Address Line 2          | Ste. 100             |  |
| Address Line 3          |                      |  |
| City                    | Salisburg            |  |
| State                   | MD                   |  |
| Zip                     | 21804                |  |

| Zip+4   |            |
|---|------------|
| Entity Type   | Contractor |
| Is the Recipient Registered in SAM.Gov?   | Yes        |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?                  | No         |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds?         | No         |
| Is the "total compensation" for the organization's five<br>highest paid officers publicly listed or otherwise listed in<br>SAM.gov? | No         |

## Subrecipient Name: Johnson, Mirmiran & Thomspson

| TIN   |                  |
|---|------------------|
| Unique Entity Identifer   | QGC7CHWHPT51     |
| POC Email Address   |                  |
| Address Line 1  | 40 Wright Avenue |
| Address Line 2  |                  |
| Address Line 3  |                  |
| City  | Hunt Valley      |
| State   | MD               |
| Zip   | 21030            |
| Zip+4   |                  |
| Entity Type   | Contractor       |
| Is the Recipient Registered in SAM.Gov?   | Yes              |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?                  | No               |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds?         | No               |
| Is the "total compensation" for the organization's five<br>highest paid officers publicly listed or otherwise listed in<br>SAM.gov? | No               |

### Subrecipient Name: Bernardon Delaware LLC

| TIN                     | 452745793           |  |
|-------------------------|---------------------|--|
| Unique Entity Identifer | XQJBQ2P4W297        |  |
| POC Email Address       |                     |  |
| Address Line 1          | 123 Justison Street |  |
| Address Line 2          | Ste. 101            |  |
| Address Line 3          |                     |  |
| City                    | Wilmington          |  |
| State                   | DE                  |  |
| Zip                     | 19801               |  |

| Zip+4   |            |
|---|------------|
| Entity Type   | Contractor |
| Is the Recipient Registered in SAM.Gov?   | Yes        |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?                  | No         |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds?         | No         |
| Is the "total compensation" for the organization's five<br>highest paid officers publicly listed or otherwise listed in<br>SAM.gov? | No         |

#### Subrecipient Name: Advanced Security Technologies LLC

| TIN                                     |                    |
|---|--------------------|
| Unique Entity Identifer                 | XCAAFN59T3C4       |
| POC Email Address                       |                    |
| Address Line 1                          | 47 Trautwein Crest |
| Address Line 2                          |                    |
| Address Line 3                          |                    |
| City                                    | Closter            |
| State                                   | NJ                 |
| Zip                                     | 07624              |
| Zip+4                                   |                    |
| Entity Type                             | Contractor         |
| Is the Recipient Registered in SAM.Gov? | Yes                |

### Subrecipient Name: Harvard Environmental

| TIN                                     |                     |
|---|---------------------|
| Unique Entity Identifer                 | JN6UJ3KMJDK4        |
| POC Email Address                       |                     |
| Address Line 1                          | 760 Pulaski Highway |
| Address Line 2                          |                     |
| Address Line 3                          |                     |
| City                                    | Bear                |
| State                                   | DE                  |
| Zip                                     | 19701               |
| Zip+4                                   |                     |
| Entity Type                             | Contractor          |
| Is the Recipient Registered in SAM.Gov? | Yes                 |

## Subrecipient Name: Davis Bowen & Friedel Inc

| Unique Entity Identifer                 | YJSGLFVWU6E9             |
|---|--------------------------|
| POC Email Address                       |                          |
| Address Line 1                          | 1 Park Avenue            |
| Address Line 2                          |                          |
| Address Line 3                          |                          |
| City                                    | Milford                  |
| State                                   | DE                       |
| Zip                                     | 19963                    |
| Zip+4                                   |                          |
| Entity Type                             | Subrecipient; Contractor |
| Is the Recipient Registered in SAM.Gov? | Yes                      |

#### Subrecipient Name: VERIZON Communications

| TIN                                     |              |
|---|--------------|
| Unique Entity Identifer                 | ZR8UJGRNJ8J5 |
| POC Email Address                       |              |
| Address Line 1                          | PO Box 16810 |
| Address Line 2                          |              |
| Address Line 3                          |              |
| City                                    | NEWARK       |
| State                                   | NJ           |
| Zip                                     | 07101        |
| Zip+4                                   |              |
| Entity Type                             | Contractor   |
| Is the Recipient Registered in SAM.Gov? | Yes          |

## Subrecipient Name: COMCAST HOLDINGS CORPORATION

| TIN                                     |                      |
|---|----------------------|
| Unique Entity Identifer                 | KNDSXJ6FBQT7         |
| POC Email Address                       |                      |
| Address Line 1                          | 8110 CORPORATE DRIVE |
| Address Line 2                          |                      |
| Address Line 3                          |                      |
| City                                    | BALTIMORE            |
| State                                   | MD                   |
| Zip                                     | 21236                |
| Zip+4                                   |                      |
| Entity Type                             | Contractor           |
| Is the Recipient Registered in SAM.Gov? | Yes                  |

# Subrecipient Name: PROGRESSIVE SOFTWARE COMP INC

| TIN                                     | 510339224                     |
|---|-------------------------------|
| Unique Entity Identifer                 | H1C1ZA1D99C3                  |
| POC Email Address                       |                               |
| Address Line 1                          | DELAWARE CORPORATE CENTER     |
| Address Line 2                          | ONE RIGHTER PARKWAY SUITE 280 |
| Address Line 3                          |                               |
| City                                    | WILMINGTON                    |
| State                                   | DE                            |
| Zip                                     | 19803                         |
| Zip+4                                   |                               |
| Entity Type                             | Contractor                    |
| Is the Recipient Registered in SAM.Gov? | Yes                           |

### Subrecipient Name: W3 LLC DBA Healthcare IT Leaders

| TIN                                     |                                      |
|---|--------------------------------------|
| Unique Entity Identifer                 | HA4CX8SJLK33                         |
| POC Email Address                       | joe.lepore@healthcareitleaders.com   |
| Address Line 1                          | "925 North Point Parkway, Suite 425" |
| Address Line 2                          |                                      |
| Address Line 3                          |                                      |
| City                                    | Alpharetta                           |
| State                                   | GA                                   |
| Zip                                     | 34221                                |
| Zip+4                                   |                                      |
| Entity Type                             | Contractor                           |
| Is the Recipient Registered in SAM.Gov? | Yes                                  |

## Subrecipient Name: Morgan Lewis & Bockius LLP

| TIN                     |                             |
|-------------------------|-----------------------------|
| Unique Entity Identifer | K12MKQY3EQ97                |
| POC Email Address       | anne.gibson@morganlewis.com |
| Address Line 1          | 1701 Market Street          |
| Address Line 2          |                             |
| Address Line 3          |                             |
| City                    | Philadelphia                |
| State                   | РА                          |
| Zip                     | 19103                       |
| l                       |                             |

| Zip+4                                   |            |
|---|------------|
| Entity Type                             | Contractor |
| Is the Recipient Registered in SAM.Gov? | Yes        |

### Subrecipient Name: RANDOM RUBBER CHICKEN

| TIN   | 833252695                |
|---|--------------------------|
| Unique Entity Identifer   | NVP2LSMN3TB6             |
| POC Email Address   | rrcwholesale@outlook.com |
| Address Line 1  | 9702 Gary Ave            |
| Address Line 2  |                          |
| Address Line 3  |                          |
| City  | Lubbock                  |
| State   | TX                       |
| Zip   | 79423                    |
| Zip+4   | 4011                     |
| Entity Type   | Contractor               |
| Is the Recipient Registered in SAM.Gov?   | Yes                      |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                       |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                       |

### Subrecipient Name: GOTHAMS LLC

| TIN   | 843013020          |
|---|--------------------|
| Unique Entity Identifer   | HVR7BYAMSL27       |
| POC Email Address   | laurie@gothams.com |
| Address Line 1  | 215 Bella Riva Dr  |
| Address Line 2  |                    |
| Address Line 3  |                    |
| City  | Austin             |
| State   | TX                 |
| Zip   | 78734              |
| Zip+4   | 2659               |
| Entity Type   | Contractor         |
| Is the Recipient Registered in SAM.Gov?   | Yes                |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                 |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                 |

## Subrecipient Name: VAULT MEDICAL SERVICES PA

| TIN   | 832658606               |
|---|-------------------------|
| Unique Entity Identifer   | VNPHHXBBB4C5            |
| POC Email Address   | atticus@vaulthealth.com |
| Address Line 1  | 22 W 23rd St            |
| Address Line 2  | Floor 5                 |
| Address Line 3  |                         |
| City  | New York                |
| State   | NY                      |
| Zip   | 10010                   |
| Zip+4   | 5240                    |
| Entity Type   | Contractor              |
| Is the Recipient Registered in SAM.Gov?   | Yes                     |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                      |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                      |

### Subrecipient Name: VERIZON WIRELESS SERVICES CELLCO

| TIN                                     | 230523775    |
|---|--------------|
| Unique Entity Identifer                 | CK77N4SCAJD3 |
| POC Email Address                       |              |
| Address Line 1                          | PO Box 16810 |
| Address Line 2                          |              |
| Address Line 3                          |              |
| City                                    | Newark       |
| State                                   | NJ           |
| Zip                                     | 07101        |
| Zip+4                                   |              |
| Entity Type                             | Contractor   |
| Is the Recipient Registered in SAM.Gov? | Yes          |

### Subrecipient Name: COMCAST HOLDINGS CORPORATION

| TIN                     | 231709202            |
|-------------------------|----------------------|
| Unique Entity Identifer | V7ZKAJ9A26K1         |
| POC Email Address       |                      |
| Address Line 1          | 8110 CORPORATE DRIVE |
| Address Line 2          |                      |
| Address Line 3          |                      |
| City                    | BALTIMORE            |
| State                   | MD                   |

| Zip                                     | 21236      |
|---|------------|
| Zip+4                                   |            |
| Entity Type                             | Contractor |
| Is the Recipient Registered in SAM.Gov? | Yes        |

### Subrecipient Name: Versalign

| TIN   | 510285063      |
|---|----------------|
| Unique Entity Identifer   |                |
| POC Email Address   |                |
| Address Line 1  | 701 CORNELL DR |
| Address Line 2  | STE F-13       |
| Address Line 3  |                |
| City  | WILMINGTON     |
| State   | DE             |
| Zip   | 19801          |
| Zip+4   |                |
| Entity Type   | Contractor     |
| Is the Recipient Registered in SAM.Gov?   | No             |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No             |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No             |

### Subrecipient Name: Sandborn Map

| TIN                                     | 133980333           |
|---|---------------------|
| Unique Entity Identifer                 | FX6EPPFLFH52        |
| POC Email Address                       |                     |
| Address Line 1                          | 1935 JAMBOREE DRIVE |
| Address Line 2                          |                     |
| Address Line 3                          |                     |
| City                                    | COLORADO SRPINGS    |
| State                                   | СО                  |
| Zip                                     | 80920               |
| Zip+4                                   |                     |
| Entity Type                             | Contractor          |
| Is the Recipient Registered in SAM.Gov? | Yes                 |

## Subrecipient Name: STRATEGIC COMMUNICATIONS LLC

| TIN                     | 611271313    |
|-------------------------|--------------|
| Unique Entity Identifer | LJZRP7SE5LN4 |

| POC Email Address                       |                    |
|---|--------------------|
| Address Line 1                          | 310 EVERGREEN ROAD |
| Address Line 2                          |                    |
| Address Line 3                          |                    |
| City                                    | Louisville         |
| State                                   | KY                 |
| Zip                                     | 40243              |
| Zip+4                                   |                    |
| Entity Type                             | Contractor         |
| Is the Recipient Registered in SAM.Gov? | Yes                |

## Subrecipient Name: Bordentown Driver Training, LLC

| TIN                                     | 223658271           |
|---|---------------------|
| Unique Entity Identifer                 | R9H8FNDX6386        |
| POC Email Address                       |                     |
| Address Line 1                          | 217 Lisa Dr., Ste B |
| Address Line 2                          |                     |
| Address Line 3                          |                     |
| City                                    | New Castle          |
| State                                   | DE                  |
| Zip                                     | 19720               |
| Zip+4                                   |                     |
| Entity Type                             | Contractor          |
| Is the Recipient Registered in SAM.Gov? | Yes                 |

## Subrecipient Name: Goodwill DE and DE County

| TIN                                     | 530196517      |
|---|----------------|
| Unique Entity Identifer                 | DBWJN34GPC98   |
| POC Email Address                       |                |
| Address Line 1                          | 300 E Lea Blvd |
| Address Line 2                          |                |
| Address Line 3                          |                |
| City                                    | Wilmington     |
| State                                   | DE             |
| Zip                                     | 19802          |
| Zip+4                                   |                |
| Entity Type                             | Contractor     |
| Is the Recipient Registered in SAM.Gov? | N/A            |

#### Subrecipient Name: 101 E DELAWARE AVENUE OPERATIONS LLC

| TIN   | 472878252           |
|---|---------------------|
| Unique Entity Identifer   |                     |
| POC Email Address   |                     |
| Address Line 1  | 101 Delaware Avenue |
| Address Line 2  |                     |
| Address Line 3  |                     |
| City  | Delmar              |
| State   | DE                  |
| Zip   | 19940               |
| Zip+4   |                     |
| Entity Type   | Beneficiary         |
| Is the Recipient Registered in SAM.Gov?   | No                  |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                  |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                  |

### Subrecipient Name: 1100 NORMAN ESKRIDGE HIGHWAY LLC

| TIN   | 260789197                    |
|---|------------------------------|
| Unique Entity Identifer   |                              |
| POC Email Address   |                              |
| Address Line 1  | 1100 Norman Eskridge Highway |
| Address Line 2  |                              |
| Address Line 3  |                              |
| City  | Seaford                      |
| State   | DE                           |
| Zip   | 19973                        |
| Zip+4   |                              |
| Entity Type   | Beneficiary                  |
| Is the Recipient Registered in SAM.Gov?   | No                           |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                           |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                           |

#### Subrecipient Name: 700 MARVEL ROAD OPERATIONS LLC

| TIN                     | 260789419 |
|-------------------------|-----------|
| Unique Entity Identifer |           |
| POC Email Address       |           |
| POC Email Address       |           |

| Address Line 1  | 700 Marvel Road |
|---|-----------------|
| Address Line 2  |                 |
| Address Line 3  |                 |
| City  | Milford         |
| State   | DE              |
| Zip   | 19963           |
| Zip+4   |                 |
| Entity Type   | Beneficiary     |
| Is the Recipient Registered in SAM.Gov?   | No              |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No              |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No              |

## Subrecipient Name: 715 EAST KING STREET OPERATIONS LLC

| TIN   | 371690544            |
|---|----------------------|
| Unique Entity Identifer   |                      |
| POC Email Address   |                      |
| Address Line 1  | 715 East King Street |
| Address Line 2  |                      |
| Address Line 3  |                      |
| City  | Seaford              |
| State   | DE                   |
| Zip   | 19973                |
| Zip+4   |                      |
| Entity Type   | Beneficiary          |
| Is the Recipient Registered in SAM.Gov?   | No                   |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                   |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                   |

## Subrecipient Name: ACTS RETIREMENT LIFE COMMUNITIES INC

| TIN                     | 231900132          |
|-------------------------|--------------------|
| Unique Entity Identifer |                    |
| POC Email Address       |                    |
| Address Line 1          | 420 Delaware Drive |
| Address Line 2          |                    |
| Address Line 3          |                    |
| City                    | Fort Washington    |
| State                   | РА                 |

| Zip   | 19034       |
|---|-------------|
| Zip+4   |             |
| Entity Type   | Beneficiary |
| Is the Recipient Registered in SAM.Gov?   | No          |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No          |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No          |

### Subrecipient Name: Appoquinimink School District

| TIN                                     | 952900000               |
|---|-------------------------|
| Unique Entity Identifer                 |                         |
| POC Email Address                       |                         |
| Address Line 1                          | 118 S Sixth St Box 4010 |
| Address Line 2                          |                         |
| Address Line 3                          |                         |
| City                                    | Odessa                  |
| State                                   | DE                      |
| Zip                                     | 19730                   |
| Zip+4                                   |                         |
| Entity Type                             | Subrecipient            |
| Is the Recipient Registered in SAM.Gov? | Yes                     |

### Subrecipient Name: BLC WINDSOR PLACE LLC

| TIN   | 000625212           |
|---|---------------------|
| Unique Entity Identifer   |                     |
| POC Email Address   |                     |
| Address Line 1  | 6677 Lancaster Pike |
| Address Line 2  |                     |
| Address Line 3  |                     |
| City  | Hockessin           |
| State   | DE                  |
| Zip   | 19707               |
| Zip+4   |                     |
| Entity Type   | Beneficiary         |
| Is the Recipient Registered in SAM.Gov?   | No                  |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                  |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                  |

#### Subrecipient Name: BROADMEADOW HEALTHCARE

| TIN   | 510363138              |
|---|------------------------|
| Unique Entity Identifer   |                        |
| POC Email Address   |                        |
| Address Line 1  | 500 South Broad Street |
| Address Line 2  |                        |
| Address Line 3  |                        |
| City  | Middletown             |
| State   | DE                     |
| Zip   | 19709                  |
| Zip+4   |                        |
| Entity Type   | Beneficiary            |
| Is the Recipient Registered in SAM.Gov?   | No                     |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                     |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                     |

### Subrecipient Name: Cape Henlopen School District

| TIN                                     | 951700000      |
|---|----------------|
| Unique Entity Identifer                 |                |
| POC Email Address                       |                |
| Address Line 1                          | 1270 Kings Hwy |
| Address Line 2                          |                |
| Address Line 3                          |                |
| City                                    | Lewes          |
| State                                   | DE             |
| Zip                                     | 19958          |
| Zip+4                                   |                |
| Entity Type                             | Subrecipient   |
| Is the Recipient Registered in SAM.Gov? | Yes            |

#### Subrecipient Name: Capital School District

| TIN                     | 951300000        |
|-------------------------|------------------|
| Unique Entity Identifer |                  |
| POC Email Address       |                  |
| Address Line 1          | 198 Commerce Way |
| Address Line 2          |                  |
| Address Line 3          |                  |
|                         |                  |

| City                                    | Dover        |
|---|--------------|
| State                                   | DE           |
| Zip                                     | 19901        |
| Zip+4                                   |              |
| Entity Type                             | Subrecipient |
| Is the Recipient Registered in SAM.Gov? | Yes          |

### Subrecipient Name: CAPITOL HEALTHCARE

| TIN   | 510369763        |
|---|------------------|
| Unique Entity Identifer   |                  |
| POC Email Address   |                  |
| Address Line 1  | 1225 Walker Road |
| Address Line 2  |                  |
| Address Line 3  |                  |
| City  | Dover            |
| State   | DE               |
| Zip   | 19904            |
| Zip+4   |                  |
| Entity Type   | Beneficiary      |
| Is the Recipient Registered in SAM.Gov?   | No               |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No               |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No               |

### Subrecipient Name: Christina School District

Г

| TIN                                     | 953300000        |
|---|------------------|
| Unique Entity Identifer                 |                  |
| POC Email Address                       |                  |
| Address Line 1                          | 600 N Lombard St |
| Address Line 2                          |                  |
| Address Line 3                          |                  |
| City                                    | Wilmington       |
| State                                   | DE               |
| Zip                                     | 19801            |
| Zip+4                                   |                  |
| Entity Type                             | Subrecipient     |
| Is the Recipient Registered in SAM.Gov? | Yes              |

### Subrecipient Name: CHURCHMAN DE SNF MANAGEMENT LLC

Т

| TIN                                     | 842412774                  |
|---|----------------------------|
| Unique Entity Identifer                 | C7GNYZZQMEB3               |
| POC Email Address                       |                            |
| Address Line 1                          | 4949 Ogletown Stanton Road |
| Address Line 2                          |                            |
| Address Line 3                          |                            |
| City                                    | Newark                     |
| State                                   | DE                         |
| Zip                                     | 19713                      |
| Zip+4                                   |                            |
| Entity Type                             | Subrecipient               |
| Is the Recipient Registered in SAM.Gov? | Yes                        |

## Subrecipient Name: Colonial School District Ofc

| TIN                                     | 953400000       |
|---|-----------------|
| Unique Entity Identifer                 |                 |
| POC Email Address                       |                 |
| Address Line 1                          | 318 E. Basin Rd |
| Address Line 2                          |                 |
| Address Line 3                          |                 |
| City                                    | New Castle      |
| State                                   | DE              |
| Zip                                     | 19720           |
| Zip+4                                   |                 |
| Entity Type                             | Subrecipient    |
| Is the Recipient Registered in SAM.Gov? | Yes             |

### Subrecipient Name: COMPLETE CARE AT BRACKENVILLE LLC

| TIN                     | 862550415           |
|-------------------------|---------------------|
| Unique Entity Identifer |                     |
| POC Email Address       |                     |
| Address Line 1          | 100 St. Claire Road |
| Address Line 2          |                     |
| Address Line 3          |                     |
| City                    | Hockessin           |
| State                   | DE                  |
| Zip                     | 19707               |
| Zip+4                   |                     |
| Entity Type             | Beneficiary         |
|                         |                     |

| Is the Recipient Registered in SAM.Gov?   | No |
|---|----|
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No |

## Subrecipient Name: COMPLETE CARE AT HILLSIDE LLC

| TIN   | 862672432           |
|---|---------------------|
| Unique Entity Identifer   |                     |
| POC Email Address   |                     |
| Address Line 1  | 810 S. Broom Street |
| Address Line 2  |                     |
| Address Line 3  |                     |
| City  | Wilmington          |
| State   | DE                  |
| Zip   | 19805               |
| Zip+4   |                     |
| Entity Type   | Beneficiary         |
| Is the Recipient Registered in SAM.Gov?   | No                  |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                  |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                  |

### Subrecipient Name: COMPLETE CARE AT SILVER LAKE LLC

| TIN   | 862752487             |
|---|-----------------------|
| Unique Entity Identifer   |                       |
| POC Email Address   |                       |
| Address Line 1  | 1080 Silver Lake Blvd |
| Address Line 2  |                       |
| Address Line 3  |                       |
| City  | Dover                 |
| State   | DE                    |
| Zip   | 19904                 |
| Zip+4   |                       |
| Entity Type   | Beneficiary           |
| Is the Recipient Registered in SAM.Gov?   | No                    |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                    |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                    |

#### Subrecipient Name: CORAL SPRINGS REHAB AND HEALTHCARE

| TIN   | 862858618          |
|---|--------------------|
| Unique Entity Identifer   |                    |
| POC Email Address   |                    |
| Address Line 1  | 505 Greenbank Road |
| Address Line 2  |                    |
| Address Line 3  |                    |
| City  | Wilmington         |
| State   | DE                 |
| Zip   | 19808              |
| Zip+4   |                    |
| Entity Type   | Beneficiary        |
| Is the Recipient Registered in SAM.Gov?   | No                 |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                 |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                 |

### Subrecipient Name: COURTLAND MANOR

| TIN   | 510109416                   |
|---|-----------------------------|
| Unique Entity Identifer   |                             |
| POC Email Address   |                             |
| Address Line 1  | 889 South Little Creek Road |
| Address Line 2  |                             |
| Address Line 3  |                             |
| City  | Dover                       |
| State   | DE                          |
| Zip   | 19901                       |
| Zip+4   |                             |
| Entity Type   | Beneficiary                 |
| Is the Recipient Registered in SAM.Gov?   | No                          |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                          |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                          |

#### Subrecipient Name: Delaware Military Academy

| TIN                     | 000000042    |
|-------------------------|--------------|
| Unique Entity Identifer | H9KDZU1MPW38 |
| POC Email Address       |              |
|                         |              |

| Address Line 1                          | 112 Middleboro Rd |
|---|-------------------|
| Address Line 2                          |                   |
| Address Line 3                          |                   |
| City                                    | Wilmington        |
| State                                   | DE                |
| Zip                                     | 19804             |
| Zip+4                                   |                   |
| Entity Type                             | Subrecipient      |
| Is the Recipient Registered in SAM.Gov? | Yes               |

# Subrecipient Name: DOVER AID II OPCO LLC

| TIN   | 000583975        |
|---|------------------|
| Unique Entity Identifer   | CQHHGCBR94R1     |
| POC Email Address   |                  |
| Address Line 1  | 1203 Walker Road |
| Address Line 2  |                  |
| Address Line 3  |                  |
| City  | Dover            |
| State   | DE               |
| Zip   | 19904            |
| Zip+4   |                  |
| Entity Type   | Beneficiary      |
| Is the Recipient Registered in SAM.Gov?   | Yes              |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No               |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No               |

### Subrecipient Name: EMERITUS CORPORATION

| TIN                     | 911605464        |
|-------------------------|------------------|
| Unique Entity Identifer |                  |
| POC Email Address       |                  |
| Address Line 1          | 150 Saulsbury Rd |
| Address Line 2          |                  |
| Address Line 3          |                  |
| City                    | Dover            |
| State                   | DE               |
| Zip                     | 19904            |
| Zip+4                   |                  |
| Entity Type             | Beneficiary      |

| Is the Recipient Registered in SAM.Gov?   | No |
|---|----|
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No |

### Subrecipient Name: EXCEPTIONAL CARE FOR CHILDREN INC

| TIN                                     | 800748765           |
|---|---------------------|
| Unique Entity Identifer                 |                     |
| POC Email Address                       |                     |
| Address Line 1                          | 11 Independence Way |
| Address Line 2                          |                     |
| Address Line 3                          |                     |
| City                                    | Newark              |
| State                                   | DE                  |
| Zip                                     | 19713               |
| Zip+4                                   |                     |
| Entity Type                             | Beneficiary         |
| Is the Recipient Registered in SAM.Gov? | Yes                 |

## Subrecipient Name: GREEN VALLEY SNF

| TIN   | 261700251                   |
|---|-----------------------------|
| Unique Entity Identifer   |                             |
| POC Email Address   |                             |
| Address Line 1  | 3034 South DuPont Boulevard |
| Address Line 2  |                             |
| Address Line 3  |                             |
| City  | Smyrna                      |
| State   | DE                          |
| Zip   | 19977                       |
| Zip+4   |                             |
| Entity Type   | Beneficiary                 |
| Is the Recipient Registered in SAM.Gov?   | No                          |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                          |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                          |

#### Subrecipient Name: GREEN VALLEY TERRACES SNF

| TIN                     | 261700318 |
|-------------------------|-----------|
| Unique Entity Identifer |           |

| POC Email Address   |                          |
|---|--------------------------|
| Address Line 1  | 231 S. Washington Street |
| Address Line 2  |                          |
| Address Line 3  |                          |
| City  | Millsboro                |
| State   | DE                       |
| Zip   | 19966                    |
| Zip+4   |                          |
| Entity Type   | Beneficiary              |
| Is the Recipient Registered in SAM.Gov?   | No                       |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                       |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                       |

## Subrecipient Name: HARBOR DE SNF MANAGEMENT LLC

| TIN                                     | 842463793           |
|---|---------------------|
| Unique Entity Identifer                 | MMUHCKLFUEJ4        |
| POC Email Address                       |                     |
| Address Line 1                          | 301 Ocean View Blvd |
| Address Line 2                          |                     |
| Address Line 3                          |                     |
| City                                    | Lewes               |
| State                                   | DE                  |
| Zip                                     | 19958               |
| Zip+4                                   |                     |
| Entity Type                             | Beneficiary         |
| Is the Recipient Registered in SAM.Gov? | Yes                 |

## Subrecipient Name: HARRISON SENIOR LIVING OF GEORGETOWN

| TIN                     | 208972439           |
|-------------------------|---------------------|
| Unique Entity Identifer |                     |
| POC Email Address       |                     |
| Address Line 1          | 110 W. North Street |
| Address Line 2          |                     |
| Address Line 3          |                     |
| City                    | Georgetown          |
| State                   | DE                  |
| Zip                     | 19947               |
| Zip+4                   |                     |

| Entity Type   | Beneficiary |
|---|-------------|
| Is the Recipient Registered in SAM.Gov?   | No          |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No          |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No          |

### Subrecipient Name: HOME FOR AGED WOMEN

| TIN   | 510075766          |
|---|--------------------|
| Unique Entity Identifer   |                    |
| POC Email Address   |                    |
| Address Line 1  | 1101 Gilpin Avenue |
| Address Line 2  |                    |
| Address Line 3  |                    |
| City  | Wilmington         |
| State   | DE                 |
| Zip   | 19806              |
| Zip+4   |                    |
| Entity Type   | Beneficiary        |
| Is the Recipient Registered in SAM.Gov?   | No                 |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                 |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                 |

# Subrecipient Name: INGLESIDE HOMES INC

| TIN  | 510113243            |
|--|----------------------|
| Unique Entity Identifer  | NN72MNQKJY36         |
| POC Email Address  |                      |
| Address Line 1   | 1605 N. Broom Street |
| Address Line 2   |                      |
| Address Line 3   |                      |
| City   | Wilmington           |
| State  | DE                   |
| Zip  | 19806                |
| Zip+4  |                      |
| Entity Type  | Beneficiary          |
| Is the Recipient Registered in SAM.Gov?  | Yes                  |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds? | No                   |
| In the preceding fiscal year, did recipient receive \$25 million   |                      |

### Subrecipient Name: KENTMERE REHABILITATION & HEATHCARE CENT

| TIN   | 510077156         |
|---|-------------------|
| Unique Entity Identifer   |                   |
| POC Email Address   |                   |
| Address Line 1  | 1900 Lovering Ave |
| Address Line 2  |                   |
| Address Line 3  |                   |
| City  | Wilmington        |
| State   | DE                |
| Zip   | 19806             |
| Zip+4   |                   |
| Entity Type   | Beneficiary       |
| Is the Recipient Registered in SAM.Gov?   | No                |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                |

#### Subrecipient Name: La Red Health Center

| TIN                                     | 141850828         |
|---|-------------------|
| Unique Entity Identifer                 | PLUJWPAKX8N9      |
| POC Email Address                       |                   |
| Address Line 1                          | 21444 Carmean Way |
| Address Line 2                          |                   |
| Address Line 3                          |                   |
| City                                    | Georgetown        |
| State                                   | DE                |
| Zip                                     | 19947             |
| Zip+4                                   |                   |
| Entity Type                             | Beneficiary       |
| Is the Recipient Registered in SAM.Gov? | Yes               |

#### Subrecipient Name: LITTLE SISTERS OF THE POOR INC

| 510095986            |
|----------------------|
| HV5YLL9TFAP5         |
|                      |
| 185 Salem Church Rd. |
|                      |
|                      |

| Address Line 3  |             |
|---|-------------|
| City  | Newark      |
| State   | DE          |
| Zip   | 19713       |
| Zip+4   |             |
| Entity Type   | Beneficiary |
| Is the Recipient Registered in SAM.Gov?   | Yes         |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No          |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No          |

# Subrecipient Name: MADELINE CARE CENTER LLC

| TIN   | 463475364           |
|---|---------------------|
| Unique Entity Identifer   |                     |
| POC Email Address   |                     |
| Address Line 1  | 4800 Lancaster Pike |
| Address Line 2  |                     |
| Address Line 3  |                     |
| City  | Wilmington          |
| State   | DE                  |
| Zip   | 19807               |
| Zip+4   |                     |
| Entity Type   | Beneficiary         |
| Is the Recipient Registered in SAM.Gov?   | No                  |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                  |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                  |

# Subrecipient Name: MANOR CARE - PIKE CREEK

| TIN                     | 260623346         |
|-------------------------|-------------------|
| Unique Entity Identifer |                   |
| POC Email Address       |                   |
| Address Line 1          | 5651 Limestone Rd |
| Address Line 2          |                   |
| Address Line 3          |                   |
| City                    | Wilmington        |
| State                   | DE                |
| Zip                     | 19808             |
| Zip+4                   |                   |

| Entity Type   | Beneficiary |
|---|-------------|
| Is the Recipient Registered in SAM.Gov?   | No          |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No          |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No          |

## Subrecipient Name: MANOR CARE OF WILMINGTON DE LLC

| TIN   | 260623367    |
|---|--------------|
| Unique Entity Identifer   |              |
| POC Email Address   |              |
| Address Line 1  | 700 Foulk Rd |
| Address Line 2  |              |
| Address Line 3  |              |
| City  | Perrysburg   |
| State   | ОН           |
| Zip   | 43551        |
| Zip+4   |              |
| Entity Type   | Beneficiary  |
| Is the Recipient Registered in SAM.Gov?   | No           |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No           |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No           |

## Subrecipient Name: MARY CAMPBELL CTR INC

| TIN  | 237089122        |
|--|------------------|
| Unique Entity Identifer  |                  |
| POC Email Address  |                  |
| Address Line 1   | 4641 Weldin Road |
| Address Line 2   |                  |
| Address Line 3   |                  |
| City   | Wilmington       |
| State  | DE               |
| Zip  | 19803            |
| Zip+4  |                  |
| Entity Type  | Beneficiary      |
| Is the Recipient Registered in SAM.Gov?  | No               |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds? | No               |
| In the preceding fiscal year, did recipient receive \$25 million   |                  |

### Subrecipient Name: MILFORD AID II OPCO LLC

| TIN   | 813077331         |
|---|-------------------|
| Unique Entity Identifer   | CRBJPFUKN9J5      |
| POC Email Address   |                   |
| Address Line 1  | 500 S DuPont Blvd |
| Address Line 2  |                   |
| Address Line 3  |                   |
| City  | Milford           |
| State   | DE                |
| Zip   | 19963             |
| Zip+4   |                   |
| Entity Type   | Beneficiary       |
| Is the Recipient Registered in SAM.Gov?   | Yes               |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                |

### Subrecipient Name: Mot Charter School

| TIN                                     | 958800000      |
|---|----------------|
| Unique Entity Identifer                 | NEL8MP1KJF31   |
| POC Email Address                       |                |
| Address Line 1                          | 1156 Levels Rd |
| Address Line 2                          |                |
| Address Line 3                          |                |
| City                                    | Middletown     |
| State                                   | DE             |
| Zip                                     | 19709          |
| Zip+4                                   |                |
| Entity Type                             | Subrecipient   |
| Is the Recipient Registered in SAM.Gov? | Yes            |

#### Subrecipient Name: New Castle County Vo-Tech Sch

| TIN                     | 953800000       |
|-------------------------|-----------------|
| Unique Entity Identifer |                 |
| POC Email Address       |                 |
| Address Line 1          | 1417 Newport Rd |
| Address Line 2          |                 |
|                         |                 |

| Address Line 3                          |             |
|---|-------------|
| City                                    | Wilmington  |
| State                                   | DE          |
| Zip                                     | 19804       |
| Zip+4                                   |             |
| Entity Type                             | Beneficiary |
| Is the Recipient Registered in SAM.Gov? | Yes         |

## Subrecipient Name: NEW CASTLE HEALTH & REHABILITATION CENTE

| TIN                                     | 823535782         |
|---|-------------------|
| Unique Entity Identifer                 | ZJL8HJ8PBGM7      |
| POC Email Address                       |                   |
| Address Line 1                          | 32 Buena Vista Dr |
| Address Line 2                          |                   |
| Address Line 3                          |                   |
| City                                    | New Castle        |
| State                                   | DE                |
| Zip                                     | 19720             |
| Zip+4                                   |                   |
| Entity Type                             | Beneficiary       |
| Is the Recipient Registered in SAM.Gov? | Yes               |

### Subrecipient Name: Newark Charter School

| TIN                                     | 958900000        |
|---|------------------|
| Unique Entity Identifer                 | QFAKK4ZTD7M1     |
| POC Email Address                       |                  |
| Address Line 1                          | 2001 Patriot Way |
| Address Line 2                          |                  |
| Address Line 3                          |                  |
| City                                    | Newark           |
| State                                   | DE               |
| Zip                                     | 19711            |
| Zip+4                                   |                  |
| Entity Type                             | Subrecipient     |
| Is the Recipient Registered in SAM.Gov? | Yes              |

### Subrecipient Name: Odyssey Charter School

| TIN                     | 000006329    |
|-------------------------|--------------|
| Unique Entity Identifer | M3YLMQ7C75R5 |
|                         |              |

| POC Email Address                       |                     |
|---|---------------------|
| Address Line 1                          | 4319 Lancaster Pike |
| Address Line 2                          |                     |
| Address Line 3                          |                     |
| City                                    | Wilmington          |
| State                                   | DE                  |
| Zip                                     | 19805               |
| Zip+4                                   |                     |
| Entity Type                             | Subrecipient        |
| Is the Recipient Registered in SAM.Gov? | Yes                 |

## Subrecipient Name: ONIX SILVERSIDE LLC

| TIN   | 263380516            |
|---|----------------------|
| Unique Entity Identifer   |                      |
| POC Email Address   |                      |
| Address Line 1  | 3322 Silverside Road |
| Address Line 2  |                      |
| Address Line 3  |                      |
| City  | Wilmington           |
| State   | DE                   |
| Zip   | 19810                |
| Zip+4   |                      |
| Entity Type   | Beneficiary          |
| Is the Recipient Registered in SAM.Gov?   | No                   |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                   |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                   |

## Subrecipient Name: PARKVIEW DE SNF MANAGEMENT LLC

| TIN                     | 842421746         |
|-------------------------|-------------------|
| Unique Entity Identifer | NQK4XFLKGYE1      |
| POC Email Address       |                   |
| Address Line 1          | 2801 W 6th Street |
| Address Line 2          |                   |
| Address Line 3          |                   |
| City                    | Wilmington        |
| State                   | DE                |
| Zip                     | 19805             |
| Zip+4                   |                   |
|                         |                   |

| Entity Type                             | Beneficiary |
|---|-------------|
| Is the Recipient Registered in SAM.Gov? | Yes         |

#### Subrecipient Name: PEACHTREE HEALTH GROUP

| TIN   | 822026012                  |
|---|----------------------------|
| Unique Entity Identifer   |                            |
| POC Email Address   |                            |
| Address Line 1  | 26890 Lewes Georgetown Hwy |
| Address Line 2  |                            |
| Address Line 3  |                            |
| City  | Harbeson                   |
| State   | DE                         |
| Zip   | 19961                      |
| Zip+4   |                            |
| Entity Type   | Beneficiary                |
| Is the Recipient Registered in SAM.Gov?   | No                         |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                         |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                         |

#### Subrecipient Name: PENINSULA HEALTHCARE LLC

| TIN   | 202897174                 |
|---|---------------------------|
| Unique Entity Identifer   |                           |
| POC Email Address   |                           |
| Address Line 1  | 26002 John J Williams Hwy |
| Address Line 2  |                           |
| Address Line 3  |                           |
| City  | Millsboro                 |
| State   | DE                        |
| Zip   | 19966                     |
| Zip+4   |                           |
| Entity Type   | Beneficiary               |
| Is the Recipient Registered in SAM.Gov?   | No                        |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                        |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                        |

#### Subrecipient Name: PIKE CREEK HEALTHCARE SVCS LLC

| Unique Entity Identifer   |                               |
|---|-------------------------------|
| POC Email Address   |                               |
| Address Line 1  | 3540 Three Little Bakers Blvd |
| Address Line 2  |                               |
| Address Line 3  |                               |
| City  | Wilmington                    |
| State   | DE                            |
| Zip   | 19808                         |
| Zip+4   |                               |
| Entity Type   | Beneficiary                   |
| Is the Recipient Registered in SAM.Gov?   | No                            |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                            |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                            |

## Subrecipient Name: POLARIS HEALTHCARE

| TIN   | 841842532          |
|---|--------------------|
| Unique Entity Identifer   |                    |
| POC Email Address   |                    |
| Address Line 1  | 21 W Clarke Avenue |
| Address Line 2  |                    |
| Address Line 3  |                    |
| City  | Milford            |
| State   | DE                 |
| Zip   | 19963              |
| Zip+4   |                    |
| Entity Type   | Beneficiary        |
| Is the Recipient Registered in SAM.Gov?   | No                 |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                 |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                 |

# Subrecipient Name: PREMIERE HEALTHCARE INC

| TIN                     | 510305447      |
|-------------------------|----------------|
| Unique Entity Identifer |                |
| POC Email Address       |                |
| Address Line 1          | 254 W. Main St |
| Address Line 2          |                |
|                         |                |

| Address Line 3  |             |
|---|-------------|
| City  | Newark      |
| State   | DE          |
| Zip   | 19711       |
| Zip+4   |             |
| Entity Type   | Beneficiary |
| Is the Recipient Registered in SAM.Gov?   | No          |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No          |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No          |

## Subrecipient Name: PRESBYTERIAN HOMES INC

| TIN   | 232941518       |
|---|-----------------|
| Unique Entity Identifer   |                 |
| POC Email Address   |                 |
| Address Line 1  | 1175 McKee Road |
| Address Line 2  |                 |
| Address Line 3  |                 |
| City  | Dover           |
| State   | DE              |
| Zip   | 19904           |
| Zip+4   |                 |
| Entity Type   | Beneficiary     |
| Is the Recipient Registered in SAM.Gov?   | No              |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No              |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No              |

### Subrecipient Name: Red Clay Consol Sch Dist Ofc

| TIN                     | 953200000       |
|-------------------------|-----------------|
| Unique Entity Identifer | PPJSJHDQJ513    |
| POC Email Address       |                 |
| Address Line 1          | 1502 Spruce Ave |
| Address Line 2          |                 |
| Address Line 3          |                 |
| City                    | Wilmington      |
| State                   | DE              |
| Zip                     | 19805           |
| Zip+4                   |                 |

| Entity Type                             | Subrecipient |
|---|--------------|
| Is the Recipient Registered in SAM.Gov? | Yes          |

#### Subrecipient Name: REGAL HEIGHTS HEALTHCARE

| TIN   | 204912212           |
|---|---------------------|
| Unique Entity Identifer   |                     |
| POC Email Address   |                     |
| Address Line 1  | 6525 Lancaster Pike |
| Address Line 2  |                     |
| Address Line 3  |                     |
| City  | Hockessin           |
| State   | DE                  |
| Zip   | 19707               |
| Zip+4   |                     |
| Entity Type   | Beneficiary         |
| Is the Recipient Registered in SAM.Gov?   | No                  |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                  |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                  |

#### Subrecipient Name: REGENCY HEALTHCARE AND REHAB CENTER

| TIN   | 208901567           |
|---|---------------------|
| Unique Entity Identifer   |                     |
| POC Email Address   |                     |
| Address Line 1  | 801 N. Broom Street |
| Address Line 2  |                     |
| Address Line 3  |                     |
| City  | Wilmington          |
| State   | DE                  |
| Zip   | 19806               |
| Zip+4   |                     |
| Entity Type   | Beneficiary         |
| Is the Recipient Registered in SAM.Gov?   | No                  |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                  |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                  |

#### Subrecipient Name: SNH DEL TENANT LLC- SHIPLEY MANOR

| TIN   | 842344739         |
|---|-------------------|
| Unique Entity Identifer   |                   |
| POC Email Address   |                   |
| Address Line 1  | 2723 Shipley Road |
| Address Line 2  |                   |
| Address Line 3  |                   |
| City  | Wilmington        |
| State   | DE                |
| Zip   | 19810             |
| Zip+4   |                   |
| Entity Type   | Beneficiary       |
| Is the Recipient Registered in SAM.Gov?   | No                |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                |

# Subrecipient Name: SPRINGPOINT AT LEWES

| TIN   | 000017152            |
|---|----------------------|
| Unique Entity Identifer   | F1KSHKFE57K1         |
| POC Email Address   |                      |
| Address Line 1  | 17028 Cadbury Circle |
| Address Line 2  |                      |
| Address Line 3  |                      |
| City  | Lewes                |
| State   | DE                   |
| Zip   | 19958                |
| Zip+4   |                      |
| Entity Type   | Beneficiary          |
| Is the Recipient Registered in SAM.Gov?   | Yes                  |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                   |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                   |

# Subrecipient Name: STATE SENIOR CARE LLC

| TIN                     | 475223597                    |
|-------------------------|------------------------------|
| Unique Entity Identifer |                              |
| POC Email Address       |                              |
| Address Line 1          | 1000 Legion Place Suite 1600 |
| Address Line 2          |                              |

| Address Line 3  |             |
|---|-------------|
| City  | Orlando     |
| State   | FL          |
| Zip   | 32801       |
| Zip+4   |             |
| Entity Type   | Beneficiary |
| Is the Recipient Registered in SAM.Gov?   | No          |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No          |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No          |

## Subrecipient Name: STONEGATES RETIREMENT COMMUNITY

| TIN   | 510267730         |
|---|-------------------|
| Unique Entity Identifer   |                   |
| POC Email Address   |                   |
| Address Line 1  | 4301 Kennett Pike |
| Address Line 2  |                   |
| Address Line 3  |                   |
| City  | Greenville        |
| State   | DE                |
| Zip   | 19807             |
| Zip+4   |                   |
| Entity Type   | Beneficiary       |
| Is the Recipient Registered in SAM.Gov?   | No                |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                |

## Subrecipient Name: Sussex Academy Of Arts/Science

| TIN                     | 957700000        |
|-------------------------|------------------|
| Unique Entity Identifer | RVZ4MQKD44F4     |
| POC Email Address       |                  |
| Address Line 1          | 21150 Airport Rd |
| Address Line 2          |                  |
| Address Line 3          |                  |
| City                    | Georgetown       |
| State                   | DE               |
| Zip                     | 19947            |
|                         |                  |

| Zip+4                                   |              |
|---|--------------|
| Entity Type                             | Subrecipient |
| Is the Recipient Registered in SAM.Gov? | Yes          |

#### Subrecipient Name: Sussex Technical Schl District

| TIN                                     | 954000000             |
|---|-----------------------|
| Unique Entity Identifer                 | JSVYVLVXCNK5          |
| POC Email Address                       |                       |
| Address Line 1                          | 17137 County Seat HWY |
| Address Line 2                          |                       |
| Address Line 3                          |                       |
| City                                    | Georgetown            |
| State                                   | DE                    |
| Zip                                     | 19947                 |
| Zip+4                                   |                       |
| Entity Type                             | Subrecipient          |
| Is the Recipient Registered in SAM.Gov? | Yes                   |

# Subrecipient Name: THE LORELTON FOUNDATION

| TIN   | 000278275          |
|---|--------------------|
| Unique Entity Identifer   | MP22BDCFSJG7       |
| POC Email Address   |                    |
| Address Line 1  | 2200 W. 4th Street |
| Address Line 2  |                    |
| Address Line 3  |                    |
| City  | Wilmington         |
| State   | DE                 |
| Zip   | 19805              |
| Zip+4   |                    |
| Entity Type   | Beneficiary        |
| Is the Recipient Registered in SAM.Gov?   | Yes                |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                 |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                 |

## Subrecipient Name: THE MILTON AND HATTIE KUTZ HOME INC

| TIN                     | 510070786 |
|-------------------------|-----------|
| Unique Entity Identifer |           |
| POC Email Address       |           |

| Address Line 1  | 704 River Road |
|---|----------------|
| Address Line 2  |                |
| Address Line 3  |                |
| City  | Wilmington     |
| State   | DE             |
| Zip   | 19809          |
| Zip+4   |                |
| Entity Type   | Beneficiary    |
| Is the Recipient Registered in SAM.Gov?   | No             |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No             |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No             |

## Subrecipient Name: WELL BL OPCO LLC

| TIN   | 830973303             |
|---|-----------------------|
| Unique Entity Identifer   | QQ5YX26JETE9          |
| POC Email Address   |                       |
| Address Line 1  | 21111 Arrington Drive |
| Address Line 2  |                       |
| Address Line 3  |                       |
| City  | Selbyville            |
| State   | DE                    |
| Zip   | 19975                 |
| Zip+4   |                       |
| Entity Type   | Beneficiary           |
| Is the Recipient Registered in SAM.Gov?   | Yes                   |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                    |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                    |

### Subrecipient Name: Westside Family Healthcare

| TIN                     | 222488654                  |
|-------------------------|----------------------------|
| Unique Entity Identifer | WFMXMMKGLAC6               |
| POC Email Address       |                            |
| Address Line 1          | 300 Water Street Suite 200 |
| Address Line 2          |                            |
| Address Line 3          |                            |
| City                    | Wilmington                 |
| State                   | DE                         |

| Zip                                     | 19801       |
|---|-------------|
| Zip+4                                   |             |
| Entity Type                             | Beneficiary |
| Is the Recipient Registered in SAM.Gov? | Yes         |

#### Subrecipient Name: Woodbridge School District

| TIN                                     | 953500000        |  |
|---|------------------|--|
| Unique Entity Identifer                 |                  |  |
| POC Email Address                       |                  |  |
| Address Line 1                          | 16359 Sussex Hwy |  |
| Address Line 2                          |                  |  |
| Address Line 3                          |                  |  |
| City                                    | Bridgeville      |  |
| State                                   | DE               |  |
| Zip                                     | 19933            |  |
| Zip+4                                   |                  |  |
| Entity Type                             | Subrecipient     |  |
| Is the Recipient Registered in SAM.Gov? | Yes              |  |

## Subrecipient Name: 300 GATEWAY LLC

| TIN   | 460882029     |
|---|---------------|
| Unique Entity Identifer   |               |
| POC Email Address   |               |
| Address Line 1  | 1200 West Ave |
| Address Line 2  |               |
| Address Line 3  |               |
| City  | New Castle    |
| State   | DE            |
| Zip   | 19720         |
| Zip+4   |               |
| Entity Type   | Beneficiary   |
| Is the Recipient Registered in SAM.Gov?   | N/A           |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No            |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No            |

#### Subrecipient Name: AATMEEYA HOSPITALITIES LLC

| TIN                     | 263146111 |
|-------------------------|-----------|
| Unique Entity Identifer |           |

| POC Email Address   |               |
|---|---------------|
| Address Line 1  | 1213 West Ave |
| Address Line 2  |               |
| Address Line 3  |               |
| City  | New Castle    |
| State   | DE            |
| Zip   | 19720         |
| Zip+4   |               |
| Entity Type   | Beneficiary   |
| Is the Recipient Registered in SAM.Gov?   | N/A           |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No            |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No            |

## Subrecipient Name: Abbott Rapid Dx North America, Llc

| TIN                                     | 000256563     |
|---|---------------|
| Unique Entity Identifer                 | H6ZLTSJFD465  |
| POC Email Address                       |               |
| Address Line 1                          | PO Box 734585 |
| Address Line 2                          |               |
| Address Line 3                          |               |
| City                                    | Chicago       |
| State                                   | IL            |
| Zip                                     | 60673         |
| Zip+4                                   | 4585          |
| Entity Type                             | Contractor    |
| Is the Recipient Registered in SAM.Gov? | Yes           |

## Subrecipient Name: AKSHAR LLC

| TIN                     | 753119108            |
|-------------------------|----------------------|
| Unique Entity Identifer | ED5DFJ1KYNX8         |
| POC Email Address       |                      |
| Address Line 1          | 12036 Sussex Highway |
| Address Line 2          |                      |
| Address Line 3          |                      |
| City                    | Greenwood            |
| State                   | DE                   |
| Zip                     | 19950                |
| Zip+4                   |                      |

| Entity Type   | Beneficiary |
|---|-------------|
| Is the Recipient Registered in SAM.Gov?   | N/A         |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No          |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No          |

### Subrecipient Name: ALOYSIUS BUTLER & CLARK

| TIN   | 000024928                |
|---|--------------------------|
| Unique Entity Identifer   |                          |
| POC Email Address   |                          |
| Address Line 1  | 819 N. Washington Street |
| Address Line 2  |                          |
| Address Line 3  |                          |
| City  | Wilmington               |
| State   | DE                       |
| Zip   | 19801                    |
| Zip+4   |                          |
| Entity Type   | Contractor               |
| Is the Recipient Registered in SAM.Gov?   | No                       |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                       |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                       |

## Subrecipient Name: BEAR HOSPITALITY LLC

| TIN  | 000365392           |
|--|---------------------|
| Unique Entity Identifer  |                     |
| POC Email Address  |                     |
| Address Line 1   | 875 Pulaski Highway |
| Address Line 2   |                     |
| Address Line 3   |                     |
| City   | Bear                |
| State  | DE                  |
| Zip  | 19701               |
| Zip+4  |                     |
| Entity Type  | Beneficiary         |
| Is the Recipient Registered in SAM.Gov?  | No                  |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds? | No                  |
| In the preceding fiscal year, did recipient receive \$25 million   |                     |

### Subrecipient Name: BHAVANI HOSPITALITY INC

| TIN   | 208134172         |
|---|-------------------|
| Unique Entity Identifer   | D9Z3TZYW1DT3      |
| POC Email Address   |                   |
| Address Line 1  | 20762 DuPont Blvd |
| Address Line 2  |                   |
| Address Line 3  |                   |
| City  | Georgetown        |
| State   | DE                |
| Zip   | 19947             |
| Zip+4   |                   |
| Entity Type   | Beneficiary       |
| Is the Recipient Registered in SAM.Gov?   | No                |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                |

### Subrecipient Name: BHAVI MOTEL LLC

| TIN   | 562538116      |
|---|----------------|
| Unique Entity Identifer   |                |
| POC Email Address   |                |
| Address Line 1  | 1120 S College |
| Address Line 2  |                |
| Address Line 3  |                |
| City  | Newark         |
| State   | DE             |
| Zip   | 19713          |
| Zip+4   |                |
| Entity Type   | Beneficiary    |
| Is the Recipient Registered in SAM.Gov?   | No             |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No             |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No             |

### Subrecipient Name: Campus Cafe LLC

| TIN                     | 842847953 |
|-------------------------|-----------|
| Unique Entity Identifer |           |

| POC Email Address   |                    |
|---|--------------------|
| Address Line 1  | 1401 Aliceanna St. |
| Address Line 2  |                    |
| Address Line 3  |                    |
| City  | Baltimore          |
| State   | MD                 |
| Zip   | 21231              |
| Zip+4   |                    |
| Entity Type   | Beneficiary        |
| Is the Recipient Registered in SAM.Gov?   | No                 |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                 |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                 |

# Subrecipient Name: Cape Pharmacy

| TIN                                     | 461476253           |
|---|---------------------|
| Unique Entity Identifer                 |                     |
| POC Email Address                       |                     |
| Address Line 1                          | 16924 Savannah Road |
| Address Line 2                          |                     |
| Address Line 3                          |                     |
| City                                    | Lewes               |
| State                                   | DE                  |
| Zip                                     | 19958               |
| Zip+4                                   |                     |
| Entity Type                             | Beneficiary         |
| Is the Recipient Registered in SAM.Gov? | Yes                 |

# Subrecipient Name: CENTRAL DELAWARE HOUSING COLLABORATIVE

| TIN                     | 000504030    |
|-------------------------|--------------|
| Unique Entity Identifer | LFE8ZDXXDH78 |
| POC Email Address       |              |
| Address Line 1          | PO Box 1614  |
| Address Line 2          |              |
| Address Line 3          |              |
| City                    | Dover        |
| State                   | DE           |
| Zip                     | 19903        |
| Zip+4                   |              |

| Entity Type   | Contractor |
|---|------------|
| Is the Recipient Registered in SAM.Gov?   | No         |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No         |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No         |

### Subrecipient Name: CHUDASAMA ENTERPRISE LLC

| TIN   | 510387875         |
|---|-------------------|
| Unique Entity Identifer   |                   |
| POC Email Address   |                   |
| Address Line 1  | 28344 DuPont Blvd |
| Address Line 2  |                   |
| Address Line 3  |                   |
| City  | Millsboro         |
| State   | DE                |
| Zip   | 19966             |
| Zip+4   |                   |
| Entity Type   | Beneficiary       |
| Is the Recipient Registered in SAM.Gov?   | No                |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                |

## Subrecipient Name: Civic Health Services

| TIN                                     | 454288267     |
|---|---------------|
| Unique Entity Identifer                 |               |
| POC Email Address                       |               |
| Address Line 1                          | 337 Civic Ave |
| Address Line 2                          | Suite 20      |
| Address Line 3                          |               |
| City                                    | Salisbury     |
| State                                   | MD            |
| Zip                                     | 21804         |
| Zip+4                                   |               |
| Entity Type                             | Beneficiary   |
| Is the Recipient Registered in SAM.Gov? | Yes           |

#### Subrecipient Name: COMPUTER AID INC

| TIN                                     | 232180878         |
|---|-------------------|
| Unique Entity Identifer                 | TH4JEF855433      |
| POC Email Address                       |                   |
| Address Line 1                          | 1390 Ridgeview Dr |
| Address Line 2                          |                   |
| Address Line 3                          |                   |
| City                                    | Allentown         |
| State                                   | PA                |
| Zip                                     | 18104             |
| Zip+4                                   |                   |
| Entity Type                             | Contractor        |
| Is the Recipient Registered in SAM.Gov? | Yes               |

# Subrecipient Name: DIPNA INC

| TIN   | 510280759         |
|---|-------------------|
| Unique Entity Identifer   |                   |
| POC Email Address   |                   |
| Address Line 1  | 5209 Concord Pike |
| Address Line 2  |                   |
| Address Line 3  |                   |
| City  | Wilmington        |
| State   | DE                |
| Zip   | 19803             |
| Zip+4   |                   |
| Entity Type   | Beneficiary       |
| Is the Recipient Registered in SAM.Gov?   | No                |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                |

## Subrecipient Name: DOVER BUDGET INN INC

| TIN                     | 562665242             |
|-------------------------|-----------------------|
| Unique Entity Identifer |                       |
| POC Email Address       |                       |
| Address Line 1          | 1426 N DuPont Highway |
| Address Line 2          |                       |
| Address Line 3          |                       |
| City                    | Dover                 |
| State                   | DE                    |

| Zip   | 19901       |
|---|-------------|
| Zip+4   |             |
| Entity Type   | Beneficiary |
| Is the Recipient Registered in SAM.Gov?   | No          |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No          |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No          |

# Subrecipient Name: FAIRFIELD INN & SUITES

| TIN   | 271725461         |
|---|-------------------|
| Unique Entity Identifer   | MWAWCPPF5RC1      |
| POC Email Address   |                   |
| Address Line 1  | 2117 N Dupont Hwy |
| Address Line 2  |                   |
| Address Line 3  |                   |
| City  | New Castle        |
| State   | DE                |
| Zip   | 19720             |
| Zip+4   |                   |
| Entity Type   | Beneficiary       |
| Is the Recipient Registered in SAM.Gov?   | Yes               |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                |

## Subrecipient Name: Fisher Scientific

| TIN                                     | 000018807    |
|---|--------------|
| Unique Entity Identifer                 | NM4KGF2MKK96 |
| POC Email Address                       |              |
| Address Line 1                          | PO Box 3648  |
| Address Line 2                          |              |
| Address Line 3                          |              |
| City                                    | Boston       |
| State                                   | MA           |
| Zip                                     | 2241         |
| Zip+4                                   | 3648         |
| Entity Type                             | Contractor   |
| Is the Recipient Registered in SAM.Gov? | Yes          |

#### Subrecipient Name: Focus Pharmacy

| TIN                                     | 823447480             |
|---|-----------------------|
| Unique Entity Identifer                 | LJ18FP2YKY16          |
| POC Email Address                       |                       |
| Address Line 1                          | 117 East Glenwood Ave |
| Address Line 2                          |                       |
| Address Line 3                          |                       |
| City                                    | Smyrna                |
| State                                   | DE                    |
| Zip                                     | 19977                 |
| Zip+4                                   |                       |
| Entity Type                             | Contractor            |
| Is the Recipient Registered in SAM.Gov? | Yes                   |

## Subrecipient Name: GEORGETOWN HOTEL LLC

| TIN   | 000558730             |
|---|-----------------------|
| Unique Entity Identifer   |                       |
| POC Email Address   |                       |
| Address Line 1  | 301 College Park Lane |
| Address Line 2  |                       |
| Address Line 3  |                       |
| City  | Georgetown            |
| State   | DE                    |
| Zip   | 19947                 |
| Zip+4   |                       |
| Entity Type   | Beneficiary           |
| Is the Recipient Registered in SAM.Gov?   | No                    |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                    |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                    |

### Subrecipient Name: HARI OM HOSPITALITY

| TIN                     | 000300083         |
|-------------------------|-------------------|
| Unique Entity Identifer | QZEZKNPSKMM7      |
| POC Email Address       |                   |
| Address Line 1          | 145 S DuPont Blvd |
| Address Line 2          |                   |
| Address Line 3          |                   |
|                         |                   |

| City  | New Castle |
|---|------------|
| State   | DE         |
| Zip   | 19720      |
| Zip+4   |            |
| Entity Type   | Contractor |
| Is the Recipient Registered in SAM.Gov?   | Yes        |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No         |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No         |

## Subrecipient Name: HERSHA HOSPITALITY MANAGEMENT

| TIN   | 232947379        |
|---|------------------|
| Unique Entity Identifer   | YM1JLAPMJJ18     |
| POC Email Address   |                  |
| Address Line 1  | 365 Airport Road |
| Address Line 2  |                  |
| Address Line 3  |                  |
| City  | New Castle       |
| State   | DE               |
| Zip   | 19720            |
| Zip+4   |                  |
| Entity Type   | Beneficiary      |
| Is the Recipient Registered in SAM.Gov?   | No               |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No               |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No               |

# Subrecipient Name: HOPE CENTER FOR COMMUNITY EMPOWERMENT

| TIN                     | 000426740        |
|-------------------------|------------------|
| Unique Entity Identifer |                  |
| POC Email Address       |                  |
| Address Line 1          | 365 Airport Road |
| Address Line 2          |                  |
| Address Line 3          |                  |
| City                    | New Castle       |
| State                   | DE               |
| Zip                     | 19720            |
| Zip+4                   |                  |
| Entity Type             | Contractor       |

| Is the Recipient Registered in SAM.Gov?   | No |
|---|----|
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No |

## Subrecipient Name: J R AND LAUREL LLC

| TIN   | 000214876            |
|---|----------------------|
| Unique Entity Identifer   | ENHPXSJJJ6E7         |
| POC Email Address   |                      |
| Address Line 1  | 30702 Sussex Highway |
| Address Line 2  |                      |
| Address Line 3  |                      |
| City  | Laurel               |
| State   | DE                   |
| Zip   | 19956                |
| Zip+4   |                      |
| Entity Type   | Contractor           |
| Is the Recipient Registered in SAM.Gov?   | Yes                  |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                   |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                   |

## Subrecipient Name: J&P MANAGEMENT

| TIN   | 000030784         |
|---|-------------------|
| Unique Entity Identifer   |                   |
| POC Email Address   |                   |
| Address Line 1  | 20530 Dupont Blvd |
| Address Line 2  |                   |
| Address Line 3  |                   |
| City  | Georgetown        |
| State   | DE                |
| Zip   | 19947             |
| Zip+4   |                   |
| Entity Type   | Contractor        |
| Is the Recipient Registered in SAM.Gov?   | No                |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                |

### Subrecipient Name: JAY GANESH LLC

| TIN   | 000403278            |
|---|----------------------|
| Unique Entity Identifer   | RTQ3EL429374         |
| POC Email Address   |                      |
| Address Line 1  | 140 S Dupont Highway |
| Address Line 2  |                      |
| Address Line 3  |                      |
| City  | New Castle           |
| State   | DE                   |
| Zip   | 19720                |
| Zip+4   |                      |
| Entity Type   | Beneficiary          |
| Is the Recipient Registered in SAM.Gov?   | Yes                  |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                   |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                   |

## Subrecipient Name: JAY SHANKAR INC

| TIN   | 000453723          |
|---|--------------------|
| Unique Entity Identifer   |                    |
| POC Email Address   |                    |
| Address Line 1  | 4133 S Dupont Blvd |
| Address Line 2  |                    |
| Address Line 3  |                    |
| City  | Smyrna             |
| State   | DE                 |
| Zip   | 19977              |
| Zip+4   |                    |
| Entity Type   | Beneficiary        |
| Is the Recipient Registered in SAM.Gov?   | No                 |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                 |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                 |

### Subrecipient Name: JKSJ HOSPITALITY INC

| TIN                     | 000381523 |
|-------------------------|-----------|
| Unique Entity Identifer |           |
| POC Email Address       |           |

| Address Line 1  | 100 Rudder Rd |
|---|---------------|
| Address Line 2  |               |
| Address Line 3  |               |
| City  | Millsboro     |
| State   | DE            |
| Zip   | 19966         |
| Zip+4   |               |
| Entity Type   | Beneficiary   |
| Is the Recipient Registered in SAM.Gov?   | No            |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No            |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No            |

## Subrecipient Name: KANI LLC

| TIN   | 000218074            |
|---|----------------------|
| Unique Entity Identifer   |                      |
| POC Email Address   |                      |
| Address Line 1  | 348 N Dupont Highway |
| Address Line 2  |                      |
| Address Line 3  |                      |
| City  | Dover                |
| State   | DE                   |
| Zip   | 19901                |
| Zip+4   |                      |
| Entity Type   | Beneficiary          |
| Is the Recipient Registered in SAM.Gov?   | No                   |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                   |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                   |

# Subrecipient Name: LABURNUM HOSPITALITY LLC

| TIN                     | 824501702             |
|-------------------------|-----------------------|
| Unique Entity Identifer | MVBNAAH2DB13          |
| POC Email Address       |                       |
| Address Line 1          | 1612 North Dupont Hwy |
| Address Line 2          |                       |
| Address Line 3          |                       |
| City                    | New Castle            |
|                         |                       |

| State   | DE          |
|---|-------------|
| Zip   | 19720       |
| Zip+4   |             |
| Entity Type   | Beneficiary |
| Is the Recipient Registered in SAM.Gov?   | Yes         |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No          |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No          |

## Subrecipient Name: LALBHAI CORPORATION

| TIN   | 000213642           |
|---|---------------------|
| Unique Entity Identifer   |                     |
| POC Email Address   |                     |
| Address Line 1  | 3155 DuPont Parkway |
| Address Line 2  |                     |
| Address Line 3  |                     |
| City  | Townsend            |
| State   | DE                  |
| Zip   | 19734               |
| Zip+4   |                     |
| Entity Type   | Beneficiary         |
| Is the Recipient Registered in SAM.Gov?   | No                  |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                  |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                  |

# Subrecipient Name: Laurel Health Services

| TIN                                     | 810798145            |
|---|----------------------|
| Unique Entity Identifer                 |                      |
| POC Email Address                       |                      |
| Address Line 1                          | 30214 Sussex Highway |
| Address Line 2                          | Unit 7               |
| Address Line 3                          |                      |
| City                                    | Laurel               |
| State                                   | DE                   |
| Zip                                     | 19956                |
| Zip+4                                   |                      |
| Entity Type                             | Beneficiary          |
| Is the Recipient Registered in SAM.Gov? | Yes                  |

### Subrecipient Name: Living Well Pharmacy

\_\_\_\_\_

| TIN                                     | 451711997           |
|---|---------------------|
| Unique Entity Identifer                 | WL68LJ86UVJ7        |
| POC Email Address                       |                     |
| Address Line 1                          | 723 N. Broad Street |
| Address Line 2                          |                     |
| Address Line 3                          |                     |
| City                                    | Middletown          |
| State                                   | DE                  |
| Zip                                     | 19709               |
| Zip+4                                   |                     |
| Entity Type                             | Contractor          |
| Is the Recipient Registered in SAM.Gov? | Yes                 |

### Subrecipient Name: MALL AND SONS LLC

| TIN   | 431975873        |
|---|------------------|
| Unique Entity Identifer   |                  |
| POC Email Address   |                  |
| Address Line 1  | 23450 SUSSEX HWY |
| Address Line 2  |                  |
| Address Line 3  |                  |
| City  | Seaford          |
| State   | DE               |
| Zip   | 19973            |
| Zip+4   |                  |
| Entity Type   | Beneficiary      |
| Is the Recipient Registered in SAM.Gov?   | No               |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No               |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No               |

## Subrecipient Name: MALL MANAGEMENT LLC

| TIN                     | 760714345         |
|-------------------------|-------------------|
| Unique Entity Identifer |                   |
| POC Email Address       |                   |
| Address Line 1          | 16218 Coastal Hwy |
| Address Line 2          |                   |
| Address Line 3          |                   |

| City  | Lewes       |
|---|-------------|
| State   | DE          |
| Zip   | 19958       |
| Zip+4   |             |
| Entity Type   | Beneficiary |
| Is the Recipient Registered in SAM.Gov?   | No          |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No          |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No          |

# Subrecipient Name: MTS SOFTWARE SOLUTIONS INC

| TIN                                     | 000007311           |
|---|---------------------|
| Unique Entity Identifer                 | E95VRBFLM1L5        |
| POC Email Address                       |                     |
| Address Line 1                          | 225 Executive Drive |
| Address Line 2                          |                     |
| Address Line 3                          |                     |
| City                                    | Moorestown          |
| State                                   | NJ                  |
| Zip                                     | 8057                |
| Zip+4                                   |                     |
| Entity Type                             | Contractor          |
| Is the Recipient Registered in SAM.Gov? | Yes                 |

## Subrecipient Name: NAV & KIRAN INC

| TIN  | 000580601            |
|--|----------------------|
| Unique Entity Identifer  |                      |
| POC Email Address  |                      |
| Address Line 1   | 348 N Dupont Highway |
| Address Line 2   |                      |
| Address Line 3   |                      |
| City   | Dover                |
| State  | DE                   |
| Zip  | 19901                |
| Zip+4  |                      |
| Entity Type  | Contractor           |
| Is the Recipient Registered in SAM.Gov?  | No                   |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds? | No                   |

#### Subrecipient Name: NEIL KANTH CORPORATION

| TIN   | 000215215             |
|---|-----------------------|
| Unique Entity Identifer   |                       |
| POC Email Address   |                       |
| Address Line 1  | 2171 S DuPont Highway |
| Address Line 2  |                       |
| Address Line 3  |                       |
| City  | Dover                 |
| State   | DE                    |
| Zip   | 19901                 |
| Zip+4   |                       |
| Entity Type   | Beneficiary           |
| Is the Recipient Registered in SAM.Gov?   | No                    |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                    |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                    |

#### Subrecipient Name: NILKANTH INC DBA PLEASANT HILL MOTEL

| TIN   | 000558606           |
|---|---------------------|
| Unique Entity Identifer   |                     |
| POC Email Address   |                     |
| Address Line 1  | 3155 DuPont Parkway |
| Address Line 2  |                     |
| Address Line 3  |                     |
| City  | Townsend            |
| State   | DE                  |
| Zip   | 19734               |
| Zip+4   |                     |
| Entity Type   | Beneficiary         |
| Is the Recipient Registered in SAM.Gov?   | No                  |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                  |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                  |

#### Subrecipient Name: RESORT HOTEL LLC

| TIN | 000577309 |
|-----|-----------|
|     |           |

| Unique Entity Identifer   |                      |
|---|----------------------|
| POC Email Address   |                      |
| Address Line 1  | 19210 Costal Highway |
| Address Line 2  |                      |
| Address Line 3  |                      |
| City  | Rehoboth             |
| State   | DE                   |
| Zip   | 19971                |
| Zip+4   |                      |
| Entity Type   | Beneficiary          |
| Is the Recipient Registered in SAM.Gov?   | No                   |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                   |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                   |

# Subrecipient Name: RISHI HOSPITALITY LLC

| TIN   | 000214702              |
|---|------------------------|
| Unique Entity Identifer   |                        |
| POC Email Address   |                        |
| Address Line 1  | 3306 Philadelphia Pike |
| Address Line 2  |                        |
| Address Line 3  |                        |
| City  | Claymont               |
| State   | DE                     |
| Zip   | 19703                  |
| Zip+4   |                        |
| Entity Type   | Beneficiary            |
| Is the Recipient Registered in SAM.Gov?   | No                     |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                     |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                     |

# Subrecipient Name: RP HOSPITALITY LLC

| TIN                     | 463088765              |
|-------------------------|------------------------|
| Unique Entity Identifer |                        |
| POC Email Address       |                        |
| Address Line 1          | 17010 S DuPont Highway |
| Address Line 2          |                        |
| Address Line 3          |                        |

|   | <u> </u>    |
|---|-------------|
| City  | Harrington  |
| State   | DE          |
| Zip   | 19952       |
| Zip+4   |             |
| Entity Type   | Beneficiary |
| Is the Recipient Registered in SAM.Gov?   | No          |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No          |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No          |

## Subrecipient Name: SAHAJ ANAND REHOBOTH HOSPITALITY LLC

| TIN   | 000545638          |
|---|--------------------|
| Unique Entity Identifer   |                    |
| POC Email Address   |                    |
| Address Line 1  | 36012 Airport Road |
| Address Line 2  |                    |
| Address Line 3  |                    |
| City  | Rehoboth Beach     |
| State   | DE                 |
| Zip   | 19971              |
| Zip+4   |                    |
| Entity Type   | Beneficiary        |
| Is the Recipient Registered in SAM.Gov?   | No                 |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                 |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                 |

#### Subrecipient Name: SAHAJ NEW CASTLE HOSPITALITY LLC

| TIN                     | 272929302     |  |
|-------------------------|---------------|--|
| Unique Entity Identifer |               |  |
| POC Email Address       |               |  |
| Address Line 1          | 3 Memorial Dr |  |
| Address Line 2          |               |  |
| Address Line 3          |               |  |
| City                    | New Castle    |  |
| State                   | DE            |  |
| Zip                     | 19720         |  |
| Zip+4                   |               |  |
|                         |               |  |

| Entity Type   | Beneficiary |
|---|-------------|
| Is the Recipient Registered in SAM.Gov?   | No          |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No          |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No          |

## Subrecipient Name: SAI SWAMI III LLC

| TIN   | 000127947            |
|---|----------------------|
| Unique Entity Identifer   |                      |
| POC Email Address   |                      |
| Address Line 1  | 38660 Sussex Highway |
| Address Line 2  |                      |
| Address Line 3  |                      |
| City  | Delmar               |
| State   | DE                   |
| Zip   | 19940                |
| Zip+4   |                      |
| Entity Type   | Beneficiary          |
| Is the Recipient Registered in SAM.Gov?   | No                   |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                   |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                   |

# Subrecipient Name: SAS DE LLC

| TIN  | 463121590            |
|--|----------------------|
| Unique Entity Identifer  | MGDQJHMWKQP3         |
| POC Email Address  |                      |
| Address Line 1   | 22512 Sussex Highway |
| Address Line 2   |                      |
| Address Line 3   |                      |
| City   | Seaford              |
| State  | DE                   |
| Zip  | 19973                |
| Zip+4  |                      |
| Entity Type  | Beneficiary          |
| Is the Recipient Registered in SAM.Gov?  | Yes                  |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds? | No                   |
| In the preceding fiscal year, did recipient receive \$25 million   | 1                    |

### Subrecipient Name: SHANTA INC

| TIN   | 000302866            |
|---|----------------------|
| Unique Entity Identifer   |                      |
| POC Email Address   |                      |
| Address Line 1  | 640 S DuPont Highway |
| Address Line 2  |                      |
| Address Line 3  |                      |
| City  | Dover                |
| State   | DE                   |
| Zip   | 19901                |
| Zip+4   |                      |
| Entity Type   | Beneficiary          |
| Is the Recipient Registered in SAM.Gov?   | No                   |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                   |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                   |

#### Subrecipient Name: Shayona Health

| TIN                                     | 454288267            |
|---|----------------------|
| Unique Entity Identifer                 |                      |
| POC Email Address                       |                      |
| Address Line 1                          | 2500 West 4th Street |
| Address Line 2                          | Suite 1              |
| Address Line 3                          |                      |
| City                                    | Wilmington           |
| State                                   | DE                   |
| Zip                                     | 19805                |
| Zip+4                                   |                      |
| Entity Type                             | Beneficiary          |
| Is the Recipient Registered in SAM.Gov? | Yes                  |

#### Subrecipient Name: SHREE KISHNA INC

| 000236917            |
|----------------------|
|                      |
|                      |
| 699 N DuPont Highway |
|                      |
|                      |

| Address Line 3  |             |
|---|-------------|
| City  | Milford     |
| State   | DE          |
| Zip   | 19963       |
| Zip+4   |             |
| Entity Type   | Beneficiary |
| Is the Recipient Registered in SAM.Gov?   | No          |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No          |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No          |

# Subrecipient Name: SHRI SWAMI NARAYAN LLC

| TIN   | 161473532          |
|---|--------------------|
| Unique Entity Identifer   |                    |
| POC Email Address   |                    |
| Address Line 1  | 1119 S College Ave |
| Address Line 2  |                    |
| Address Line 3  |                    |
| City  | Newark             |
| State   | DE                 |
| Zip   | 19713              |
| Zip+4   |                    |
| Entity Type   | Beneficiary        |
| Is the Recipient Registered in SAM.Gov?   | No                 |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                 |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                 |

# Subrecipient Name: SOUKOON INC

| TIN                     | 465600095          |
|-------------------------|--------------------|
| Unique Entity Identifer |                    |
| POC Email Address       |                    |
| Address Line 1          | 9544 Ocean Highway |
| Address Line 2          |                    |
| Address Line 3          |                    |
| City                    | Delmar             |
| State                   | MD                 |
| Zip                     | 21875              |
| Zip+4                   |                    |

| Entity Type   | Beneficiary |
|---|-------------|
| Is the Recipient Registered in SAM.Gov?   | No          |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No          |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No          |

## Subrecipient Name: Indian River

| TIN                                     | 516000279       |
|---|-----------------|
| Unique Entity Identifer                 |                 |
| POC Email Address                       |                 |
| Address Line 1                          | 29772 Armory Rd |
| Address Line 2                          |                 |
| Address Line 3                          |                 |
| City                                    | Dagsboro        |
| State                                   | DE              |
| Zip                                     | 19939           |
| Zip+4                                   |                 |
| Entity Type                             | Subrecipient    |
| Is the Recipient Registered in SAM.Gov? | Yes             |

## Subrecipient Name: Lakeforest

| TIN                                     | 516000279            |
|---|----------------------|
| Unique Entity Identifer                 |                      |
| POC Email Address                       |                      |
| Address Line 1                          | 5407 Killens Pond Rd |
| Address Line 2                          |                      |
| Address Line 3                          |                      |
| City                                    | Felton               |
| State                                   | DE                   |
| Zip                                     | 19943                |
| Zip+4                                   |                      |
| Entity Type                             | Subrecipient         |
| Is the Recipient Registered in SAM.Gov? | Yes                  |

## Subrecipient Name: Milford High School

| TIN                     | 516000279      |
|-------------------------|----------------|
| Unique Entity Identifer |                |
| POC Email Address       |                |
| Address Line 1          | 117 Causey Ave |

| Address Line 2                          |              |
|---|--------------|
| Address Line 3                          |              |
| City                                    | Milfold      |
| State                                   | DE           |
| Zip                                     | 19963        |
| Zip+4                                   |              |
| Entity Type                             | Subrecipient |
| Is the Recipient Registered in SAM.Gov? | Yes          |

## Subrecipient Name: Sussex Central

| TIN                                     | 516000279          |
|---|--------------------|
| Unique Entity Identifer                 |                    |
| POC Email Address                       |                    |
| Address Line 1                          | 26026 Patriots Way |
| Address Line 2                          |                    |
| Address Line 3                          |                    |
| City                                    | Georgetown         |
| State                                   | DE                 |
| Zip                                     | 19947              |
| Zip+4                                   |                    |
| Entity Type                             | Subrecipient       |
| Is the Recipient Registered in SAM.Gov? | Yes                |

# Subrecipient Name: Transpara EHLP LLC dba Zebra Health Solutions

| TIN   | 852625535           |
|---|---------------------|
| Unique Entity Identifer   | C2S9P3DAWXW6        |
| POC Email Address   | sales@zebra.health  |
| Address Line 1  | 1037 NE 65th Street |
| Address Line 2  | #81946              |
| Address Line 3  |                     |
| City  | Seattle             |
| State   | WA                  |
| Zip   | 98115               |
| Zip+4   | 6655                |
| Entity Type   | Contractor          |
| Is the Recipient Registered in SAM.Gov?   | No                  |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                  |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                  |

### Subrecipient Name: P&C Roofing

| TIN   | 510112545             |
|---|-----------------------|
| Unique Entity Identifer   | J165C6LPZJJ5          |
| POC Email Address   | info@pcroofinginc.com |
| Address Line 1  | 35 Southgate Blvd     |
| Address Line 2  |                       |
| Address Line 3  |                       |
| City  | New Castle            |
| State   | DE                    |
| Zip   | 19720                 |
| Zip+4   |                       |
| Entity Type   | Contractor            |
| Is the Recipient Registered in SAM.Gov?   | No                    |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                    |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                    |

1

### Subrecipient Name: DelDeo Builders

| TIN                                     |                |
|---|----------------|
| Unique Entity Identifer                 | DV1VHGFK8S37   |
| POC Email Address                       |                |
| Address Line 1                          | 100 Naamans Rd |
| Address Line 2                          | Ste. 3-F       |
| Address Line 3                          |                |
| City                                    | Claymont       |
| State                                   | DE             |
| Zip                                     | 19703          |
| Zip+4                                   |                |
| Entity Type                             | Subrecipient   |
| Is the Recipient Registered in SAM.Gov? | Yes            |

## Subrecipient Name: WOHLSEN CONSTRUCTION COMPANY

| TIN                     |               |
|-------------------------|---------------|
| Unique Entity Identifer | HCP4CNVFT2K4  |
| POC Email Address       |               |
| Address Line 1          | 501 Carr Road |
| Address Line 2          | Ste 101       |
| Address Line 3          |               |

| City                                    | Wilmington               |
|---|--------------------------|
| State                                   | DE                       |
| Zip                                     | 19809                    |
| Zip+4                                   |                          |
| Entity Type                             | Subrecipient; Contractor |
| Is the Recipient Registered in SAM.Gov? | Yes                      |

### Subrecipient Name: UHS of Dover LLC

| TIN                                     | 233044421          |
|---|--------------------|
| Unique Entity Identifer                 |                    |
| POC Email Address                       |                    |
| Address Line 1                          | 725 Horsepond Road |
| Address Line 2                          |                    |
| Address Line 3                          |                    |
| City                                    | Dover              |
| State                                   | DE                 |
| Zip                                     | 19901              |
| Zip+4                                   |                    |
| Entity Type                             | Beneficiary        |
| Is the Recipient Registered in SAM.Gov? | Yes                |

### Subrecipient Name: Business Interface of Maryland

| TIN   | 161771385             |
|---|-----------------------|
| Unique Entity Identifer   | JK77MBKPWLY7          |
| POC Email Address   |                       |
| Address Line 1  | 800 North king Street |
| Address Line 2  | Plaza Level           |
| Address Line 3  |                       |
| City  | Wilmington            |
| State   | DE                    |
| Zip   | 19801                 |
| Zip+4   |                       |
| Entity Type   | Contractor            |
| Is the Recipient Registered in SAM.Gov?   | No                    |
| In the preceding fiscal year, did recipient receive 80% or<br>more of its annual gross revenue from federal funds?          | No                    |
| In the preceding fiscal year, did recipient receive \$25 million<br>or more of its annual gross revenue from federal funds? | No                    |

### Subrecipient Name: Delaware Nurses Association

| TIN                                     | 510066729                  |
|---|----------------------------|
| Unique Entity Identifer                 | GWHQKPADCX93               |
| POC Email Address                       |                            |
| Address Line 1                          | 4765 Ogletown Stanton Road |
| Address Line 2                          | Suite L10                  |
| Address Line 3                          |                            |
| City                                    | Newark                     |
| State                                   | DE                         |
| Zip                                     | 19713                      |
| Zip+4                                   |                            |
| Entity Type                             | Subrecipient               |
| Is the Recipient Registered in SAM.Gov? | Yes                        |

## Subrecipient Name: Children and Families first

| TIN                                     | 510065731           |
|---|---------------------|
| Unique Entity Identifer                 | RBLCLKH1RDD8        |
| POC Email Address                       |                     |
| Address Line 1                          | 555 Justison Street |
| Address Line 2                          |                     |
| Address Line 3                          |                     |
| City                                    | Wilmington          |
| State                                   | DE                  |
| Zip                                     | 19801               |
| Zip+4                                   |                     |
| Entity Type                             | Subrecipient        |
| Is the Recipient Registered in SAM.Gov? | Yes                 |

### Subrecipient Name: Advanced Family Care

| TIN                     | 852998668        |  |
|-------------------------|------------------|--|
| Unique Entity Identifer | DX8TKN8Q7LW5     |  |
| POC Email Address       |                  |  |
| Address Line 1          | 212 Carter Drive |  |
| Address Line 2          | Suite C          |  |
| Address Line 3          |                  |  |
| City                    | Middletown       |  |
| State                   | DE               |  |
| Zip                     | 19709            |  |
| Zip+4                   |                  |  |
| Entity Type             | Subrecipient     |  |

### Subrecipient Name: Jewish Family Services

| TIN                                     | 510097026        |
|---|------------------|
| Unique Entity Identifer                 | LC2CTWYBUKP5     |
| POC Email Address                       |                  |
| Address Line 1                          | 99 Passmore Road |
| Address Line 2                          |                  |
| Address Line 3                          |                  |
| City                                    | Wilmington       |
| State                                   | DE               |
| Zip                                     | 19801            |
| Zip+4                                   |                  |
| Entity Type                             | Subrecipient     |
| Is the Recipient Registered in SAM.Gov? | Yes              |

#### Subrecipient Name: Kind to Kids Foundation

| TIN                                     | 800641000          |
|---|--------------------|
| Unique Entity Identifer                 | MDZWVL6EQFT5       |
| POC Email Address                       |                    |
| Address Line 1                          | 100 W. 10th Street |
| Address Line 2                          | Suite 606          |
| Address Line 3                          |                    |
| City                                    | Wilmington         |
| State                                   | DE                 |
| Zip                                     | 19801              |
| Zip+4                                   |                    |
| Entity Type                             | Subrecipient       |
| Is the Recipient Registered in SAM.Gov? | Yes                |

#### Subrecipient Name: United Way of Delaware

| TIN                     | 510073399               |
|-------------------------|-------------------------|
| Unique Entity Identifer | KMTJYP7U9NC7            |
| POC Email Address       |                         |
| Address Line 1          | 625 North Orange Street |
| Address Line 2          |                         |
| Address Line 3          |                         |
| City                    | Wilmington              |
| State                   | DE                      |
|                         |                         |

| Zip                                     | 19801        |
|---|--------------|
| Zip+4                                   |              |
| Entity Type                             | Subrecipient |
| Is the Recipient Registered in SAM.Gov? | Yes          |

# Subrecipient Name: University of Delaware

| TIN                                     | 516000297         |
|---|-------------------|
| Unique Entity Identifer                 | T72NHKM259N3      |
| POC Email Address                       |                   |
| Address Line 1                          | 210 Hullihen Hall |
| Address Line 2                          |                   |
| Address Line 3                          |                   |
| City                                    | Newark            |
| State                                   | DE                |
| Zip                                     | 19713             |
| Zip+4                                   |                   |
| Entity Type                             | Subrecipient      |
| Is the Recipient Registered in SAM.Gov? | Yes               |

# Subrecipient Name: The Delaware Academy of Medicine, Inc.

| TIN                                     | 510075162                  |
|---|----------------------------|
| Unique Entity Identifer                 | MFXFFJQ5A2A5               |
| POC Email Address                       |                            |
| Address Line 1                          | 4765 Ogletown-Stanton Road |
| Address Line 2                          | Suite L10                  |
| Address Line 3                          |                            |
| City                                    | Newark                     |
| State                                   | DE                         |
| Zip                                     | 19713                      |
| Zip+4                                   |                            |
| Entity Type                             | Subrecipient               |
| Is the Recipient Registered in SAM.Gov? | Yes                        |

# Subawards

## Subward No: 20366-0014

| Subaward Type                  | Contract: Purchase Order       |
|--------------------------------|--------------------------------|
| Subaward Obligation            | \$148,295.00                   |
| Subaward Date                  | 12/7/2022                      |
| Place of Performance Address 1 | 1051 S Market St               |
| Place of Performance Address 2 |                                |
| Place of Performance Address 3 |                                |
| Place of Performance City      | Wilmington                     |
| Place of Performance State     | DE                             |
| Place of Performance Zip       | 19801                          |
| Place of Performance Zip+4     |                                |
| Description                    | Temporary Housing for homeless |
| Subrecipient                   | FAIRFIELD INN & SUITES         |
| Period of Performance Start    | 12/7/2022                      |
| Period of Performance End      | 12/31/2026                     |

#### Subward No: 19953

| Subaward Type                  | Contract: Purchase Order                 |
|--------------------------------|--|
| Subaward Obligation            | \$350,000.00                             |
| Subaward Date                  | 10/24/2022                               |
| Place of Performance Address 1 | 1732A Marsh Road                         |
| Place of Performance Address 2 | Suite 155                                |
| Place of Performance Address 3 |  |
| Place of Performance City      | Wilmington                               |
| Place of Performance State     | DE                                       |
| Place of Performance Zip       | 19810                                    |
| Place of Performance Zip+4     |  |
| Description                    | Improving Post COVID Mental Health Care. |
| Subrecipient                   | Delaware Psychological Association       |
| Period of Performance Start    | 10/24/2022                               |
| Period of Performance End      | 12/31/2026                               |

| Subaward Type       | Grant: Reimbursable |
|---------------------|---------------------|
| Subaward Obligation | \$2,500,000.00      |
| Subaward Date       | 12/1/2022           |
|                     |                     |

| Place of Performance Address 1 | 100 West 10th Street   |
|--------------------------------|--|
| Place of Performance Address 2 | Suite 1104   |
| Place of Performance Address 3 |  |
| Place of Performance City      | Wilmington   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19801  |
| Place of Performance Zip+4     |  |
| Description                    | The Todmorden Founation grant is directed to two projects;<br>the Bennett Street Affordable Housing Project (\$2,000,000)<br>and the Flats Phase V Construction Project (\$500,000). The<br>Bennett Street Project is the demolition of 30<br>vacant/substandard homes and the new construction of 20<br>homes on the East Side of Wilmington. Twelve of these new<br>homes will be available for sale to affordable housing<br>owners, and eight will be rentals for affordable housing<br>tenants. The Flats Phase V Construction Project is the<br>building of 72 new affordable housing apartmenst for rental<br>to senior citizens. This project is located on the<br>Wilmington's west side. |
| Subrecipient                   | Todmorden Foundation   |
| Period of Performance Start    | 12/1/2022  |
| Period of Performance End      | 12/31/2026   |

| Subaward Type                  | Grant: Lump Sum Payment(s)   |
|--------------------------------|--|
| Subaward Obligation            | \$1,200,000.00   |
| Subaward Date                  | 10/1/2022  |
| Place of Performance Address 1 | 600 W Tenth St.  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Wilmington   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19801  |
| Place of Performance Zip+4     |  |
| Description                    | This project is for the Purchase of Building for Outpatient<br>Expansion |
| Subrecipient                   | Limen Recovery + Wellness  |
| Period of Performance Start    | 10/1/2022  |
| Period of Performance End      | 12/31/2026   |

| Subaward Type       | Grant: Reimbursable |
|---------------------|---------------------|
| Subaward Obligation | \$3,500,000.00      |
|                     |                     |

| Subaward Date                  | 10/1/2022  |
|--------------------------------|--|
| Place of Performance Address 1 | 902 Savannah Road  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Lewes  |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19958  |
| Place of Performance Zip+4     |  |
| Description                    | In responding to the public health impacts of the public<br>health emergency, Beebe Healthcare, with the DE ARPA<br>grant support, is implementing an expanded Mental Health<br>and Substance Use Disorder program to expand services<br>available in Sussex County. The COVID-19 pandemic has<br>had a significant impact on the mental health and well-being<br>of our communities, particularly among community<br>members who have been disproportionaly impacted due to<br>economic and social conditions. For this reason, mobile<br>healthcare will be a key component of the services offered,<br>taking care to areas of the community that need it the most. |
| Subrecipient                   | Beebe Medical Center Inc   |
| Period of Performance Start    | 10/1/2022  |
| Period of Performance End      | 12/31/2026   |

| Subaward Type                  | Grant: Reimbursable  |
|--------------------------------|--|
| Subaward Obligation            | \$150,000.00   |
| Subaward Date                  | 11/1/2022  |
| Place of Performance Address 1 | 1213 Old Lancaster Pike  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Hockessin  |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19707  |
| Place of Performance Zip+4     |  |
| Description                    | Individual counseling and grief support groups at The Center<br>for Grieving Children and community site locations.<br>Training for staff. |
| Subrecipient                   | Supporting Kidds   |
| Period of Performance Start    | 11/1/2022  |
| Period of Performance End      | 12/31/2022   |

| Subaward Type | Contract: Purchase Order |
|---------------|--------------------------|
|               |                          |

| Subaward Obligation            | \$1,000,000.00   |
|--------------------------------|--|
| Subaward Date                  | 11/21/2022   |
| Place of Performance Address 1 | 38 Vandever Avenue   |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Wilmington   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19802  |
| Place of Performance Zip+4     |  |
| Description                    | o The HOPE Commission (HC) is Delaware's premier<br>correctional reentry program. It provides comprehensive<br>reentry support services that target crime-causing factors,<br>shown to be predictors of recidivism, for formerly<br>incarcerated high-risk men leaving prison and returning to<br>distressed communities. HC provides rehabilitative<br>treatment services and programs designed to promote<br>successful reentry based on research-informed solutions.<br>Risk and needs assessments, cognitive-behavioral therapies,<br>vocational readiness training, educational peer support,<br>behavioral health services, and family–reunification<br>programs are utilized to reduce recidivism and improve<br>safety in the State of Delaware. |
| Subrecipient                   | Wilmington Hope Commission   |
| Period of Performance Start    | 11/21/2022   |
| Period of Performance End      | 12/31/2022   |

| Subaward Type                  | Contract: Purchase Order         |
|--------------------------------|----------------------------------|
| Subaward Obligation            | \$500,000.00                     |
| Subaward Date                  | 12/1/2022                        |
| Place of Performance Address 1 | 101 Mederia Circle               |
| Place of Performance Address 2 |                                  |
| Place of Performance Address 3 |                                  |
| Place of Performance City      | Newark                           |
| Place of Performance State     | DE                               |
| Place of Performance Zip       | 19702                            |
| Place of Performance Zip+4     |                                  |
| Description                    | Still Hope Mental Health Program |
| Subrecipient                   | Love and Hope Rescue Mission     |
| Period of Performance Start    | 12/1/2022                        |
| Period of Performance End      | 12/31/2022                       |

#### Subward No: 19951

L

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$200,000.00  |
| Subaward Date                  | 10/17/2022  |
| Place of Performance Address 1 | P.O. Box 25209  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Wilmington  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19899   |
| Place of Performance Zip+4     |   |
| Description                    | Purchase property to serve as a resources center to offer mental health and other community services. |
| Subrecipient                   | Gamma Theta Lambda Education Foundation Inc   |
| Period of Performance Start    | 10/17/2022  |
| Period of Performance End      | 12/31/2026  |

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$4,500,000.00  |
| Subaward Date                  | 10/11/2022  |
| Place of Performance Address 1 | 404 N Market Street   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Wilmington  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19801   |
| Place of Performance Zip+4     |   |
| Description                    | The Wilmington Neighborhood Conservancy Land Bank's<br>(WNCLB) East Side Initiative consists of an aggressive plan<br>to address the significant blight surrounding the Bancroft<br>School. With a combination of vacant property rehabs for<br>homeownership, strategic acquisitions, and demolition of<br>unsafe structures, WNCLB will revitalize the East Side<br>neighborhood and restore safety to the community. WNCLB<br>has also established sound partnerships and project<br>coordination with the City of Wilmington, Habitat for<br>Humanity, Woodlawn Trustees, Wilmington Housing<br>Authority and Central Baptist CDC-an unprecedented level<br>of nonprofit and public entity cooperation. |
| Subrecipient                   | Wilmington Neighborhood Conservancy Land Bank   |
| Period of Performance Start    | 10/11/2022  |
| Period of Performance End      | 12/31/2026  |

| Subaward Type                  | Grant: Reimbursable              |
|--------------------------------|----------------------------------|
| Subaward Obligation            | \$0.00                           |
| Subaward Date                  | 10/18/2022                       |
| Place of Performance Address 1 | 18 The Green                     |
| Place of Performance Address 2 |                                  |
| Place of Performance Address 3 |                                  |
| Place of Performance City      | Dover                            |
| Place of Performance State     | DE                               |
| Place of Performance Zip       | 19901                            |
| Place of Performance Zip+4     |                                  |
| Description                    | DSHA Accelerator Fund            |
| Subrecipient                   | DELAWARE STATE HOUSING AUTHORITY |
| Period of Performance Start    | 10/18/2022                       |
| Period of Performance End      | 12/31/2026                       |

| Subaward Type                  | Grant: Reimbursable              |
|--------------------------------|----------------------------------|
| Subaward Obligation            | \$225,000.00                     |
| Subaward Date                  | 10/18/2022                       |
| Place of Performance Address 1 | 18 The Green                     |
| Place of Performance Address 2 |                                  |
| Place of Performance Address 3 |                                  |
| Place of Performance City      | Dover                            |
| Place of Performance State     | DE                               |
| Place of Performance Zip       | 19901                            |
| Place of Performance Zip+4     |                                  |
| Description                    | DSHA Catalyst Fund               |
| Subrecipient                   | DELAWARE STATE HOUSING AUTHORITY |
| Period of Performance Start    | 10/18/2022                       |
| Period of Performance End      | 12/31/2026                       |

| Subaward Type                  | Grant: Reimbursable |
|--------------------------------|---------------------|
| Subaward Obligation            | \$9,900,000.00      |
| Subaward Date                  | 10/18/2022          |
| Place of Performance Address 1 | 18 The Green        |
| Place of Performance Address 2 |                     |
| Place of Performance Address 3 |                     |
| Place of Performance City      | Dover               |

| Place of Performance State  | DE                               |
|-----------------------------|----------------------------------|
| Place of Performance Zip    | 19901                            |
| Place of Performance Zip+4  |                                  |
| Description                 | DSHA Market Pressure Relief      |
| Subrecipient                | DELAWARE STATE HOUSING AUTHORITY |
| Period of Performance Start | 10/18/2022                       |
| Period of Performance End   | 12/31/2022                       |

| Subaward Type                  | Grant: Reimbursable              |
|--------------------------------|----------------------------------|
| Subaward Obligation            | \$220,000.00                     |
| Subaward Date                  | 10/18/2022                       |
| Place of Performance Address 1 | 18 The Green                     |
| Place of Performance Address 2 |                                  |
| Place of Performance Address 3 |                                  |
| Place of Performance City      | Dover                            |
| Place of Performance State     | DE                               |
| Place of Performance Zip       | 19901                            |
| Place of Performance Zip+4     |                                  |
| Description                    | DSHA Rent Reporting              |
| Subrecipient                   | DELAWARE STATE HOUSING AUTHORITY |
| Period of Performance Start    | 10/18/2022                       |
| Period of Performance End      | 12/31/2022                       |

| Subaward Type                  | Grant: Reimbursable              |
|--------------------------------|----------------------------------|
| Subaward Obligation            | \$0.00                           |
| Subaward Date                  | 10/18/2022                       |
| Place of Performance Address 1 | 18 The Green                     |
| Place of Performance Address 2 |                                  |
| Place of Performance Address 3 |                                  |
| Place of Performance City      | Dover                            |
| Place of Performance State     | DE                               |
| Place of Performance Zip       | 19901                            |
| Place of Performance Zip+4     |                                  |
| Description                    | DSHA Preservation Fund           |
| Subrecipient                   | DELAWARE STATE HOUSING AUTHORITY |
| Period of Performance Start    | 10/18/2022                       |
| Period of Performance End      | 12/31/2022                       |

#### Subward No: 20802-599807

| Subaward Type                  | Contract: Purchase Order               |
|--------------------------------|--|
| Subaward Obligation            | \$737,000.00                           |
| Subaward Date                  | 3/2/2023                               |
| Place of Performance Address 1 | 4905 CREST VIEW DRIVE                  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | HYATTSVILLE                            |
| Place of Performance State     | MD                                     |
| Place of Performance Zip       | 20782                                  |
| Place of Performance Zip+4     |  |
| Description                    | Marketing and Communication consulting |
| Subrecipient                   | OVP MANAGEMENT CONSULTING GROUP INC    |
| Period of Performance Start    | 3/2/2023                               |
| Period of Performance End      | 12/31/2026                             |

# Subward No: 20802-483167

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$52,200.00              |
| Subaward Date                  | 7/1/2023                 |
| Place of Performance Address 1 | 2727 SHIPLEY ROAD        |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | WILMINGTON               |
| Place of Performance State     | DE                       |
| Place of Performance Zip       | 19810                    |
| Place of Performance Zip+4     |                          |
| Description                    | advertising              |
| Subrecipient                   | FOREVER MEDIA OF DE LLC  |
| Period of Performance Start    | 7/1/2023                 |
| Period of Performance End      | 12/31/2026               |

#### Subward No: 20802-399993

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$70,000.00              |
| Subaward Date                  | 3/2/2023                 |
| Place of Performance Address 1 | 8110 CORPORATE DRIVE     |
| Place of Performance Address 2 |                          |
|                                |                          |

| Place of Performance Address 3 |                                   |
|--------------------------------|-----------------------------------|
| Place of Performance City      | Baltimore                         |
| Place of Performance State     | MD                                |
| Place of Performance Zip       | 21236                             |
| Place of Performance Zip+4     |                                   |
| Description                    | Communication/ consulting support |
| Subrecipient                   | COMCAST HOLDINGS CORPORATION      |
| Period of Performance Start    | 3/2/2023                          |
| Period of Performance End      | 12/31/2026                        |

# Subward No: 20650\_442388

| Subaward Type                  | Contract: Purchase Order   |
|--------------------------------|--|
| Subaward Obligation            | \$478,700.00   |
| Subaward Date                  | 2/1/2023   |
| Place of Performance Address 1 | 165 Brick Store Landing Road   |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Smyrna   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19977  |
| Place of Performance Zip+4     |  |
| Description                    | Safety and wellness suite. Threat assessment training and HELPme Licenses. |
| Subrecipient                   | INSPIRIT GROUP LLC DBA STOPIT  |
| Period of Performance Start    | 2/1/2023   |
| Period of Performance End      | 12/31/2026   |

## Subward No: 20129-20739

| Subaward Type                  | Contract: Purchase Order                   |
|--------------------------------|--|
| Subaward Obligation            | \$74,985.74                                |
| Subaward Date                  | 10/1/2023                                  |
| Place of Performance Address 1 | 4134 N DuPont Highway                      |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Dover                                      |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19904                                      |
| Place of Performance Zip+4     |  |
| Description                    | GVI Dover Site Security & Office equipment |
|                                |  |

| Subrecipient                | ASSURANCE MEDIA LLC |
|-----------------------------|---------------------|
| Period of Performance Start | 10/1/2023           |
| Period of Performance End   | 12/31/2026          |

## Subward No: 20129-373

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$111,573.64             |
| Subaward Date                  | 10/1/2023                |
| Place of Performance Address 1 | 4134 N DuPont Highway    |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Dover                    |
| Place of Performance State     | DE                       |
| Place of Performance Zip       | 19901                    |
| Place of Performance Zip+4     |                          |
| Description                    | GVI Dover Site Furniture |
| Subrecipient                   | G A Blanco and Sons Inc  |
| Period of Performance Start    | 10/1/2023                |
| Period of Performance End      | 12/31/2026               |

# Subward No: 20129-707363

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---------------------------|
| Subaward Obligation            | \$64,750.00               |
| Subaward Date                  | 10/1/2023                 |
| Place of Performance Address 1 | 1406 FORREST AVE, SUITE B |
| Place of Performance Address 2 |                           |
| Place of Performance Address 3 |                           |
| Place of Performance City      | Dover                     |
| Place of Performance State     | DE                        |
| Place of Performance Zip       | 19904                     |
| Place of Performance Zip+4     |                           |
| Description                    | Office lease              |
| Subrecipient                   | GOODEN AVENUE LLC         |
| Period of Performance Start    | 10/1/2023                 |
| Period of Performance End      | 12/31/2026                |

## Subward No: 20647-133149

| Subaward Type       | Direct Payment |
|---------------------|----------------|
| Subaward Obligation | \$316,154.50   |
|                     |                |

| Subaward Date                  | 4/1/2023                         |
|--------------------------------|----------------------------------|
| Place of Performance Address 1 | 11493 SUNSET HILLS ROAD          |
| Place of Performance Address 2 |                                  |
| Place of Performance Address 3 |                                  |
| Place of Performance City      | RESTON                           |
| Place of Performance State     | VA                               |
| Place of Performance Zip       | 20190                            |
| Place of Performance Zip+4     |                                  |
| Description                    | computer services                |
| Subrecipient                   | CARAHSOFT TECHNOLOGY CORPORATION |
| Period of Performance Start    | 4/1/2023                         |
| Period of Performance End      | 12/31/2026                       |

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$3,500,000.00  |
| Subaward Date                  | 12/19/2022  |
| Place of Performance Address 1 | 21655 BIDEN AVENUE  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | GEORGETOWN  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19947   |
| Place of Performance Zip+4     |   |
| Description                    | Sun Behavioral Delaware, LLC (Sun) for \$3.5 million in capital funding of the American Rescue Plan Act (ARPA) to partially fund an expansion of its substance abuse outpatient operations in Georgetown. |
| Subrecipient                   | SUN Behavioral Delaware   |
| Period of Performance Start    | 12/19/2022  |
| Period of Performance End      | 12/31/2026  |

# Subward No: 20495-33

| Subaward Type                  | Contract: Purchase Order |  |
|--------------------------------|--------------------------|--|
| Subaward Obligation            | \$700,000.00             |  |
| Subaward Date                  | 12/19/2022               |  |
| Place of Performance Address 1 | 210 South College Ave.   |  |
| Place of Performance Address 2 |                          |  |
| Place of Performance Address 3 |                          |  |
| Place of Performance City      | Newark                   |  |
|                                |                          |  |

| Place of Performance State  | DE   |
|-----------------------------|--|
| Place of Performance Zip    | 19716  |
| Place of Performance Zip+4  |  |
| Description                 | ARPA funding for exploration of a Masters in Social Work<br>program. The request is for funds to allow UD CEHD to<br>develop, plan and begin a Masters in Social Work (MSW)<br>program to complement the existing Human Services<br>Bachelors degrees. |
| Subrecipient                | University of Delaware   |
| Period of Performance Start | 12/19/2022   |
| Period of Performance End   | 12/31/2026   |

#### Subward No: 20753-27371

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$50,000.00   |
| Subaward Date                  | 3/31/2023   |
| Place of Performance Address 1 | 405 Foulk RD  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Wilmington  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19803   |
| Place of Performance Zip+4     |   |
| Description                    | ARPA funding to support a grant to SOAR to pay for certain professional services related to the supervision of 6-10 pre-licensed post-graduate educated mental health clinicians. |
| Subrecipient                   | SURVIVORS OF ABUSE IN RECOVERY, INC.  |
| Period of Performance Start    | 3/31/2023   |
| Period of Performance End      | 12/31/2026  |

## Subward No: 20921-27350

| Subaward Type                  | Contract: Purchase Order |  |
|--------------------------------|--------------------------|--|
| Subaward Obligation            | \$250,000.00             |  |
| Subaward Date                  | 3/16/2023                |  |
| Place of Performance Address 1 | 591 Collaboration WAY    |  |
| Place of Performance Address 2 |                          |  |
| Place of Performance Address 3 |                          |  |
| Place of Performance City      | Newark                   |  |
| Place of Performance State     | DE                       |  |
| Place of Performance Zip       | 19713                    |  |
| Place of Performance Zip+4     |                          |  |
|                                |                          |  |

| Description                 | ARPA funding for its Business Accelerator project. The<br>Request is for funds to launch a Business Accelerator that<br>will support the recovery of COVID impacted financial<br>technology (fintech) startups by providing technical services<br>that will help them stabilize or grow their businesses. The<br>Request is for a total of \$250,000.00. |
|-----------------------------|--|
| Subrecipient                | DELAWARE TECHNOLOGY PARK, INC.   |
| Period of Performance Start | 3/16/2023  |
| Period of Performance End   | 12/31/2026   |

# Subward No: 20984-466164

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$750,000.00  |
| Subaward Date                  | 3/31/2023   |
| Place of Performance Address 1 | 625 N Orange ST   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Wilmington  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19801   |
| Place of Performance Zip+4     |   |
| Description                    | Code Differently, a diversity, equity and inclusion<br>technology education and workforce solutions company in<br>the State of Delaware, seeks ARPA funding for a workforce<br>development initiative for adult training and employment for<br>technology skills. |
| Subrecipient                   | CODE DIFFERENTLY, LLC   |
| Period of Performance Start    | 3/31/2023   |
| Period of Performance End      | 12/31/2026  |

## Subward No: 19941-683629

| Subaward Type                  | Contract: Purchase Order |  |
|--------------------------------|--------------------------|--|
| Subaward Obligation            | \$150,000.00             |  |
| Subaward Date                  | 10/1/2023                |  |
| Place of Performance Address 1 | 2578 BROADWAY            |  |
| Place of Performance Address 2 | #607                     |  |
| Place of Performance Address 3 |                          |  |
| Place of Performance City      | New York                 |  |
| Place of Performance State     | NY                       |  |
| Place of Performance Zip       | 10025                    |  |
| Place of Performance Zip+4     |                          |  |
| Description                    | Software Purchases       |  |
|                                |                          |  |

| Subrecipient                | TALKSPACE LLC |
|-----------------------------|---------------|
| Period of Performance Start | 10/1/2023     |
| Period of Performance End   | 12/31/2023    |

#### Subward No: 20983-29043

| Subaward Type                  | Contract: Purchase Order        |
|--------------------------------|---------------------------------|
| Subaward Obligation            | \$250,000.00                    |
| Subaward Date                  | 5/19/2023                       |
| Place of Performance Address 1 | 12 Germay Drive                 |
| Place of Performance Address 2 |                                 |
| Place of Performance Address 3 |                                 |
| Place of Performance City      | Wilmington                      |
| Place of Performance State     | DE                              |
| Place of Performance Zip       | 19804                           |
| Place of Performance Zip+4     |                                 |
| Description                    | Job training                    |
| Subrecipient                   | Faithful Friends Animal Society |
| Period of Performance Start    | 5/19/2023                       |
| Period of Performance End      | 12/31/2026                      |

# Subward No: 21031-58

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---------------------------|
| Subaward Obligation            | \$3,247,890.00            |
| Subaward Date                  | 4/11/2023                 |
| Place of Performance Address 1 | PO BOX 8004               |
| Place of Performance Address 2 |                           |
| Place of Performance Address 3 |                           |
| Place of Performance City      | NEWARK                    |
| Place of Performance State     | DE                        |
| Place of Performance Zip       | 19714                     |
| Place of Performance Zip+4     |                           |
| Description                    | Food assistance           |
| Subrecipient                   | Food Bank of Delaware Inc |
| Period of Performance Start    | 4/17/2023                 |
| Period of Performance End      | 6/30/2023                 |

## Subward No: 21100-24687

| Subaward Type       | Contract: Purchase Order |
|---------------------|--------------------------|
| Subaward Obligation | \$250,000.00             |
|                     |                          |

| Subaward Date                  | 7/1/2023  |
|--------------------------------|---|
| Place of Performance Address 1 | 200 WHITE CHAPEL DR   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | NEWARK  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19713   |
| Place of Performance Zip+4     |   |
| Description                    | Funding for expanding its facilities to better service senior clientele. Specifically, the Center is requesting \$250,000 to increase the capacity of the ¿Meeting of the Minds¿ physical space by 40%. The program seeks to combat social isolation. |
| Subrecipient                   | Newark Senior Center  |
| Period of Performance Start    | 7/1/2023  |
| Period of Performance End      | 9/30/2023   |

# Subward No: 21159-431452

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$50,000.00   |
| Subaward Date                  | 7/1/2023  |
| Place of Performance Address 1 | 11611 SAN VICENTE BLVD  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | LOS ANGELES   |
| Place of Performance State     | СА  |
| Place of Performance Zip       | 90049   |
| Place of Performance Zip+4     |   |
| Description                    | This specific project or purchase description is to provide<br>students with vision care and the glasses they need to<br>succeed in school and life. We do this by bringing our<br>mobile optometric clinics, staffed by licensed doctors and<br>opticians, to students at schools and community<br>organizations in underserved communities. We provide eye<br>exams and glasses at no cost to families to bridge gaps in<br>healthcare access and educational achievement. Often,<br>families with substance abuse issues can be hard to reach.<br>VTL can remove the barrier to treatment by meeting the<br>child's needs where they are every day: at schools, libraries,<br>Boys and Girls Clubs, and other community centers. |
| Subrecipient                   | VISION TO LEARN   |
| Period of Performance Start    | 7/1/2023  |
| Period of Performance End      | 12/31/2026  |
|                                |   |

1

# Subward No: 21188-670915

| Contract: Purchase Order                                     |
|--|
| \$3,758,705.00   |
| 7/1/2023   |
| 100 CAMPUS DRIVE   |
|  |
|  |
| FLORHAM PARK   |
| NJ   |
| 07932  |
|  |
| DERSS Replacement ELC funding ARPA / Software<br>Maintenance |
| CONDUENT PUBLIC HEALTH SOLUTIONS INC                         |
| 7/1/2023   |
| 12/31/2026   |
|  |

## Subward No: 21188-630238

| Subaward Type                  | Contract: Purchase Order             |
|--------------------------------|--------------------------------------|
| Subaward Obligation            | \$324,744.00                         |
| Subaward Date                  | 10/1/2023                            |
| Place of Performance Address 1 | 9800 CROSSPOINT BOULEVARD            |
| Place of Performance Address 2 |                                      |
| Place of Performance Address 3 |                                      |
| Place of Performance City      | INDIANAPOLIS                         |
| Place of Performance State     | IN                                   |
| Place of Performance Zip       | 46256                                |
| Place of Performance Zip+4     |                                      |
| Description                    | Software Maintenance                 |
| Subrecipient                   | GUIDESOFT INC DBA KNOWLEDGE SERVICES |
| Period of Performance Start    | 10/1/2023                            |
| Period of Performance End      | 12/31/2026                           |

#### Subward No: 21252-84933

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$60,000.00              |
| Subaward Date                  | 7/1/2023                 |
| Place of Performance Address 1 | 403 SUN BLVD.            |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
|                                |                          |

| Place of Performance City   | BEAR  |
|-----------------------------|---|
| Place of Performance State  | DE  |
| Place of Performance Zip    | 19702   |
| Place of Performance Zip+4  |   |
| Description                 | This specific project or purchase description to support the<br>proposed Community BreatheLife Campaign, an adaptation<br>of the World Health Organization (WHO) program, to<br>increase the awareness of the effects of air pollution on<br>health, exasperated by COVID-19, in disproportionately<br>impacted communities of color in Delaware. |
| Subrecipient                | COMMUNITY HOUSING & EMPOWERMENT<br>CONNECT  |
| Period of Performance Start | 7/1/2023  |
| Period of Performance End   | 12/31/2026  |

#### Subward No: 21255-690878

| Subaward Type                  | Contract: Purchase Order   |
|--------------------------------|--|
| Subaward Obligation            | \$490,000.00   |
| Subaward Date                  | 7/1/2023   |
| Place of Performance Address 1 | 2100 Baynard Blvd.   |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | WILMINGTON   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19802  |
| Place of Performance Zip+4     |  |
| Description                    | This specific project is to engage hard to reach communities,<br>DHEC will engage the community through its patient<br>centered medical home, which will provide a<br>psychologically safe harbor for black and brown people,<br>offering comprehensive primary care, mental health<br>services. |
| Subrecipient                   | DELAWARE HEALTH EQUITY COALITION INC   |
| Period of Performance Start    | 7/1/2023   |
| Period of Performance End      | 12/31/2026   |

# Subward No: 20994-25552

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$550,000.00             |
| Subaward Date                  | 6/5/2023                 |
| Place of Performance Address 1 | PO BOX 8004              |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
|                                |                          |

| Place of Performance City   | NEWARK                          |
|-----------------------------|---------------------------------|
| Place of Performance State  | DE                              |
| Place of Performance Zip    | 19714                           |
| Place of Performance Zip+4  |                                 |
| Description                 | DRA Workforce Development       |
| Subrecipient                | Delaware Restaurant Association |
| Period of Performance Start | 6/5/2023                        |
| Period of Performance End   | 12/31/2026                      |

## Subward No: 20993-25

| Subaward Type                  | Contract: Purchase Order         |
|--------------------------------|----------------------------------|
| Subaward Obligation            | \$853,168.00                     |
| Subaward Date                  | 4/27/2023                        |
| Place of Performance Address 1 | 800 N FRENCH ST                  |
| Place of Performance Address 2 | LOUIS L REDDING CITY-COUNTY BLDG |
| Place of Performance Address 3 |                                  |
| Place of Performance City      | Wilmington                       |
| Place of Performance State     | DE                               |
| Place of Performance Zip       | 19801                            |
| Place of Performance Zip+4     |                                  |
| Description                    | Gun violence prevention          |
| Subrecipient                   | Wilmington Police Department     |
| Period of Performance Start    | 4/27/2023                        |
| Period of Performance End      | 12/31/2026                       |

## Subward No: 20998-1

| Subaward Type                  | Contract: Purchase Order |  |
|--------------------------------|--------------------------|--|
| Subaward Obligation            | \$1,038,576.00           |  |
| Subaward Date                  | 4/27/2023                |  |
| Place of Performance Address 1 | PO BOX 15040             |  |
| Place of Performance Address 2 |                          |  |
| Place of Performance Address 3 |                          |  |
| Place of Performance City      | WILMINGTON               |  |
| Place of Performance State     | DE                       |  |
| Place of Performance Zip       | 19886                    |  |
| Place of Performance Zip+4     |                          |  |
| Description                    | Gun Violence Prevention  |  |
| Subrecipient                   | Dover Police Department  |  |
| Period of Performance Start    | 4/27/2023                |  |

## Subward No: 18822-17626

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$5,701,750.00           |
| Subaward Date                  | 8/4/2023                 |
| Place of Performance Address 1 | 12 Penns Way             |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | New Castle               |
| Place of Performance State     | DE                       |
| Place of Performance Zip       | 19801                    |
| Place of Performance Zip+4     |                          |
| Description                    | Land Purchase            |
| Subrecipient                   | FOX ROTHSCHILD LLP       |
| Period of Performance Start    | 8/4/2023                 |
| Period of Performance End      | 12/31/2026               |

#### Subward No: 21395-27000

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$100,000.00  |
| Subaward Date                  | 7/1/2023  |
| Place of Performance Address 1 | 600 SOUTH HARRISON STREET   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | WILMINGTON  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19805   |
| Place of Performance Zip+4     |   |
| Description                    | Aims to ensure those who own their homes are able to keep<br>their homes and pass them to their next generation upon<br>death. We meet the need for legal representation in this area<br>of law, which is otherwise difficult for our clients to obtain.<br>For too many who are struggling to make ends meet, the<br>COVID-19 Pandemic exacerbated their ongoing dilemma-<br>the constant struggle between making home repairs,<br>affording medicine, affording food. Minority Communities<br>and the elderly were disproportionately impacted by the<br>pandemic. This grant of \$100,000 will support DCRAC's<br>nonprofit legal services to the community, allowing a budget<br>for marketing and public awareness, as well as supporting<br>program expenses. |
| Subrecipient                   | Delaware Community Reinvestment Action Council  |

| Period of Performance Start | 7/1/2023   |
|-----------------------------|------------|
| Period of Performance End   | 12/31/2026 |

#### Subward No: 21397-07391

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$75,000.00   |
| Subaward Date                  | 7/1/2023  |
| Place of Performance Address 1 | 2013 N MARKET STREET  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | WILMINGTON  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19802   |
| Place of Performance Zip+4     |   |
| Description                    | To combine a rich program of professional-level choral<br>training and performance with homework help, academic<br>tutoring, and one-on-one mentoring after school and in the<br>summer, to transform the lives of young people. More than<br>just an award-winning intergenerational choir, the Choir<br>School serves as a "community center that sings." We<br>provide equitable access to superior music education,<br>year-round academic support, opportunities for personal<br>development, and community resources for students ages 7<br>to 17 outside of school time. The Choir School's<br>programming addresses the root causes of generational<br>poverty and socioeconomic disparities. None of the funding<br>will be used for capital expenditures. |
| Subrecipient                   | Choir School of DE  |
| Period of Performance Start    | 7/1/2023  |
| Period of Performance End      | 12/31/2026  |

#### Subward No: 21398-24350

| Subaward Type                  | Contract: Purchase Order   |
|--------------------------------|--|
| Subaward Obligation            | \$125,000.00   |
| Subaward Date                  | 7/1/2023   |
| Place of Performance Address 1 | 2301 Kentmere Parkway  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | WILMINGTON   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19806  |
| Place of Performance Zip+4     |  |
|                                | DelArt's Healing Through the Arts exists and needs to be<br>nourished and supported as both a preventive measure and a |

| Description                 | treatment option to allow individuals to utilize art as a<br>healing and coping tool with not only processing their<br>experiences, but in also understanding their mental and<br>physical health. The sustainability for this program over the<br>next two years (2023-2024) will provide a regular, long-term<br>complimentary service to members of the public who wish<br>to seek support to treat and alleviate their health as both a<br>tool and a rearguard against substance use in addition to<br>traditional methods such as therapy, medication, and the<br>like. |
|-----------------------------|---|
| Subrecipient                | Delaware Art Museum   |
| Period of Performance Start | 7/1/2023  |
| Period of Performance End   | 12/31/2026  |

#### Subward No: 21401-114478

| Subaward Type                  | Contract: Purchase Order   |
|--------------------------------|--|
| Subaward Obligation            | \$60,000.00  |
| Subaward Date                  | 7/17/2023  |
| Place of Performance Address 1 | 100 N. 18TH STREET   |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | PHILADELPHIA   |
| Place of Performance State     | PA   |
| Place of Performance Zip       | 19103  |
| Place of Performance Zip+4     |  |
| Description                    | Tech Impact will partner with Brandywine Counseling &<br>Community Services (BCCS) to perform the work. Tech<br>Impact will contract with BCCS to act as subject matter<br>experts to perform the work. This project incorporates three<br>measures of success: a reduction in patient drop-out rate, an<br>increase in early identification of at-risk client behavior, and<br>measurable equitable accuracy metrics. |
| Subrecipient                   | Tech Impact  |
| Period of Performance Start    | 7/17/2023  |
| Period of Performance End      | 12/31/2026   |
|                                |  |

## Subward No: 21403-500820

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$150,000.00             |
| Subaward Date                  | 7/1/2023                 |
| Place of Performance Address 1 | 2801 Lancaster Avenue    |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | WILMINGTON               |
| Place of Performance State     | DE                       |

| Place of Performance Zip    | 19805   |
|-----------------------------|---|
| Place of Performance Zip+4  |   |
| Description                 | Seeking to increase access to information regarding<br>treatment and support services available to individuals in<br>recovery and their families, during and post,<br>the COVID-19 pandemic. Ensuring access to treatment and<br>services that considers and engages diversity and the<br>representation of underrepresented groups in the community<br>through the media industry, will improve outcomes for the<br>state of Delaware as a whole. Individuals seeking to enter<br>recovery or remain in recovery need reliable, consistent, and<br>up-to-date information regarding their treatment options and<br>where to access support services. |
| Subrecipient                | DETV Foundation   |
| Period of Performance Start | 7/1/2023  |
| Period of Performance End   | 12/31/2026  |

#### Subward No: 21404-00019

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$50,000.00   |
| Subaward Date                  | 7/1/2023  |
| Place of Performance Address 1 | 1901 N Market St  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | WILMINGTON  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19802   |
| Place of Performance Zip+4     |   |
| Description                    | This specific project or purchase description is to address a critical need to support elderly individuals by purchasing a 12-15 passenger vehicle. |
| Subrecipient                   | Wilmington Senior Center  |
| Period of Performance Start    | 7/1/2023  |
| Period of Performance End      | 12/31/2026  |

#### Subward No: 21405-590409

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$50,000.00              |
| Subaward Date                  | 7/1/2023                 |
| Place of Performance Address 1 | 406 Delaware Ave         |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | New Castle               |
|                                |                          |

| Place of Performance State  | DE  |
|-----------------------------|---|
| Place of Performance Zip    | 19720   |
| Place of Performance Zip+4  |   |
| Description                 | The program aims to prevent overdose deaths by increasing<br>access to treatment and recovery support services by<br>educating underserved communities about<br>substance use risks and naloxone. The plan is to create a<br>media campaign using press, media spots, and digital<br>marketing in high-risk communities in Delaware. The<br>campaign<br>will include strong visuals and utilize various platforms to<br>reach target audiences and community leaders. The<br>photography, video production, and graphics departments<br>will<br>need updated equipment to create a visually compelling<br>campaign. The funds will be used for salaries, upgraded<br>equipment, and daily operating expenses. |
| Subrecipient                | PORSHA HARGROVE PR AND CONSULTING   |
| Period of Performance Start | 7/1/2023  |
| Period of Performance End   | 12/31/2026  |

# Subward No: 21560-701764

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$60,000.00   |
| Subaward Date                  | 7/1/2023  |
| Place of Performance Address 1 | 41 East 22nd Street   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | WILMINGTON  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19802   |
| Place of Performance Zip+4     |   |
| Description                    | This specific project or purchase description is the<br>development of a larger facility to handle activities and<br>events for up to 100 people. The capital expenditures budget<br>includes a pre-fabricated warehouse, tree removal,<br>plumbing, electrical work, and other costs listed in budget. |
| Subrecipient                   | SAFE UNITED NEIGHBORHOODS   |
| Period of Performance Start    | 7/1/2023  |
| Period of Performance End      | 12/31/2026  |
| -                              |   |

# Subward No: 21562-607202

| Subaward Type       | Contract: Purchase Order |
|---------------------|--------------------------|
| Subaward Obligation | \$100,000.00             |
| Subaward Date       | 7/1/2023                 |
|                     |                          |

| Place of Performance Address 1 | 1200 N French Street  |
|--------------------------------|---|
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | WILMINGTON  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19801   |
| Place of Performance Zip+4     |   |
| Description                    | This specific project or purchase description is The<br>Community Well-Being Ambassador (CWA) Initiative is a<br>community-driven, place based prevention strategy to<br>increase the capacity of targeted neighborhoods in the City<br>of Wilmington by promoting community well-being and<br>resiliency among their residents across the life span. |
| Subrecipient                   | NETWORK CONNECT INC   |
| Period of Performance Start    | 7/1/2023  |
| Period of Performance End      | 12/31/2026  |

#### Subward No: 21588-24423

| Subaward Type                  | Contract: Purchase Order   |
|--------------------------------|--|
| Subaward Obligation            | \$1,300,000.00   |
| Subaward Date                  | 7/1/2023   |
| Place of Performance Address 1 | 625 North Orange Street  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | WILMINGTON   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19801  |
| Place of Performance Zip+4     |  |
| Description                    | Now in its 12th year, Stand by Me (SBM) is a public/private<br>partnership program lead by the Delaware Department of<br>Health and Social Services and United Way of Delaware<br>(UWDE). UWDE invests program funding directly into<br>local Community Based Organizations (CBOs) that hire<br>SBM Coaches to implement the program at no cost to<br>Delawareans as the program's customers. The SBM<br>Program coaches work one-on-one with customers to build<br>and/or rebuild their financial stability. Coaches work with<br>customers to increase their financial assets (i.e.,<br>creating/growing a savings account, reducing debt,<br>increasing credit score, purchasing car/home/etc.). United<br>Way of Delaware and multiple Delaware Community Based<br>Organizations via contract. |
| Subrecipient                   | United Way of Delaware   |
| Period of Performance Start    | 7/16/2023  |
| Period of Performance End      | 12/31/2026   |

#### Subward No: 21589-658470

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$80,000.00   |
| Subaward Date                  | 7/1/2023  |
| Place of Performance Address 1 | 631 Plum Run Ct   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Bear  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19701   |
| Place of Performance Zip+4     |   |
| Description                    | This specific project or purchase description is different<br>services such as: door to door Narcan training, translation<br>services to the Haitians, Hispanics and Ivorian communities,<br>hired two outreach workers and a program director and<br>transportation services and weekly support group. |
| Subrecipient                   | WOMEN OF EXCEPTION  |
| Period of Performance Start    | 7/1/2023  |
| Period of Performance End      | 12/31/2026  |

#### Subward No: 21590-25743

| Subaward Type                  | Contract: Purchase Order   |
|--------------------------------|--|
| Subaward Obligation            | \$1,900,000.00   |
| Subaward Date                  | 7/1/2023   |
| Place of Performance Address 1 | 977 East Masten Circle   |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | MILFORD  |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19963  |
| Place of Performance Zip+4     |  |
| Description                    | This specific project or purchase description is to assist<br>approximately 70 individuals in achieving homeownership<br>through MHDC's homeownership programs and projects. |
| Subrecipient                   | MILFORD HOUSING DEVELOPMENT CORP   |
| Period of Performance Start    | 7/1/2023   |
| Period of Performance End      | 12/31/2026   |

# Subward No: 21636-16716

| Subaward Type       | Contract: Purchase Order |
|---------------------|--------------------------|
| Subaward Obligation | \$1,101,150.00           |

| Subaward Date                  | 7/1/2023  |
|--------------------------------|---|
| Place of Performance Address 1 | 100 W 10th St   |
| Place of Performance Address 2 | Suite 1012  |
| Place of Performance Address 3 |   |
| Place of Performance City      | WILMINGTON  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19801   |
| Place of Performance Zip+4     |   |
| Description                    | Our Delaware ARPA investment request for the DANA<br>Association Healthcare Plan is \$1,101,150.00 and will fund<br>the setup of the healthcare plan to meet the requirement as<br>established through regulation and support overhead and<br>financial reporting costs. Funds will be spent down by<br>December 2024. Funds will support the start-up costs, and<br>participants in the plan will pay for the cost of the insurance<br>coverage for their employees. |
| Subrecipient                   | DELAWARE ALLIANCE FOR NONPROFIT<br>ADVANCEMENT  |
| Period of Performance Start    | 7/1/2023  |
| Period of Performance End      | 12/31/2026  |

# Subward No: 21637-16716

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$400,000.00  |
| Subaward Date                  | 7/1/2023  |
| Place of Performance Address 1 | 100 W 10th St   |
| Place of Performance Address 2 | Suite 1012  |
| Place of Performance Address 3 |   |
| Place of Performance City      | WILMINGTON  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19801   |
| Place of Performance Zip+4     |   |
| Description                    | The new DANA Nonprofit Accelerator Initiative would help<br>these small, but impactful nonprofit organizations to<br>overcome the economic hardship they and their communities<br>endured. Through this program they can increase their<br>potential to scale, expand their services, and their impact in<br>developing new workforces, enhancing youth academic<br>success, improving health lifestyles, and quality of life in<br>Delaware, and in particular within marginalized<br>communities. The program provides three years of support<br>through training, technical assistance (including back-office<br>systems), coaching, and consulting in the operational areas<br>the organization needs to enhance. The operational areas<br>could include board development, financial management,<br>fundraising, |

| Subrecipient                | DELAWARE ALLIANCE FOR NONPROFIT<br>ADVANCEMENT |
|-----------------------------|--|
| Period of Performance Start | 7/1/2023                                       |
| Period of Performance End   | 12/31/2026                                     |

## Subward No: 21685-645838

| Subaward Type                  | Contract: Purchase Order                    |
|--------------------------------|---|
| Subaward Obligation            | \$751,367.00                                |
| Subaward Date                  | 7/1/2023                                    |
| Place of Performance Address 1 | 669 SOUTHWOOD ROAD                          |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | HOCKESSIN                                   |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19707                                       |
| Place of Performance Zip+4     |   |
| Description                    | Josie's Grace 4th trimester stress program. |
| Subrecipient                   | Perinatal Prana                             |
| Period of Performance Start    | 7/1/2023                                    |
| Period of Performance End      | 9/30/2023                                   |

# Subward No: 21686-00027

| Subaward Type                  | Contract: Purchase Order   |
|--------------------------------|--|
| Subaward Obligation            | \$500,000.00   |
| Subaward Date                  | 7/1/2023   |
| Place of Performance Address 1 | 115 East 14th Street   |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | WILMINGTON   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19801  |
| Place of Performance Zip+4     |  |
| Description                    | \$500,000 to cover operating costs of House of Joseph II, a<br>permanent supportive housing project for individuals with<br>HIV/AIDS and Mary Mother of Hope Permanent Supportive<br>Housing, a project for formerly homeless women. These<br>projects lost funding during COVID-19 due to a reallocation<br>of funds by the Delaware Continuum of Care which resulted<br>in the defunding of these programs. State funding will allow<br>these programs to continue to provide residential services to<br>Delaware's most vulnerable citizens, while alternative<br>long-term funding solutions are sought. |
| Subrecipient                   | MINISTRY OF CARING INC   |

| Period of Performance Start | 7/1/2023   |
|-----------------------------|------------|
| Period of Performance End   | 12/31/2026 |

#### Subward No: 21690-46066

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$100,000.00  |
| Subaward Date                  | 7/1/2023  |
| Place of Performance Address 1 | 38 Vandever Avenue Wilmington   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | WILMINGTON  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19802   |
| Place of Performance Zip+4     |   |
| Description                    | To expand our evidenced based re-entry program services to<br>Kent County in Dover, DE. Currently, there are limited<br>services available in the Greater Dover area for individuals<br>returning to the community. At the Hope Commission, our<br>services in New Castle County, DE have a three-pronged<br>approach. We provide case management services, job<br>coaching and employment support services, and peer<br>services. The combination of these 3 services help<br>individuals returning to the community improve their chance<br>for finding success and not returning to prison. Reentry<br>services are not just about keeping a person from returning<br>to prison, but helping an individual develop the necessary<br>goals, plan, and skills so that they can live a full and rich<br>life, while b |
| Subrecipient                   | Wilmington Hope Commission  |
| Period of Performance Start    | 7/1/2023  |
| Period of Performance End      | 12/31/2026  |

## Subward No: 21691-138447

| Subaward Type                  | Contract: Purchase Order                                |
|--------------------------------|---|
| Subaward Obligation            | \$96,525.00   |
| Subaward Date                  | 7/1/2023  |
| Place of Performance Address 1 | 301 N Van Buren St                                      |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | WILMINGTON  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19805   |
| Place of Performance Zip+4     |   |
|                                | Recovery Management Support Services Grant to support a |

| Description                 | \$96,525 grant to Family Counseling Center of St. Paul's d/b/a Amanecer Counseling and Resource Center for the project named "Strengthening the Continuum of Care: Expanding the delivery of accessible & affordable bilingual, culturally responsive behavioral healthcare in Delaware" ("the Project"). |
|-----------------------------|---|
| Subrecipient                | FAMILY COUNSELING CENTER OF ST PAULS INC  |
| Period of Performance Start | 7/1/2023  |
| Period of Performance End   | 12/31/2026  |

## Subward No: 21790-00059

| Subaward Type                  | Contract: Purchase Order   |
|--------------------------------|--|
| Subaward Obligation            | \$100,000.00   |
| Subaward Date                  | 7/1/2023   |
| Place of Performance Address 1 | 1362 S Governors Ave   |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Dover  |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19904  |
| Place of Performance Zip+4     |  |
| Description                    | This funding will be used for covid-19 mitigation and<br>prevention. It will allow us the capital gain to be able to<br>maintain the shelter and purchase the needed preventative<br>supplies to keep us a covid free shelter so that we can<br>continue to operate on a 365 day a year, 12 month, 7 day a<br>week, 24 hour a day schedule and be fully staffed. We will<br>also use this funding for housing related needs with the<br>shelter now being from 30-90 days it extends the time that is<br>needed to assure that our residents leave and be housed and<br>not leave to be homeless going into another facility, we will<br>be able to offer a more extended timeframe and try to work<br>with our residents to better accommodate them for moving<br>into their own housing. |
| Subrecipient                   | SHEPHERD PLACE INC   |
| Period of Performance Start    | 7/1/2023   |
| Period of Performance End      | 12/31/2026   |
|                                | · · · · · · · · · · · · · · · · · · ·  |

## Subward No: 21807-702169

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$100,000.00             |
| Subaward Date                  | 7/1/2023                 |
| Place of Performance Address 1 | 11 Parkway Circle        |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
|                                |                          |

| Place of Performance City   | New Castle  |
|-----------------------------|---|
| Place of Performance State  | DE  |
| Place of Performance Zip    | 19720   |
| Place of Performance Zip+4  |   |
| Description                 | The NLFR Program is designed to address the economic and<br>financial impact of opioid addiction and other forms of<br>addiction on Delawarean families and households by<br>providing therapies and education to mitigate the mental,<br>emotional, and psychological effects of addiction on the<br>familyespecially among family members who care and<br>provide support to their loved ones struggling with opioid<br>addiction and other forms of addiction. The funds will be<br>allocated for capital expenditures, daily operations,<br>honorariums, salaries, and travel expenses. |
| Subrecipient                | NEW LIFE FOUNDATION RECOVERY INC  |
| Period of Performance Start | 7/1/2023  |
| Period of Performance End   | 12/31/2026  |

#### Subward No: 21841-24576

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| ••                             | \$340,000.00  |
| Subaward Obligation            |   |
| Subaward Date                  | 7/1/2023  |
| Place of Performance Address 1 | 99 Passmore Road  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | WILMINGTON  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19801   |
| Place of Performance Zip+4     |   |
| Description                    | 1. As a result of funding from the ARPA 2022 award, JFS<br>Delaware hired a total of seven (7) therapists (two (2)<br>licensed and five (5) master level) to respond to the need for<br>the increased mental health support in the State of Delaware.<br>With this application, JFS is requesting funding to continue<br>the training and supervision for the five (5) master level<br>therapists, already hired, for an additional year (Year 2) so<br>they can complete their requirements for licensure<br>qualification and additionally, prepare and take the licensure<br>examination at the end of their second year. The total<br>amount requested for the 5-master level therapist is<br>\$410,000. 2. Additional Direct Crisis Assistance funding for<br>families and older adults wi |
| Subrecipient                   | Jewish Family Services  |
| Period of Performance Start    | 7/1/2023  |
| Period of Performance End      | 12/31/2026  |

#### Subward No: 21858-45108

| Subaward Type                  | Contract: Purchase Order   |
|--------------------------------|--|
| Subaward Obligation            | \$75,000.00  |
| Subaward Date                  | 7/1/2023   |
| Place of Performance Address 1 | 710 N LINCOLN ST   |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | WILMINGTON   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19805  |
| Place of Performance Zip+4     |  |
| Description                    | The Emergency Assistance for Fmmer Foster Care and<br>Homeless Individuals program offers case management<br>services for homeless youth earning 30% or less of Area<br>Median Income, aged 18-23. Funds cover foster care,<br>emergency assistance, food, rent, and temporary<br>accommodations, and support staff in facilitating access and<br>utilizing public benefits. |
| Subrecipient                   | WEST END NEIGHBORHOOD HOUSE  |
| Period of Performance Start    | 7/1/2023   |
| Period of Performance End      | 12/31/2026   |

# Subward No: 21465-669278

| Subaward Type                  | Contract: Purchase Order   |
|--------------------------------|--|
| Subaward Obligation            | \$235,945.00   |
| Subaward Date                  | 7/1/2023   |
| Place of Performance Address 1 | 211 AMERICAN AVENUE  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Greensboro   |
| Place of Performance State     | NC   |
| Place of Performance Zip       | 27409  |
| Place of Performance Zip+4     |  |
| Description                    | The negative economic impact of COVID caused the<br>dislocation of thousands of workers throughout the State and<br>changed the employment landscape. This, coupled with<br>closures of DOL's brick and mortar locations due to the<br>COVID-19 pandemic, created the need to meet unemployed<br>and underemployed workers where they are, within their<br>communities. Although foot traffic has resumed at DOL's<br>brick and mortar locations, the numbers (along with DOL's<br>job matching system (Joblink.delaware.gov)) have not<br>rebounded to pre-pandemic levels. In order to return to<br>pre-pandemic levels and increase its reach, the DOL desires<br>to purchase one (1) mobile bus and one (1) van sized<br>vehicle to improve recruitment and outreach programs<br>throughout the State. |

| Subrecipient                | MATTHEWS SPECIALTY VEHICLES INC |
|-----------------------------|---------------------------------|
| Period of Performance Start | 7/1/2023                        |
| Period of Performance End   | 12/31/2026                      |

# Subward No: 21402-26041

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$65,000.00   |
| Subaward Date                  | 7/1/2023  |
| Place of Performance Address 1 | 2713 Lancaster Avenue   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Wilmington  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19805   |
| Place of Performance Zip+4     |   |
| Description                    | This specific project or purchase description is awarded<br>amount (\$65,000), \$40,000 is allocated to the purchase,<br>usage (gas, insurance, etc.) and maintenance of this<br>project-specific vehicle. The balance of \$25,000 will be<br>allocated for medical supplies in the project's efforts to<br>increase access to harm reduction services to reduce the<br>transmission of HIV and other blood-borne infections<br>associated with those who inject drugs in hard-to-reach rural<br>areas in Kent and Sussex counties. Medical supplies will be<br>distributed via SSP services and can include –but are not<br>limited to - sterile syringes, xylazine testing strips,<br>first-aid/wound care kits/supplies, and HIV testing kits. |
| Subrecipient                   | Brandywine Counseling and Community Service   |
| Period of Performance Start    | 7/1/2023  |
| Period of Performance End      | 12/31/2026  |

### Subward No: 21943-27111

| Subaward Type                  | Contract: Purchase Order |  |
|--------------------------------|--------------------------|--|
| Subaward Obligation            | \$500,000.00             |  |
| Subaward Date                  | 10/1/2023                |  |
| Place of Performance Address 1 | 206 ACADEMY ST           |  |
| Place of Performance Address 2 |                          |  |
| Place of Performance Address 3 |                          |  |
| Place of Performance City      | GEORGETOWN               |  |
| Place of Performance State     | DE                       |  |
| Place of Performance Zip       | 19947                    |  |
| Place of Performance Zip+4     |                          |  |
| Description                    | Affordable Housing       |  |

| Subrecipient                | Sussex Habitat for Humanity |
|-----------------------------|-----------------------------|
| Period of Performance Start | 10/1/2023                   |
| Period of Performance End   | 12/31/2023                  |

#### Subward No: 21945-691496

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$100,000.00  |
| Subaward Date                  | 10/1/2023   |
| Place of Performance Address 1 | 100 DEAN DR   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | NEWARK  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19711   |
| Place of Performance Zip+4     |   |
| Description                    | The \$100,000 provided by the ARPA grant will go directly<br>to programs meeting increased demand for youth mental<br>health support. Specifically, this will allow us to: increase<br>programming to our Latinx and international populations by<br>adding bilingual and ESL/SEL programs at Sean's House -<br>\$20,000 over 2 years for facilitators, translators, program<br>materials. Increasing on-site Clinical Support, Risk<br>Management and Group programs essential to bolstering our<br>support system through best practices and professional<br>support - \$40,000 over two years conduct clinical resource<br>expansion through outreach and partnerships with local<br>mental health facilities, schools, and community centers-<br>\$40,000 over two years. |
| Subrecipient                   | SEAN LOCKE 24 FOUNDATION  |
| Period of Performance Start    | 10/1/2023   |
| Period of Performance End      | 12/31/2026  |

# Subward No: 22048-32777

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$2,563,182.83           |
| Subaward Date                  | 10/1/2023                |
| Place of Performance Address 1 | PO BOX 269               |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | WILMINGTON               |
| Place of Performance State     | DE                       |
| Place of Performance Zip       | 19899                    |
| Place of Performance Zip+4     |                          |
|                                |                          |

| Description                 | This specific project or purchase description is the<br>construction of a new 6-bed behavioral health zone in the<br>Emergency Department at Nemours Children's Hospital,<br>Delaware. |
|-----------------------------|--|
| Subrecipient                | The Nemours Foundation   |
| Period of Performance Start | 10/1/2023  |
| Period of Performance End   | 12/31/2026   |

# Subward No: 22054-24672

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$535,000.00  |
| Subaward Date                  | 10/1/2023   |
| Place of Performance Address 1 | 501 W 14TH ST   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | WILMINGTON  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19801   |
| Place of Performance Zip+4     |   |
| Description                    | Christiana Care Health Services, Inc. (CCHS) seeks ARPA<br>funding in the amount of \$750,000. toward a project to<br>create a Pediatric Behavioral Health Emergency Crisis<br>Stabilization Unit (Pediatric Center). |
| Subrecipient                   | Christiana Care Health Services Inc   |
| Period of Performance Start    | 10/1/2023   |
| Period of Performance End      | 12/31/2026  |

#### Subward No: 22091-207967

| Subaward Type                  | Contract: Purchase Order   |
|--------------------------------|--|
| Subaward Obligation            | \$625,000.00   |
| Subaward Date                  | 10/1/2023  |
| Place of Performance Address 1 | 839 PINE STREET  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | WILMINGTON   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19801  |
| Place of Performance Zip+4     |  |
| Description                    | ARPA funding for a new facility, the Eastside Career<br>Development Center, which will serve to provide vocational<br>and career-development training to underserved<br>communities. |

| Subrecipient                | CENTRAL BAPTIST COMMUNITY DEVELOPMENT<br>CO |
|-----------------------------|---|
| Period of Performance Start | 10/1/2023                                   |
| Period of Performance End   | 12/31/2026                                  |

# Subward No: 22131-48

| Subaward Type                  | Contract: Purchase Order   |
|--------------------------------|--|
| Subaward Obligation            | \$642,689.00   |
| Subaward Date                  | 10/1/2023  |
| Place of Performance Address 1 | 669 S. Union Street Wilmington   |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | WILMINGTON   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19805  |
| Place of Performance Zip+4     |  |
| Description                    | To provide mental health support for youths in dealing with<br>the effects of many Adverse Childhood Experiences<br>intensified and amplified by the pandemic, including trauma,<br>social, and emotional needs resulting in offering youth<br>support services. |
| Subrecipient                   | BOYS & GIRLS CLUB OF DELAWARE  |
| Period of Performance Start    | 10/1/2023  |
| Period of Performance End      | 12/31/2026   |

## Subward No: 22199-27599

| Subaward Type                  | Contract: Purchase Order   |
|--------------------------------|--|
| Subaward Obligation            | \$125,000.00   |
| Subaward Date                  | 10/1/2023  |
| Place of Performance Address 1 | 100 W 10TH ST STE 903  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | WILMINGTON   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19801  |
| Place of Performance Zip+4     |  |
| Description                    | Two-year plan that focuses on the impact that COVID-19 has had on domestic violence in the state by increasing the community is access to early intervention and quality mental health services in Delaware. |
| Subrecipient                   | Delaware Coalition Against Domestic Violence   |
| Period of Performance Start    | 10/1/2023  |

## Subward No: 22200-114478

| Subaward Type                  | Contract, Durchass Order   |
|--------------------------------|--|
| Subaward Type                  | Contract: Purchase Order   |
| Subaward Obligation            | \$1,500,000.00   |
| Subaward Date                  | 10/1/2023  |
| Place of Performance Address 1 | 240 BASSETT AVE.   |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | NEW CASTLE   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19720  |
| Place of Performance Zip+4     |  |
| Description                    | Seeks to grow the pool of data scientists, analysts, and<br>engineers in Delaware by directly recruiting PhD candidates<br>and postdoctoral researchers with a focus in appropriate<br>quantitative methods, technologies, and techniques. |
| Subrecipient                   | Tech Impact  |
| Period of Performance Start    | 10/1/2023  |
| Period of Performance End      | 12/31/2026   |

#### Subward No: 22208-29267

| Subaward Type                  | Contract: Purchase Order     |
|--------------------------------|------------------------------|
| Subaward Obligation            | \$660,000.00                 |
| Subaward Date                  | 10/1/2023                    |
| Place of Performance Address 1 | 400 NORTH WALNUT STREET      |
| Place of Performance Address 2 |                              |
| Place of Performance Address 3 |                              |
| Place of Performance City      | WILMINGTON                   |
| Place of Performance State     | DE                           |
| Place of Performance Zip       | 19801                        |
| Place of Performance Zip+4     |                              |
| Description                    | Affordable Housing           |
| Subrecipient                   | Wilmington Housing Authority |
| Period of Performance Start    | 10/1/2023                    |
| Period of Performance End      | 12/31/2026                   |

## Subward No: 22229-661123

| Subaward Type       | Contract: Purchase Order |
|---------------------|--------------------------|
| Subaward Obligation | \$50,000.00              |
|                     |                          |

| Subaward Date                  | 10/1/2023   |
|--------------------------------|---|
| Place of Performance Address 1 | 86 N DRAGON DR  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | BEAR  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19701   |
| Place of Performance Zip+4     |   |
| Description                    | Amate Mujer Program to empower Latino women by providing services to improve their mental wellness. |
| Subrecipient                   | LATINA MARKETING LLC  |
| Period of Performance Start    | 10/1/2023   |
| Period of Performance End      | 12/31/2023  |

## Subward No: 22267-195637

| Subaward Type                  | Contract: Purchase Order              |
|--------------------------------|---------------------------------------|
| Subaward Obligation            | \$750,000.00                          |
| Subaward Date                  | 10/1/2023                             |
| Place of Performance Address 1 | 1210 Lobdell St                       |
| Place of Performance Address 2 |                                       |
| Place of Performance Address 3 |                                       |
| Place of Performance City      | Wilmington                            |
| Place of Performance State     | DE                                    |
| Place of Performance Zip       | 19801                                 |
| Place of Performance Zip+4     |                                       |
| Description                    | Senior living construction            |
| Subrecipient                   | EZION FAIR COMMUNITY DEVELOPMENT CORP |
| Period of Performance Start    | 10/1/2023                             |
| Period of Performance End      | 12/31/2026                            |

# Subward No: 22272-602015

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$100,000.00             |
| Subaward Date                  | 10/1/2023                |
| Place of Performance Address 1 | 3821 LANCASTER PIKE      |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | WILMINGTON               |
| Place of Performance State     | DE                       |
|                                |                          |

| Place of Performance Zip    | 19805  |
|-----------------------------|--|
| Place of Performance Zip+4  |  |
| Description                 | Optimizing and Navigating the Re-engagement of Absentee<br>MOUD Participants program (ON-RAMP), which will<br>provide outreach to its clients who have missed a significant<br>number of their MOUD. |
| Subrecipient                | CORAS WELLNESS AND BEHAVIOR HEALTH LLC   |
| Period of Performance Start | 10/1/2023  |
| Period of Performance End   | 12/31/2026   |

# Subward No: 22281-27350

| Subaward Type                  | Contract: Purchase Order   |
|--------------------------------|--|
| Subaward Obligation            | \$200,000.00   |
| Subaward Date                  | 10/1/2023  |
| Place of Performance Address 1 | 1 INNOVATION WAY   |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | NEWARK   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19711  |
| Place of Performance Zip+4     |  |
| Description                    | Funds to launch a Business Accelerator that will support the<br>recovery of COVID impacted financial technology startups<br>by providing technical services that will help them stabilize<br>or grow their businesses. |
| Subrecipient                   | DELAWARE TECHNOLOGY PARK, INC.   |
| Period of Performance Start    | 10/1/2023  |
| Period of Performance End      | 12/31/2026   |

# Subward No: 22282-494103

| Subaward Type                  | Contract: Purchase Order   |
|--------------------------------|--|
| Subaward Obligation            | \$2,000,000.00   |
| Subaward Date                  | 10/1/2023  |
| Place of Performance Address 1 | 100 W Loockerman St  |
| Place of Performance Address 2 | STE 1B   |
| Place of Performance Address 3 |  |
| Place of Performance City      | Dover  |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19904  |
| Place of Performance Zip+4     |  |
| Description                    | Funding to address systemic public health, public safety and economic challenges |

| Subrecipient                | HELP Initiative, Inc. |
|-----------------------------|-----------------------|
| Period of Performance Start | 10/1/2023             |
| Period of Performance End   | 12/31/2026            |

#### Subward No: 22285-127359

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$400,000.00             |
| Subaward Date                  | 10/1/2023                |
| Place of Performance Address 1 | 100 WEST 10TH ST         |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | WILMINGTON               |
| Place of Performance State     | DE                       |
| Place of Performance Zip       | 19801                    |
| Place of Performance Zip+4     |                          |
| Description                    | UGrad Academy            |
| Subrecipient                   | Kind to Kids Foundation  |
| Period of Performance Start    | 10/1/2023                |
| Period of Performance End      | 12/31/2026               |

#### Subward No: 22324-25656

| Subaward Type                  | Contract: Purchase Order   |
|--------------------------------|--|
| Subaward Obligation            | \$60,000.00  |
| Subaward Date                  | 10/1/2023  |
| Place of Performance Address 1 | 110 N. RAILROAD AVE  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | GEORGETOWN   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19947  |
| Place of Performance Zip+4     |  |
| Description                    | Emergency shelter for homeless men, women and children primarily in Sussex County. |
| Subrecipient                   | SUSSEX COMMUNITY CRISIS HOUSING SERVICES   |
| Period of Performance Start    | 10/1/2023  |
| Period of Performance End      | 12/31/2026   |

# Subward No: 18841

| Subaward Type | Grant: Lump Sum Payment(s) |
|---------------|----------------------------|
|               |                            |

| Subaward Obligation            | \$3,000,000.00  |
|--------------------------------|---|
| Subaward Date                  | 2/24/2022   |
| Place of Performance Address 1 | 100 W. 10th Street  |
| Place of Performance Address 2 | Suite 915   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Wilmington  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19801   |
| Place of Performance Zip+4     |   |
| Description                    | The Data Science Fellowship seeks to grow the pool of data<br>scientists, analysts, and engineers in Delaware by directly<br>recruiting PhD candidates and postdoctoral researchers with<br>a focus in appropriate quantitative methods, technologies,<br>and techniques. Fellows would be required to live and work<br>in Delaware during the program to be eligible for<br>participation. |
| Subrecipient                   | Tech Impact   |
| Period of Performance Start    | 2/24/2022   |
| Period of Performance End      | 12/31/2024  |

#### Subward No: 18597

| Subaward Type                  | Grant: Lump Sum Payment(s)   |
|--------------------------------|--|
| Subaward Obligation            | \$1,250,000.00   |
| Subaward Date                  | 1/5/2022   |
| Place of Performance Address 1 | 501 W 11th Street  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Wilmington   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19801  |
| Place of Performance Zip+4     |  |
| Description                    | <ul> <li>First State Squash provides Wilmington youth, a majority of whom will be the first in their families to achieve a college degree, with tuition-free academic programming, squash instruction, and enrichment opportunities. Students enter the program in fifth grade and continue year-round, to and through college graduation. Using the sport of squash as a teaching tool, FSS creates long-term, intensive support and unique learning opportunities. FSS builds strong partnerships with students, families, and schools to help participants fulfill their academic, athletic, and personal goals.</li> <li>On January 7th, 2022, FSS completed the purchase of "Reflex," a former squash club in Wilmington. Located at 524 S Walnut Street, "Reflex" has six squash courts</li> </ul> |

| Subrecipient                | First State Squash |
|-----------------------------|--------------------|
| Period of Performance Start | 1/5/2022           |
| Period of Performance End   | 12/31/2024         |

## Subward No: 18636

| Subaward Type                  | Grant: Lump Sum Payment(s)  |
|--------------------------------|---|
| Subaward Obligation            | \$589,990.00  |
| Subaward Date                  | 1/10/2022   |
| Place of Performance Address 1 | 684 Forest Street   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Dover   |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19904   |
| Place of Performance Zip+4     |   |
| Description                    | A 17900 square foot building on about one acre was<br>purchased and will be converted to emergency/transitional<br>housing for displaced families. This project will provide<br>highly-affordable housing for individuals and families<br>displaced by job loss or lack of employment access and<br>opportunity related to the Covid-19 pandemic Preliminary<br>design work complete. Construction will take place during<br>remainder of 2022. |
| Subrecipient                   | Dover Interfaith Mission for Housing, Inc.  |
| Period of Performance Start    | 1/10/2022   |
| Period of Performance End      | 12/31/2024  |

# Subward No: 18804-26169

| Subaward Type                  | Contract: Purchase Order |  |
|--------------------------------|--------------------------|--|
| Subaward Obligation            | \$1,863,147.65           |  |
| Subaward Date                  | 4/26/2022                |  |
| Place of Performance Address 1 | 820 North French Street  |  |
| Place of Performance Address 2 |                          |  |
| Place of Performance Address 3 |                          |  |
| Place of Performance City      | Wilmington               |  |
| Place of Performance State     | DE                       |  |
| Place of Performance Zip       | 19801                    |  |
| Place of Performance Zip+4     |                          |  |
| Description                    | Building Improvements    |  |
| Subrecipient                   | DelDeo Builders          |  |
| Period of Performance Start    | 4/26/2022                |  |
| Period of Performance End      | 12/31/2024               |  |

#### Subward No: 18804-29660

| Subaward Type                  | Contract: Purchase Order      |
|--------------------------------|-------------------------------|
| Subaward Obligation            | \$164,942.92                  |
| Subaward Date                  | 5/3/2022                      |
| Place of Performance Address 1 | 820 North French Street       |
| Place of Performance Address 2 |                               |
| Place of Performance Address 3 |                               |
| Place of Performance City      | Wilmington                    |
| Place of Performance State     | DE                            |
| Place of Performance Zip       | 19801                         |
| Place of Performance Zip+4     |                               |
| Description                    | Building Improvement          |
| Subrecipient                   | Johnson, Mirmiran & Thomspson |
| Period of Performance Start    | 5/3/2022                      |
| Period of Performance End      | 12/31/2024                    |

#### Subward No: 18805-25525

| Subaward Type                  | Contract: Purchase Order        |
|--------------------------------|---------------------------------|
| Subaward Obligation            | \$1,501,822.14                  |
| Subaward Date                  | 12/2/2021                       |
| Place of Performance Address 1 | 820 N French Street             |
| Place of Performance Address 2 |                                 |
| Place of Performance Address 3 |                                 |
| Place of Performance City      | Wilmington                      |
| Place of Performance State     | DE                              |
| Place of Performance Zip       | 19801                           |
| Place of Performance Zip+4     |                                 |
| Description                    | Contract follows DOL Wage Rates |
| Subrecipient                   | Bancroft Construction Co.       |
| Period of Performance Start    | 12/2/2021                       |
| Period of Performance End      | 12/31/2024                      |
| Primary Sector                 | public health work              |
| Purpose of Funds               | contractor                      |

# Subward No: 18805-29660

| Subaward Type       | Contract: Purchase Order |
|---------------------|--------------------------|
| Subaward Obligation | \$145,485.56             |
| Subaward Date       | 12/17/2021               |
|                     |                          |

| Place of Performance Address 1 | 820 N French Street              |
|--------------------------------|----------------------------------|
| Place of Performance Address 2 |                                  |
| Place of Performance Address 3 |                                  |
| Place of Performance City      | Wilmington                       |
| Place of Performance State     | DE                               |
| Place of Performance Zip       | 19801                            |
| Place of Performance Zip+4     |                                  |
| Description                    | Contract follows DOL Wage Rates. |
| Subrecipient                   | Johnson, Mirmiran & Thomspson    |
| Period of Performance Start    | 12/17/2021                       |
| Period of Performance End      | 12/31/2024                       |
| Primary Sector                 | public health work               |
| Purpose of Funds               | HVAC Enhancements                |

## Subward No: 18806-26169

| Subaward Type                  | Contract: Purchase Order    |
|--------------------------------|-----------------------------|
| Subaward Obligation            | \$2,122,772.18              |
| Subaward Date                  | 9/1/2022                    |
| Place of Performance Address 1 | 820 North French Street     |
| Place of Performance Address 2 |                             |
| Place of Performance Address 3 |                             |
| Place of Performance City      | Wilmington                  |
| Place of Performance State     | DE                          |
| Place of Performance Zip       | 19801                       |
| Place of Performance Zip+4     |                             |
| Description                    | Building improvements, HVAC |
| Subrecipient                   | DelDeo Builders             |
| Period of Performance Start    | 9/1/2022                    |
| Period of Performance End      | 10/31/2024                  |

## Subward No: 18806-29660

| Subaward Type                  | Contract: Purchase Order |  |
|--------------------------------|--------------------------|--|
| Subaward Obligation            | \$77,227.82              |  |
| Subaward Date                  | 7/6/2022                 |  |
| Place of Performance Address 1 | 820 North French Street  |  |
| Place of Performance Address 2 |                          |  |
| Place of Performance Address 3 |                          |  |
| Place of Performance City      | Wilmington               |  |
| Place of Performance State     | DE                       |  |
|                                |                          |  |

| Place of Performance Zip    | 19801                         |
|-----------------------------|-------------------------------|
| Place of Performance Zip+4  |                               |
| Description                 | Building improvements, HVAC   |
| Subrecipient                | Johnson, Mirmiran & Thomspson |
| Period of Performance Start | 7/6/2022                      |
| Period of Performance End   | 12/31/2024                    |

# Subward No: 18807-31036

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$2,784,438.00           |
| Subaward Date                  | 4/1/2023                 |
| Place of Performance Address 1 | 417 Federal St           |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Dover                    |
| Place of Performance State     | DE                       |
| Place of Performance Zip       | 19901                    |
| Place of Performance Zip+4     |                          |
| Description                    | HVAC construction        |
| Subrecipient                   | JOSEPH T RICHARDSON INC  |
| Period of Performance Start    | 4/1/2023                 |
| Period of Performance End      | 12/31/2026               |

# Subward No: 18807-151568

| Subaward Type                  | Contract: Purchase Order            |
|--------------------------------|-------------------------------------|
| Subaward Obligation            | \$243,000.00                        |
| Subaward Date                  | 3/7/2022                            |
| Place of Performance Address 1 | 417 Federal Street                  |
| Place of Performance Address 2 |                                     |
| Place of Performance Address 3 |                                     |
| Place of Performance City      | Dover                               |
| Place of Performance State     | DE                                  |
| Place of Performance Zip       | 19901                               |
| Place of Performance Zip+4     |                                     |
| Description                    | HVAC upgrades at Jesse Cooper Bldg. |
| Subrecipient                   | DEDC LLC                            |
| Period of Performance Start    | 3/7/2022                            |
| Period of Performance End      | 12/31/2024                          |
| Primary Sector                 | public health work                  |
|                                |                                     |

## Subward No: 18808-24493

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$993,722.00             |
| Subaward Date                  | 4/1/2023                 |
| Place of Performance Address 1 | 2047 Sunset Lake Rd      |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Newark                   |
| Place of Performance State     | DE                       |
| Place of Performance Zip       | 19702                    |
| Place of Performance Zip+4     |                          |
| Description                    | Mechanical contractor    |
| Subrecipient                   | SCHLOSSER & ASSOCIATES   |
| Period of Performance Start    | 4/1/2023                 |
| Period of Performance End      | 12/31/2026               |

#### Subward No: 18808-25395

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$114,278.00  |
| Subaward Date                  | 2/7/2022  |
| Place of Performance Address 1 | 1301 E 12th Street  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Wilmington  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19802   |
| Place of Performance Zip+4     |   |
| Description                    | Replace ventilation chillers at Howard R. Young<br>Correctional Institution |
| Subrecipient                   | Jaed Corp   |
| Period of Performance Start    | 2/7/2022  |
| Period of Performance End      | 12/31/2024  |

#### Subward No: 18809-13740

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$1,177,200.00           |
| Subaward Date                  | 7/1/2023                 |
| Place of Performance Address 1 | 1181 Paddock Rd          |

| Smyrna   |
|--|
| DE   |
| 19977  |
|  |
| facility chiller installation and improvements |
| GAUDELLI BROTHERS INC                          |
| 7/1/2023                                       |
| 9/30/2023                                      |
|  |

# Subward No: 18809-35559

| Seeh anno 1 Terra              | Contract: Druchass Onder  |
|--------------------------------|---|
| Subaward Type                  | Contract: Purchase Order  |
| Subaward Obligation            | \$149,844.00  |
| Subaward Date                  | 2/8/2022  |
| Place of Performance Address 1 | 1181 Paddock Road   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Smyrna  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19977   |
| Place of Performance Zip+4     |   |
| Description                    | "Replace ventillation chillers at James T. Vaughn Correction<br>Center, Central Violation of Probation, and Morris<br>Correctional Instutition" |
| Subrecipient                   | Tetra Tech Inc  |
| Period of Performance Start    | 2/8/2022  |
| Period of Performance End      | 12/31/2024  |
| Primary Sector                 | public health work  |
| Purpose of Funds               | Contract follows DOL Wage Rates   |

# Subward No: 1810-31036

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$993,722.00             |
| Subaward Date                  | 2/2/2023                 |
| Place of Performance Address 1 | 5 E Center Street        |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | HARRINGTON               |
|                                |                          |

| Place of Performance State  | DE   |
|-----------------------------|--|
| Place of Performance Zip    | 19952  |
| Place of Performance Zip+4  |  |
| Description                 | Chiller Replacement / Construction/Building Services |
| Subrecipient                | JOSEPH T RICHARDSON INC                              |
| Period of Performance Start | 2/2/2023   |
| Period of Performance End   | 12/31/2026   |

# Subward No: 18810-20765

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$114,278.00  |
| Subaward Date                  | 2/7/2022  |
| Place of Performance Address 1 | 23203 DuPont Blvd   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Georgetown  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19947   |
| Place of Performance Zip+4     |   |
| Description                    | Replace ventillation chillers at Sussex Correctional<br>Institution and Sussex Violation of Probation |
| Subrecipient                   | Fayda Engineering   |
| Period of Performance Start    | 2/7/2022  |
| Period of Performance End      | 12/31/2024  |
| Primary Sector                 | public health work  |
| Purpose of Funds               | Contract follows DOL Wage Rates   |
|                                |   |

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$225,370.88             |
| Subaward Date                  | 4/1/2023                 |
| Place of Performance Address 1 | 100 Campus Dr            |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Dover                    |
| Place of Performance State     | DE                       |
| Place of Performance Zip       | 19904                    |
| Place of Performance Zip+4     |                          |
| Description                    | Construction             |
|                                |                          |

| Subrecipient                | LIBERTY PARKS AND PLAYGROUNDS, INC. |
|-----------------------------|-------------------------------------|
| Period of Performance Start | 4/1/2023                            |
| Period of Performance End   | 12/31/2026                          |

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$5,409,840.85           |
| Subaward Date                  | 4/1/2023                 |
| Place of Performance Address 1 | 100 Campus Dr            |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Dover                    |
| Place of Performance State     | DE                       |
| Place of Performance Zip       | 19904                    |
| Place of Performance Zip+4     |                          |
| Description                    | construction             |
| Subrecipient                   | VENTRESCA BROS INC       |
| Period of Performance Start    | 4/1/2023                 |
| Period of Performance End      | 12/31/2026               |

## Subward No: 18656-25833

| Subaward Type                  | Contract: Purchase Order                     |
|--------------------------------|--|
| Subaward Obligation            | \$394,748.64                                 |
| Subaward Date                  | 6/10/2022                                    |
| Place of Performance Address 1 | 954 JUSTISON STREET                          |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | NEW CASTLE                                   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19801  |
| Place of Performance Zip+4     |  |
| Description                    | Construction project Design SE/Building HVAC |
| Subrecipient                   | BUCK SIMPERS ARCHITECT AND ASSOCIATES        |
| Period of Performance Start    | 6/10/2022                                    |
| Period of Performance End      | 12/31/2022                                   |

| Subaward Type       | Contract: Purchase Order |
|---------------------|--------------------------|
| Subaward Obligation | \$177,215.00             |
|                     |                          |

| Subaward Date                  | 3/25/2022                      |
|--------------------------------|--------------------------------|
| Place of Performance Address 1 | 200 CONTINENTAL DRIVE          |
| Place of Performance Address 2 |                                |
| Place of Performance Address 3 |                                |
| Place of Performance City      | Newark                         |
| Place of Performance State     | DE                             |
| Place of Performance Zip       | 19713                          |
| Place of Performance Zip+4     |                                |
| Description                    | Construction/Building Services |
| Subrecipient                   | LANDMARK ENGINEERING INC       |
| Period of Performance Start    | 5/27/2022                      |
| Period of Performance End      | 12/31/2024                     |

| Subaward Type                  | Transfer: Lump Sum Payment(s)   |
|--------------------------------|---|
| Subaward Obligation            | \$75,255.00   |
| Subaward Date                  | 3/2/2022  |
| Place of Performance Address 1 | 300 N ORANGE ST   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Wilmington  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19801   |
| Place of Performance Zip+4     |   |
| Description                    | Training Delaware National Guard as CNAs                                |
| Subrecipient                   | DTCC WILMINGTON CAMPUS  |
| Period of Performance Start    | 3/2/2022  |
| Period of Performance End      | 12/31/2024  |
| Primary Sector                 | public health work  |
| Purpose of Funds               | Training of CNA to respond to nursing shortages resulting from pandemic |

| Subaward Type                  | Transfer: Lump Sum Payment(s) |
|--------------------------------|-------------------------------|
| Subaward Obligation            | \$62,280.00                   |
| Subaward Date                  | 2/15/2022                     |
| Place of Performance Address 1 | 400 STANTON-CHRISTIANA RD     |
| Place of Performance Address 2 |                               |
| Place of Performance Address 3 |                               |
|                                |                               |

| Place of Performance City   | NEWARK  |
|-----------------------------|---|
| Place of Performance State  | DE  |
| Place of Performance Zip    | 19713   |
| Place of Performance Zip+4  |   |
| Description                 | Training Delaware National Guard as CNAs                                |
| Subrecipient                | DTCC STANTON CAMPUS   |
| Period of Performance Start | 2/15/2022   |
| Period of Performance End   | 12/31/2024  |
| Primary Sector              | public health work  |
| Purpose of Funds            | Training of CNA to respond to nursing shortages resulting from pandemic |

| Subaward Type                  | Transfer: Lump Sum Payment(s)   |
|--------------------------------|---|
| Subaward Obligation            | \$57,090.00   |
| Subaward Date                  | 2/15/2022   |
| Place of Performance Address 1 | 100 CAMPUS DR   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Dover   |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19901   |
| Place of Performance Zip+4     |   |
| Description                    | Training Delaware National Guard as CNAs                                |
| Subrecipient                   | DTCC TERRY CAMPUS   |
| Period of Performance Start    | 2/15/2022   |
| Period of Performance End      | 12/31/2024  |
| Primary Sector                 | public health work  |
| Purpose of Funds               | Training of CNA to respond to nursing shortages resulting from pandemic |

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$226,425.76             |
| Subaward Date                  | 4/1/2023                 |
| Place of Performance Address 1 | 100 Campus Dr            |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | dover                    |
| Place of Performance State     | DE                       |

| Place of Performance Zip    | 19904                |
|-----------------------------|----------------------|
| Place of Performance Zip+4  |                      |
| Description                 | Building Improvement |
| Subrecipient                | BEAR INDUSTRIES INC  |
| Period of Performance Start | 4/1/2023             |
| Period of Performance End   | 12/31/2026           |

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$635,900.00             |
| Subaward Date                  | 4/1/2023                 |
| Place of Performance Address 1 | 100 Campus Dr            |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Dover                    |
| Place of Performance State     | DE                       |
| Place of Performance Zip       | 19904                    |
| Place of Performance Zip+4     |                          |
| Description                    | construction             |
| Subrecipient                   | MODULAR CONCEPTS         |
| Period of Performance Start    | 4/1/2023                 |
| Period of Performance End      | 12/31/2026               |

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$339,439.00             |
| Subaward Date                  | 4/1/2023                 |
| Place of Performance Address 1 | 100 Campus Dr            |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Dover                    |
| Place of Performance State     | DE                       |
| Place of Performance Zip       | 19904                    |
| Place of Performance Zip+4     |                          |
| Description                    | CONSTRUCTION             |
| Subrecipient                   | FLOORING SOLUTIONS INC   |
| Period of Performance Start    | 4/1/2023                 |
| Period of Performance End      | 12/31/2026               |

| Subaward Type                  | Contract: Purchase Order |  |
|--------------------------------|--------------------------|--|
| Subaward Obligation            | \$129,450.00             |  |
| Subaward Date                  | 4/1/2023                 |  |
| Place of Performance Address 1 | 100 Campus Dr            |  |
| Place of Performance Address 2 |                          |  |
| Place of Performance Address 3 |                          |  |
| Place of Performance City      | Dover                    |  |
| Place of Performance State     | DE                       |  |
| Place of Performance Zip       | 19904                    |  |
| Place of Performance Zip+4     |                          |  |
| Description                    | construction             |  |
| Subrecipient                   | M & S PAINTING INC       |  |
| Period of Performance Start    | 4/1/2023                 |  |
| Period of Performance End      | 12/31/2026               |  |

#### Subward No: 18659-17970

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$390,581.00             |
| Subaward Date                  | 4/1/2023                 |
| Place of Performance Address 1 | 100 Campus Dr            |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Dover                    |
| Place of Performance State     | DE                       |
| Place of Performance Zip       | 19904                    |
| Place of Performance Zip+4     |                          |
| Description                    | construction             |
| Subrecipient                   | MALVERN GLASS INC        |
| Period of Performance Start    | 4/1/2023                 |
| Period of Performance End      | 12/31/2026               |

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$0.00                   |
| Subaward Date                  | 4/1/2023                 |
| Place of Performance Address 1 | 100 Campus Dr            |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |

| Place of Performance City   | Dover             |
|-----------------------------|-------------------|
| Place of Performance State  | DE                |
| Place of Performance Zip    | 19904             |
| Place of Performance Zip+4  |                   |
| Description                 | construction      |
| Subrecipient                | MALVERN GLASS INC |
| Period of Performance Start | 4/1/2023          |
| Period of Performance End   | 12/31/2026        |

| Subaward Type                  | Contract: Purchase Order   |
|--------------------------------|----------------------------|
| Subaward Obligation            | \$972,146.80               |
| Subaward Date                  | 4/1/2023                   |
| Place of Performance Address 1 | 100 Campus Dr              |
| Place of Performance Address 2 |                            |
| Place of Performance Address 3 |                            |
| Place of Performance City      | Dover                      |
| Place of Performance State     | DE                         |
| Place of Performance Zip       | 19904                      |
| Place of Performance Zip+4     |                            |
| Description                    | construction               |
| Subrecipient                   | NORTH EAST CONTRACTORS INC |
| Period of Performance Start    | 4/1/2023                   |
| Period of Performance End      | 12/31/2026                 |

| Contract: Purchase Order |
|--------------------------|
| \$252,000.00             |
| 4/1/2023                 |
| 4/1/2023                 |
|                          |
|                          |
| Dover                    |
| DE                       |
| 19904                    |
|                          |
| construction             |
| OLD WORLD TILEWORKS INC  |
| 4/1/2023                 |
|                          |

| Subaward Type                  | Contract: Purchase Order     |
|--------------------------------|------------------------------|
| Subaward Obligation            | \$536,300.00                 |
| Subaward Date                  | 4/1/2023                     |
| Place of Performance Address 1 | 4/1/2023                     |
| Place of Performance Address 2 |                              |
| Place of Performance Address 3 |                              |
| Place of Performance City      | Dover                        |
| Place of Performance State     | DE                           |
| Place of Performance Zip       | 19904                        |
| Place of Performance Zip+4     |                              |
| Description                    | Construction                 |
| Subrecipient                   | STEEL SUPPLIERS ERECTORS INC |
| Period of Performance Start    | 4/1/2023                     |
| Period of Performance End      | 12/31/2026                   |
|                                |                              |

#### Subward No: 18659-13740

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$4,040,000.00           |
| Subaward Date                  | 4/1/2023                 |
| Place of Performance Address 1 | 100 Campus Dr            |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Dover                    |
| Place of Performance State     | DE                       |
| Place of Performance Zip       | 19904                    |
| Place of Performance Zip+4     |                          |
| Description                    | construction             |
| Subrecipient                   | GAUDELLI BROTHERS INC    |
| Period of Performance Start    | 4/1/2023                 |
| Period of Performance End      | 12/31/2026               |

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$297,300.00             |
| Subaward Date                  | 4/1/2023                 |
| Place of Performance Address 1 | 100 Campus Dr            |
|                                |                          |

| Place of Performance Address 2 |                 |
|--------------------------------|-----------------|
| Place of Performance Address 3 |                 |
| Place of Performance City      | Dover           |
| Place of Performance State     | DE              |
| Place of Performance Zip       | 19904           |
| Place of Performance Zip+4     |                 |
| Description                    | construction    |
| Subrecipient                   | MODERN CONTROLS |
| Period of Performance Start    | 4/1/2023        |
| Period of Performance End      | 12/31/2026      |

| Subaward Type                  | Contract: Purchase Order    |
|--------------------------------|-----------------------------|
| Subaward Obligation            | \$813,353.00                |
| Subaward Date                  | 4/1/2023                    |
| Place of Performance Address 1 | 100 Campus Dr               |
| Place of Performance Address 2 |                             |
| Place of Performance Address 3 |                             |
| Place of Performance City      | Dover                       |
| Place of Performance State     | DE                          |
| Place of Performance Zip       | 19904                       |
| Place of Performance Zip+4     |                             |
| Description                    | construction                |
| Subrecipient                   | BRANDYWINE CONTRACTORS INC. |
| Period of Performance Start    | 4/1/2023                    |
| Period of Performance End      | 12/31/2026                  |

| Subaward Type                  | Contract: Purchase Order |  |
|--------------------------------|--------------------------|--|
| Subaward Obligation            | \$1,368,500.00           |  |
| Subaward Date                  | 4/1/2023                 |  |
| Place of Performance Address 1 | 100 Campus Dr            |  |
| Place of Performance Address 2 |                          |  |
| Place of Performance Address 3 |                          |  |
| Place of Performance City      | Dover                    |  |
| Place of Performance State     | DE                       |  |
| Place of Performance Zip       | 19904                    |  |
| Place of Performance Zip+4     |                          |  |
| Description                    | construction             |  |

| Subrecipient                | P&C Roofing |
|-----------------------------|-------------|
| Period of Performance Start | 4/1/2023    |
| Period of Performance End   | 12/31/2026  |

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$1,402,222.00           |
| Subaward Date                  | 4/1/2023                 |
| Place of Performance Address 1 | 100 Campus Dr            |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Dover                    |
| Place of Performance State     | DE                       |
| Place of Performance Zip       | 19904                    |
| Place of Performance Zip+4     |                          |
| Description                    | Construction             |
| Subrecipient                   | SUPERIOR ELECTRIC SVC CO |
| Period of Performance Start    | 4/1/2023                 |
| Period of Performance End      | 12/31/2026               |

## Subward No: 18659-24451

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$108,755.00             |
| Subaward Date                  | 4/1/2023                 |
| Place of Performance Address 1 | 100 Campus Dr            |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Dover                    |
| Place of Performance State     | DE                       |
| Place of Performance Zip       | 19904                    |
| Place of Performance Zip+4     |                          |
| Description                    | construction             |
| Subrecipient                   | UNION WHOLESALE COMPANY  |
| Period of Performance Start    | 4/1/2023                 |
| Period of Performance End      | 12/31/2026               |

| Subaward Type       | Contract: Purchase Order |
|---------------------|--------------------------|
| Subaward Obligation | \$53,941.71              |
|                     |                          |

| Subaward Date                  | 7/1/2023                     |
|--------------------------------|------------------------------|
| Place of Performance Address 1 | 100 Campus Dr                |
| Place of Performance Address 2 |                              |
| Place of Performance Address 3 |                              |
| Place of Performance City      | Dover                        |
| Place of Performance State     | DE                           |
| Place of Performance Zip       | 19904                        |
| Place of Performance Zip+4     |                              |
| Description                    | Temporary Employment Service |
| Subrecipient                   | SYNERFAC INC                 |
| Period of Performance Start    | 7/1/2023                     |
| Period of Performance End      | 9/30/2023                    |

| Subaward Type                  | Contract: Purchase Order       |
|--------------------------------|--------------------------------|
| Subaward Obligation            | \$176,924.91                   |
| Subaward Date                  | 7/1/2023                       |
| Place of Performance Address 1 | 612 S COLONIAL AVE             |
| Place of Performance Address 2 |                                |
| Place of Performance Address 3 |                                |
| Place of Performance City      | WILMINGTON                     |
| Place of Performance State     | DE                             |
| Place of Performance Zip       | 19805                          |
| Place of Performance Zip+4     |                                |
| Description                    | Technology Equipment           |
| Subrecipient                   | ARUGIE ENTERPRISES CORPORATION |
| Period of Performance Start    | 7/1/2023                       |
| Period of Performance End      | 12/31/2026                     |

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$782,867.00             |
| Subaward Date                  | 4/1/2023                 |
| Place of Performance Address 1 | 100 Campus Dr            |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Dover                    |
| Place of Performance State     | DE                       |
| Place of Performance Zip       | 19904                    |
|                                |                          |

| Place of Performance Zip+4  |  |
|-----------------------------|--|
| Description                 | DEMO WORK - PROJECT DTCC-C900404AHCOE<br>GEORGE - CONSTRUCTION |
| Subrecipient                | MID-ATLANTIC DISMANTLEMENT CORPORATION                         |
| Period of Performance Start | 4/1/2023   |
| Period of Performance End   | 12/31/2026   |

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$69,990.00   |
| Subaward Date                  | 10/1/2023   |
| Place of Performance Address 1 | 400 Stanton Christiana Rd d201                                      |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Newark  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19713   |
| Place of Performance Zip+4     |   |
| Description                    | Building Improvement A V EQUIPMENT AND INSTALL<br>FOR AHCOE PROJECT |
| Subrecipient                   | RMR Inc   |
| Period of Performance Start    | 10/1/2023   |
| Period of Performance End      | 12/31/2023  |

| Subaward Type                  | Contract: Purchase Order                   |
|--------------------------------|--|
| Subaward Obligation            | \$613,732.46                               |
| Subaward Date                  | 10/1/2023                                  |
| Place of Performance Address 1 | 400 Stanton Christiana Rd d201             |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Newark                                     |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19713                                      |
| Place of Performance Zip+4     |  |
| Description                    | Simulation Rooms - AHCOE Project           |
| Subrecipient                   | DELAWARE AUDIO VISUAL INTEGRATION & DESIGN |
| Period of Performance Start    | 10/1/2023                                  |
| Period of Performance End      | 12/31/2023                                 |

| Contract: Purchase Order          |
|-----------------------------------|
| \$1,209,643.50                    |
| 8/22/2022                         |
| 2 MILL RD STE 210                 |
|                                   |
|                                   |
| Wilmington                        |
| DE                                |
| 19806                             |
|                                   |
| Build of new Allied Health Center |
| TEVEBAUGH ASSO                    |
| 8/22/2022                         |
| 12/31/2024                        |
|                                   |

# Subward No: 18659-25644

| Subaward Type                  | Contract: Purchase Order          |
|--------------------------------|-----------------------------------|
| Subaward Obligation            | \$1,956,922.00                    |
| Subaward Date                  | 8/5/2022                          |
| Place of Performance Address 1 | PO Box 2697                       |
| Place of Performance Address 2 |                                   |
| Place of Performance Address 3 |                                   |
| Place of Performance City      | Wilmington                        |
| Place of Performance State     | DE                                |
| Place of Performance Zip       | 19805                             |
| Place of Performance Zip+4     | 0697                              |
| Description                    | Build of new allied health center |
| Subrecipient                   | EDIS COMPANY                      |
| Period of Performance Start    | 8/5/2022                          |
| Period of Performance End      | 12/31/2024                        |

# Subward No: 18660-13740

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$4,713,944.22           |
| Subaward Date                  | 3/1/2023                 |
| Place of Performance Address 1 | 202 S WADE BLVD          |
| Place of Performance Address 2 |                          |
|                                |                          |

| Place of Performance Address 3 |   |
|--------------------------------|---|
| Place of Performance City      | MILLVILLE   |
| Place of Performance State     | NJ  |
| Place of Performance Zip       | 08332   |
| Place of Performance Zip+4     |   |
| Description                    | Project DTCC-C94624022 HVAC ETB Building<br>Improvement |
| Subrecipient                   | GAUDELLI BROTHERS INC                                   |
| Period of Performance Start    | 3/1/2023  |
| Period of Performance End      | 12/31/2026  |

## Subward No: 18660-26461

| Subaward Type                  | Contract: Purchase Order               |
|--------------------------------|--|
| Subaward Obligation            | \$0.00                                 |
| Subaward Date                  | 8/5/2022                               |
| Place of Performance Address 1 | 2 MILL RD STE 210                      |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Wilmington                             |
| Place of Performance State     | DE                                     |
| Place of Performance Zip       | 19806                                  |
| Place of Performance Zip+4     |  |
| Description                    | Design and install of new HVAC system. |
| Subrecipient                   | TEVEBAUGH ASSO                         |
| Period of Performance Start    | 8/5/2022                               |
| Period of Performance End      | 12/31/2024                             |

#### Subward No: 18660-29838

| Subaward Type                  | Contract: Purchase Order       |  |
|--------------------------------|--------------------------------|--|
| Subaward Obligation            | \$564,560.00                   |  |
| Subaward Date                  | 6/3/2022                       |  |
| Place of Performance Address 1 | 8719 Brooks Drive              |  |
| Place of Performance Address 2 |                                |  |
| Place of Performance Address 3 |                                |  |
| Place of Performance City      | Easton                         |  |
| Place of Performance State     | MD                             |  |
| Place of Performance Zip       | 21601                          |  |
| Place of Performance Zip+4     |                                |  |
| Description                    | Construction/Building Services |  |
|                                |                                |  |

| Subrecipient                | GIPE ASSOC INC |
|-----------------------------|----------------|
| Period of Performance Start | 6/3/2022       |
| Period of Performance End   | 12/31/2024     |

| Subaward Type                  | Contract: Purchase Order   |
|--------------------------------|--|
| Subaward Obligation            | \$52,500.00  |
| Subaward Date                  | 7/12/2022  |
| Place of Performance Address 1 | 400 Stanton Christiana Rd  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Newark   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19713  |
| Place of Performance Zip+4     |  |
| Description                    | CO#1 Preconstruction services  |
| Subrecipient                   | WOHLSEN CONSTRUCTION COMPANY   |
| Period of Performance Start    | 7/12/2022  |
| Period of Performance End      | 12/31/2026   |
| Primary Sector                 | educational work, school nutrition work, and other work<br>required to operate a school facility |
| Purpose of Funds               | Building Improvement   |

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$162,220.66  |
| Subaward Date                  | 10/1/2023   |
| Place of Performance Address 1 | 400 Stanton Christiana Rd d201                                  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Newark  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19713   |
| Place of Performance Zip+4     |   |
| Description                    | construction services   |
| Subrecipient                   | ENTERPRISE MASONRY CORPORATION                                  |
| Period of Performance Start    | 10/1/2023   |
| Period of Performance End      | 12/31/2023  |
| Primary Sector                 | grocery stores, restaurants, food production, and food delivery |

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$300,000.00  |
| Subaward Date                  | 10/1/2023   |
| Place of Performance Address 1 | 400 Stanton Christiana Rd d201                                  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Newark  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19713   |
| Place of Performance Zip+4     |   |
| Description                    | construction services   |
| Subrecipient                   | SUPERIOR ELECTRIC SVC CO  |
| Period of Performance Start    | 10/1/2023   |
| Period of Performance End      | 12/31/2023  |
| Primary Sector                 | grocery stores, restaurants, food production, and food delivery |
| Purpose of Funds               | Culinary program facility                                       |

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$200,000.00  |
| Subaward Date                  | 10/1/2023   |
| Place of Performance Address 1 | 400 Stanton Christiana Rd d201                                  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Newark  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19713   |
| Place of Performance Zip+4     |   |
| Description                    | construction services   |
| Subrecipient                   | R C FABRICATORS INC   |
| Period of Performance Start    | 10/1/2023   |
| Period of Performance End      | 12/31/2023  |
| Primary Sector                 | grocery stores, restaurants, food production, and food delivery |
| Purpose of Funds               | Culinary program facility                                       |

| Subaward Type                  | Contract: Purchase Order                      |
|--------------------------------|---|
| Subaward Obligation            | \$675,531.77                                  |
| Subaward Date                  | 8/5/2022                                      |
| Place of Performance Address 1 | 954 JUSTISON STREET                           |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | New Castle                                    |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19801   |
| Place of Performance Zip+4     |   |
| Description                    | design and build of new culinary arts center. |
| Subrecipient                   | BUCK SIMPERS ARCHITECT AND ASSOCIATES         |
| Period of Performance Start    | 8/5/2022                                      |
| Period of Performance End      | 12/31/2024                                    |
| Primary Sector                 | Other   |
| Purpose of Funds               | Design for new site                           |

#### Subward No: 18657-26428

| Subaward Type                  | Contract: Purchase Order   |
|--------------------------------|--|
| Subaward Obligation            | \$82,629.58  |
| Subaward Date                  | 6/9/2022   |
| Place of Performance Address 1 | 200 CONTINENTAL DRIVE  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Newark   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19713  |
| Place of Performance Zip+4     |  |
| Description                    | Engineering Services for building construction planning  |
| Subrecipient                   | LANDMARK ENGINEERING INC   |
| Period of Performance Start    | 6/9/2022   |
| Period of Performance End      | 12/31/2024   |
| Primary Sector                 | educational work, school nutrition work, and other work<br>required to operate a school facility |
| Purpose of Funds               | Culinary Education Program   |

#### Subward No: 18395-25395

| Subaward Type | Contract: Purchase Order |
|---------------|--------------------------|
|               | I                        |

| Subaward Obligation            | \$562,500.00   |
|--------------------------------|--|
| Subaward Date                  | 11/16/2022   |
| Place of Performance Address 1 | 2500 WRANGLE HILL RD STE 110   |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | BEAR   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19701  |
| Place of Performance Zip+4     |  |
| Description                    | PC-22-007 early childhood innovation center. Architectural<br>and Engineering services related to the new Early<br>ChildhoodInnovation Center. |
| Subrecipient                   | Jaed Corp  |
| Period of Performance Start    | 11/16/2022   |
| Period of Performance End      | 12/31/2026   |

#### Subward No: 18395-25644

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$1,790,606.00           |
| Subaward Date                  | 10/1/2023                |
| Place of Performance Address 1 | 1570 N Dupont Hwy        |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Dover                    |
| Place of Performance State     | DE                       |
| Place of Performance Zip       | 19901                    |
| Place of Performance Zip+4     |                          |
| Description                    | engineering services     |
| Subrecipient                   | EDIS COMPANY             |
| Period of Performance Start    | 10/1/2023                |
| Period of Performance End      | 12/31/2023               |

## Subward No: 18395-28959

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$798,500.00             |
| Subaward Date                  | 10/1/2023                |
| Place of Performance Address 1 | 1570 N Dupont Hwy        |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Dover                    |

| Place of Performance State  | DE                       |
|-----------------------------|--------------------------|
| Place of Performance Zip    | 19901                    |
| Place of Performance Zip+4  |                          |
| Description                 | construction services    |
| Subrecipient                | GATEWAY CONSTRUCTION INC |
| Period of Performance Start | 10/1/2023                |
| Period of Performance End   | 12/31/2023               |

# Subward No: 18395-644508

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$85,400.00   |
| Subaward Date                  | 10/1/2023   |
| Place of Performance Address 1 | 1570 N Dupont Hwy   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Dover   |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19901   |
| Place of Performance Zip+4     |   |
| Description                    | services related to the construction consultation and field<br>review services for the new Early Childhood Innovation<br>Center |
| Subrecipient                   | VERDANTAS LLC NATIONAL EC SERVICES INC DBA  |
| Period of Performance Start    | 10/1/2023   |
| Period of Performance End      | 12/31/2023  |

# Subward No: 18781-31036

| Subaward Type                  | Contract: Purchase Order       |
|--------------------------------|--------------------------------|
| Subaward Obligation            | \$2,198,000.00                 |
| Subaward Date                  | 10/14/2022                     |
| Place of Performance Address 1 | 226 S State St                 |
| Place of Performance Address 2 |                                |
| Place of Performance Address 3 |                                |
| Place of Performance City      | Dover                          |
| Place of Performance State     | DE                             |
| Place of Performance Zip       | 19901                          |
| Place of Performance Zip+4     |                                |
| Description                    | Swartz Center- chiller repairs |
| Subrecipient                   | JOSEPH T RICHARDSON INC        |
| Period of Performance Start    | 10/14/2022                     |

## Subward No: 18781-24293

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$146,638.00             |
| Subaward Date                  | 2/23/2023                |
| Place of Performance Address 1 | 735 S MARKET ST          |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Wilmington               |
| Place of Performance State     | DE                       |
| Place of Performance Zip       | 19801                    |
| Place of Performance Zip+4     |                          |
| Description                    | HVAC Contract services   |
| Subrecipient                   | ID GRIFFITH INC          |
| Period of Performance Start    | 2/23/2023                |
| Period of Performance End      | 12/31/2026               |

## Subward No: 18781-25612

| Subaward Type                  | Contract: Purchase Order   |
|--------------------------------|--|
| Subaward Obligation            | \$57,852.57  |
| Subaward Date                  | 7/1/2023   |
| Place of Performance Address 1 | 1200 N. DuPont Highway   |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Dov  |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19901  |
| Place of Performance Zip+4     |  |
| Description                    | Campus Wide- service and support on building automation system to include any needed repairs to hardware and software. |
| Subrecipient                   | ADVANCED POWER CONTROL INC   |
| Period of Performance Start    | 7/1/2023   |
| Period of Performance End      | 12/31/2026   |

#### Subward No: 18781-22859

| Subaward Type       | Contract: Purchase Order |
|---------------------|--------------------------|
| Subaward Obligation | \$439,293.54             |
| Subaward Date       | 7/1/2023                 |

| Place of Performance Address 1 | 1200 N. DuPont Highway |
|--------------------------------|------------------------|
| Place of Performance Address 2 |                        |
| Place of Performance Address 3 |                        |
| Place of Performance City      | Dover                  |
| Place of Performance State     | DE                     |
| Place of Performance Zip       | 19901                  |
| Place of Performance Zip+4     |                        |
| Description                    | Fire protection        |
| Subrecipient                   | JOHNSON CONTROLS INC   |
| Period of Performance Start    | 7/1/2023               |
| Period of Performance End      | 12/31/2026             |

## Subward No: 18781-278591

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$397,703.63             |
| Subaward Date                  | 9/1/2022                 |
| Place of Performance Address 1 | 134 Maple Leaf Court     |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Glassboro                |
| Place of Performance State     | NJ                       |
| Place of Performance Zip       | 08028                    |
| Place of Performance Zip+4     |                          |
| Description                    | HVAC contractor          |
| Subrecipient                   | A A DUCKETT              |
| Period of Performance Start    | 9/1/2022                 |
| Period of Performance End      | 12/31/2026               |

# Subward No: 18781-2124

| Subaward Type                  | Contract: Purchase Order |  |
|--------------------------------|--------------------------|--|
| Subaward Obligation            | \$56,680.00              |  |
| Subaward Date                  | 9/1/2022                 |  |
| Place of Performance Address 1 | 1285 College Park Dr.    |  |
| Place of Performance Address 2 |                          |  |
| Place of Performance Address 3 |                          |  |
| Place of Performance City      | Dover                    |  |
| Place of Performance State     | DE                       |  |
| Place of Performance Zip       | 19904                    |  |
| Place of Performance Zip+4     |                          |  |

| Description                 | HVAC contractor       |
|-----------------------------|-----------------------|
| Subrecipient                | SID HARVEY INDUSTRIES |
| Period of Performance Start | 9/1/2022              |
| Period of Performance End   | 12/31/2026            |

# Subward No: 18781-26820

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$2,042,234.69           |
| Subaward Date                  | 9/1/2022                 |
| Place of Performance Address 1 | 7 Bellecor Drive         |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | New Castle               |
| Place of Performance State     | DE                       |
| Place of Performance Zip       | 19720                    |
| Place of Performance Zip+4     |                          |
| Description                    | HVAC contractor          |
| Subrecipient                   | MODERN CONTROLS          |
| Period of Performance Start    | 9/1/2022                 |
| Period of Performance End      | 12/31/2026               |

## Subward No: 18783-358193

| Subaward Type                  | Contract: Purchase Order                          |
|--------------------------------|---|
| Subaward Obligation            | \$3,135,264.30                                    |
| Subaward Date                  | 12/22/2022  |
| Place of Performance Address 1 | 26 SHEFFIELD MANOR DR                             |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Newark  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19711   |
| Place of Performance Zip+4     |   |
| Description                    | IT camera equipment classroom upgrade initiative. |
| Subrecipient                   | NETSTREAM TECHNOLOGY INC                          |
| Period of Performance Start    | 12/22/2022  |
| Period of Performance End      | 12/31/2026  |

# Subward No: 18783-20739

| Subaward Type | Contract: Purchase Order |
|---------------|--------------------------|
|               |                          |

| Subaward Obligation            | \$2,500,000.00                  |
|--------------------------------|---------------------------------|
| Subaward Date                  | 12/22/2022                      |
| Place of Performance Address 1 | 590 Century Blvd Suite B        |
| Place of Performance Address 2 |                                 |
| Place of Performance Address 3 |                                 |
| Place of Performance City      | Wilmington                      |
| Place of Performance State     | DE                              |
| Place of Performance Zip       | 19808                           |
| Place of Performance Zip+4     |                                 |
| Description                    | IT classroom technology upgrade |
| Subrecipient                   | ASSURANCE MEDIA LLC             |
| Period of Performance Start    | 12/22/2022                      |
| Period of Performance End      | 12/31/2026                      |

## Subward No: 18783-32833

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$744,586.45             |
| Subaward Date                  | 3/16/2023                |
| Place of Performance Address 1 | 6301 BENJAMIN ROAD       |
| Place of Performance Address 2 | Suite 101                |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Tampa                    |
| Place of Performance State     | FL                       |
| Place of Performance Zip       | 33634                    |
| Place of Performance Zip+4     |                          |
| Description                    | IT equipment purchase    |
| Subrecipient                   | AVI-SPL LLC              |
| Period of Performance Start    | 3/16/2023                |
| Period of Performance End      | 12/31/2026               |

## Subward No: 18783-22347

| Subaward Type                  | Contract: Purchase Order |  |
|--------------------------------|--------------------------|--|
| Subaward Obligation            | \$199,101.08             |  |
| Subaward Date                  | 2/22/2023                |  |
| Place of Performance Address 1 | 230 N Milwaukee AVE      |  |
| Place of Performance Address 2 |                          |  |
| Place of Performance Address 3 |                          |  |
| Place of Performance City      | Vernon Hills             |  |
| Place of Performance State     | IL                       |  |
|                                |                          |  |

| Place of Performance Zip    | 60061  |
|-----------------------------|--|
| Place of Performance Zip+4  |  |
| Description                 | IT Cisco Meraki Access Points, software licenses, and accessories for the classrooms |
| Subrecipient                | CDW GOVERNMENT LLC   |
| Period of Performance Start | 2/22/2023  |
| Period of Performance End   | 12/31/2026   |

# Subward No: 18783-32193

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$150,000.00             |
| Subaward Date                  | 4/1/2023                 |
| Place of Performance Address 1 | 3782 BARRATTS CHAPEL RD  |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | FREDERICA                |
| Place of Performance State     | DE                       |
| Place of Performance Zip       | 19946                    |
| Place of Performance Zip+4     |                          |
| Description                    | Electrical work          |
| Subrecipient                   | R & R ELECTRIC INC       |
| Period of Performance Start    | 4/1/2023                 |
| Period of Performance End      | 12/31/2026               |

## Subward No: 18783-544518

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$149,975.00             |
| Subaward Date                  | 4/1/2023                 |
| Place of Performance Address 1 | PO BOX 805               |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | MILFORD                  |
| Place of Performance State     | DE                       |
| Place of Performance Zip       | 19963                    |
| Place of Performance Zip+4     |                          |
| Description                    | construction             |
| Subrecipient                   | THE RESTORATION GUYS LLC |
| Period of Performance Start    | 4/1/2023                 |
| Period of Performance End      | 12/31/2026               |

#### Subward No: 18783-33778

| Subaward Type                  | Contract: Purchase Order |  |
|--------------------------------|--------------------------|--|
| Subaward Obligation            | \$408,558.10             |  |
| Subaward Date                  | 9/1/2022                 |  |
| Place of Performance Address 1 | ONE DELL WAY             |  |
| Place of Performance Address 2 |                          |  |
| Place of Performance Address 3 |                          |  |
| Place of Performance City      | ROUND ROCK               |  |
| Place of Performance State     | TX                       |  |
| Place of Performance Zip       | 78682                    |  |
| Place of Performance Zip+4     |                          |  |
| Description                    | technology upgrades      |  |
| Subrecipient                   | DELL MARKETING LP        |  |
| Period of Performance Start    | 9/14/2022                |  |
| Period of Performance End      | 12/31/2026               |  |

## Subward No: 18720-593461

| Subaward Type                  | Direct Payment   |
|--------------------------------|--|
| Subaward Obligation            | \$50,783.64  |
| Subaward Date                  | 7/1/2023   |
| Place of Performance Address 1 | 101 W BROADWAY SUITE 1770  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | SAN DIEGO  |
| Place of Performance State     | CA   |
| Place of Performance Zip       | 92101  |
| Place of Performance Zip+4     |  |
| Description                    | Strategic Planning process facilitated by technical assistance<br>providers from the Alliance for Hope, planning sessions with<br>the Steering Committee, discussions with victim-serving<br>community partners and other community organizations;<br>focus groups with survivors; discussions and interviews with<br>community stakeholders; data collection; policy<br>development; and other planning activities. |
| Subrecipient                   | ALLIANCE FOR HOPE INTERNATIONAL  |
| Period of Performance Start    | 7/1/2023   |
| Period of Performance End      | 9/30/2023  |

## Subward No: 18780-9001020000

| Subaward Type       | Contract: Purchase Order |
|---------------------|--------------------------|
| Subaward Obligation | \$210,000.00             |

| Subaward Date                  | 4/1/2023                   |
|--------------------------------|----------------------------|
| Place of Performance Address 1 | University of Delaware     |
| Place of Performance Address 2 |                            |
| Place of Performance Address 3 |                            |
| Place of Performance City      | Newark                     |
| Place of Performance State     | DE                         |
| Place of Performance Zip       | 19716                      |
| Place of Performance Zip+4     |                            |
| Description                    | Geological surveying       |
| Subrecipient                   | DELAWARE GEOLOGICAL SURVEY |
| Period of Performance Start    | 4/1/2023                   |
| Period of Performance End      | 12/31/2026                 |

## Subward No: 18780-2867

| Subaward Type                  | Contract: Purchase Order                      |
|--------------------------------|---|
| Subaward Obligation            | \$265,225.88                                  |
| Subaward Date                  | 3/24/2022                                     |
| Place of Performance Address 1 | 801 Silver Lake Blvd                          |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Dover   |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19901   |
| Place of Performance Zip+4     |   |
| Description                    | provide digital platform for State facilities |
| Subrecipient                   | Sandborn Map                                  |
| Period of Performance Start    | 3/24/2022                                     |
| Period of Performance End      | 4/30/2025                                     |
| Primary Sector                 | Other   |
| Purpose of Funds               | provide a digital government platform         |

### Subward No: 18813-641089

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$754,375.50             |
| Subaward Date                  | 1/1/2023                 |
| Place of Performance Address 1 | 7950 LEGACY BLVD         |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | PLANO                    |
|                                |                          |

| Place of Performance State  | TX                       |
|-----------------------------|--------------------------|
| Place of Performance Zip    | 75024                    |
| Place of Performance Zip+4  |                          |
| Description                 | IT Professional Services |
| Subrecipient                | NTT DATA INC             |
| Period of Performance Start | 1/1/2023                 |
| Period of Performance End   | 12/31/2026               |

# Subward No: 18813-20739

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$66,371.88              |
| Subaward Date                  | 8/24/2022                |
| Place of Performance Address 1 | 590 Century Blvd Suite B |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Wilmington               |
| Place of Performance State     | DE                       |
| Place of Performance Zip       | 19808                    |
| Place of Performance Zip+4     |                          |
| Description                    | telecommunications       |
| Subrecipient                   | ASSURANCE MEDIA LLC      |
| Period of Performance Start    | 8/24/2022                |
| Period of Performance End      | 12/31/2026               |

# Subward No: 18813-26171

| Subaward Type                  | Contract: Purchase Order                             |
|--------------------------------|--|
| Subaward Obligation            | \$225,132.76   |
| Subaward Date                  | 3/24/2022  |
| Place of Performance Address 1 | 801 Silver Lake Blvd                                 |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Dover  |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19901  |
| Place of Performance Zip+4     |  |
| Description                    | provide updated meeting rooms with modern technology |
| Subrecipient                   | Versalign  |
| Period of Performance Start    | 3/24/2022  |
| Period of Performance End      | 4/30/2025  |

| Primary Sector   | Other                                 |
|------------------|---------------------------------------|
| Purpose of Funds | update meeting rooms across the state |

#### Subward No: 18813-343830

| Subaward Type                  | Contract: Purchase Order                             |
|--------------------------------|--|
| Subaward Obligation            | \$0.00   |
| Subaward Date                  | 2/18/2022  |
| Place of Performance Address 1 | 801 Silver Lake Blvd                                 |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Dover  |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19901  |
| Place of Performance Zip+4     |  |
| Description                    | provide updated meeting rooms with modern technology |
| Subrecipient                   | STRATEGIC COMMUNICATIONS LLC                         |
| Period of Performance Start    | 2/18/2022  |
| Period of Performance End      | 4/30/2025  |
| Primary Sector                 | Other  |
| Purpose of Funds               | update meeting rooms across the state                |

# Subward No: 18897-483193

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$3,215,720.00           |
| Subaward Date                  | 1/1/2023                 |
| Place of Performance Address 1 | 330 WASHINGTON STREET    |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Hoboken                  |
| Place of Performance State     | NJ                       |
| Place of Performance Zip       | 07030                    |
| Place of Performance Zip+4     |                          |
| Description                    | IT Professional Services |
| Subrecipient                   | BREAKLINE DIGITAL LLC    |
| Period of Performance Start    | 1/1/2023                 |
| Period of Performance End      | 12/31/2026               |

| Subaward Type | Contract: Purchase Order |
|---------------|--------------------------|
|               |                          |

| Subaward Obligation            | \$119,366.72           |
|--------------------------------|------------------------|
| Subaward Date                  | 7/27/2022              |
| Place of Performance Address 1 | PO BOX 952121          |
| Place of Performance Address 2 |                        |
| Place of Performance Address 3 |                        |
| Place of Performance City      | Dallas                 |
| Place of Performance State     | TX                     |
| Place of Performance Zip       | 75395                  |
| Place of Performance Zip+4     |                        |
| Description                    | Technology services    |
| Subrecipient                   | SHI INTERNATIONAL CORP |
| Period of Performance Start    | 7/27/2022              |
| Period of Performance End      | 12/31/2026             |

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$222,256.62  |
| Subaward Date                  | 10/1/2023   |
| Place of Performance Address 1 | 2701 E. Insight WAY   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Chandler  |
| Place of Performance State     | AZ  |
| Place of Performance Zip       | 85286   |
| Place of Performance Zip+4     |   |
| Description                    | AppDynamics training & monitoring tool & services / IT<br>Professional Services |
| Subrecipient                   | INSIGHT PUBLIC SECTOR   |
| Period of Performance Start    | 10/1/2023   |
| Period of Performance End      | 12/31/2026  |

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---------------------------|
| Subaward Obligation            | \$1,939,443.74            |
| Subaward Date                  | 8/2/2022                  |
| Place of Performance Address 1 | 1700 Market St Suite 1005 |
| Place of Performance Address 2 |                           |
| Place of Performance Address 3 |                           |
| Place of Performance City      | Philadelphia              |
|                                |                           |

| Place of Performance State  | PA                                   |
|-----------------------------|--------------------------------------|
| Place of Performance Zip    | 19103                                |
| Place of Performance Zip+4  |                                      |
| Description                 | IT professional services             |
| Subrecipient                | GUIDESOFT INC DBA KNOWLEDGE SERVICES |
| Period of Performance Start | 8/2/2022                             |
| Period of Performance End   | 12/31/2026                           |

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$58,240.00   |
| Subaward Date                  | 4/1/2022  |
| Place of Performance Address 1 | 802 Silver Lake Blvd  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Dover   |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19901   |
| Place of Performance Zip+4     |   |
| Description                    | The Digital Government Platform Foundation Program sets<br>out to deliver a device agnostic user-friendly experience for<br>Delaware's residence and visitors. Considerable effort will<br>be given to the design and incorporation of key software<br>components that provide a human centric User Interface (UI)<br>and User Experience (UX). This includes implementing<br>agency services and upgrading the agencies; backend<br>systems to utilize the portal/foundation. All agencies will be<br>able to ¿plug in; to the foundation (over time) to deliver<br>their services via the single portal/app. Various technical and<br>program contractors will be needed to complete these<br>projects. |
| Subrecipient                   | PROGRESSIVE SOFTWARE COMP INC   |
| Period of Performance Start    | 4/1/2022  |
| Period of Performance End      | 12/31/2024  |

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$535,623.02             |
| Subaward Date                  | 4/1/2022                 |
| Place of Performance Address 1 | 1390 Ridgeview Dr        |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Allentown                |
|                                |                          |

| Place of Performance State  | PA  |
|-----------------------------|---|
| Place of Performance Zip    | 18104   |
| Place of Performance Zip+4  |   |
| Description                 | The Digital Government Platform Foundation Program sets<br>out to deliver a device agnostic user-friendly experience for<br>Delaware's residence and visitors. Considerable effort will<br>be given to the design and incorporation of key software<br>components that provide a human centric User Interface (UI)<br>and User Experience (UX). This includes implementing<br>agency services and upgrading the agencies' backend<br>systems to utilize the portal/foundation. All agencies will be<br>able to plug in to the foundation (over time) to deliver their<br>services via the single portal/app. Various technical and<br>program contractors will be needed to complete these<br>projects. |
| Subrecipient                | COMPUTER AID INC  |
| Period of Performance Start | 4/1/2022  |
| Period of Performance End   | 12/31/2024  |

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$2,201,726.30  |
| Subaward Date                  | 4/1/2022  |
| Place of Performance Address 1 | 11493 SUNSET HILLS ROAD   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | RESTON  |
| Place of Performance State     | VA  |
| Place of Performance Zip       | 20190   |
| Place of Performance Zip+4     |   |
| Description                    | The Digital Government Platform Foundation Program sets<br>out to deliver a device agnostic user-friendly experience for<br>Delaware;s residence and visitors. Considerable effort will<br>be given to the design and incorporation of key software<br>components that provide a human centric User Interface (UI)<br>and User Experience (UX). This includes implementing<br>agency services and upgrading the agencies; backend<br>systems to utilize the portal/foundation. All agencies will be<br>able to ;plug in; to the foundation (over time) to deliver<br>their services via the single portal/app. Various technical and<br>program contractors will be needed to complete these<br>projects. |
| Subrecipient                   | CARAHSOFT TECHNOLOGY CORPORATION  |
| Period of Performance Start    | 4/1/2022  |
| Period of Performance End      | 12/31/2024  |

1

1

| Subaward Type                  | Direct Payment       |  |
|--------------------------------|----------------------|--|
| Subaward Obligation            | \$56,023.41          |  |
| Subaward Date                  | 2/1/2022             |  |
| Place of Performance Address 1 | 875 PULASKI HIGHWAY  |  |
| Place of Performance Address 2 |                      |  |
| Place of Performance Address 3 |                      |  |
| Place of Performance City      | Bear                 |  |
| Place of Performance State     | DE                   |  |
| Place of Performance Zip       | 19701                |  |
| Place of Performance Zip+4     |                      |  |
| Description                    | Emergency Housing    |  |
| Subrecipient                   | BEAR HOSPITALITY LLC |  |
| Period of Performance Start    | 2/1/2022             |  |
| Period of Performance End      | 12/31/2024           |  |

| Subaward Type                  | Direct Payment    |
|--------------------------------|-------------------|
| Subaward Obligation            | \$74,091.00       |
| Subaward Date                  | 2/1/2022          |
| Place of Performance Address 1 | 140 S Dupont Hwy  |
| Place of Performance Address 2 |                   |
| Place of Performance Address 3 |                   |
| Place of Performance City      | New Castle        |
| Place of Performance State     | DE                |
| Place of Performance Zip       | 19720             |
| Place of Performance Zip+4     |                   |
| Description                    | emergency housing |
| Subrecipient                   | JAY GANESH LLC    |
| Period of Performance Start    | 2/1/2022          |
| Period of Performance End      | 12/31/2024        |

| Subaward Type                  | Direct Payment |
|--------------------------------|----------------|
| Subaward Obligation            | \$65,304.00    |
| Subaward Date                  | 2/1/2022       |
| Place of Performance Address 1 | 100 Rudder Rd  |
| Place of Performance Address 2 |                |
| Place of Performance Address 3 |                |
| Place of Performance City      | Millsboro      |
|                                |                |

| Place of Performance State  | DE                   |
|-----------------------------|----------------------|
| Place of Performance Zip    | 19966                |
| Place of Performance Zip+4  |                      |
| Description                 | emergency housing    |
| Subrecipient                | JKSJ HOSPITALITY INC |
| Period of Performance Start | 2/1/2022             |
| Period of Performance End   | 12/31/2024           |

| Subaward Type                  | Direct Payment         |
|--------------------------------|------------------------|
| Subaward Obligation            | \$76,665.00            |
| Subaward Date                  | 2/1/2022               |
| Place of Performance Address 1 | 3306 Philadelphia Pike |
| Place of Performance Address 2 |                        |
| Place of Performance Address 3 |                        |
| Place of Performance City      | Claymont               |
| Place of Performance State     | DE                     |
| Place of Performance Zip       | 19703                  |
| Place of Performance Zip+4     |                        |
| Description                    | emergency housing      |
| Subrecipient                   | RISHI HOSPITALITY LLC  |
| Period of Performance Start    | 2/1/2022               |
| Period of Performance End      | 12/31/2024             |

| Subaward Type                  | Direct Payment                                |
|--------------------------------|---|
| Subaward Obligation            | \$976,671.00                                  |
| Subaward Date                  | 4/1/2022                                      |
| Place of Performance Address 1 | 23450 SUSSEX HWY                              |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Seaford                                       |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19973   |
| Place of Performance Zip+4     |   |
| Description                    | Emergency Housing payments, hotel/motel stays |
| Subrecipient                   | MALL AND SONS LLC                             |
| Period of Performance Start    | 6/30/2022                                     |
| Period of Performance End      | 12/31/2024                                    |

| Subaward Type                  | Direct Payment                             |
|--------------------------------|--|
| Subaward Obligation            | \$439,414.74                               |
| Subaward Date                  | 2/1/2022                                   |
| Place of Performance Address 1 | 20762 DuPont Blvd                          |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Georgetown                                 |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19947                                      |
| Place of Performance Zip+4     |  |
| Description                    | emergency housing costs, hotel/motel stays |
| Subrecipient                   | BHAVANI HOSPITALITY INC                    |
| Period of Performance Start    | 2/1/2022                                   |
| Period of Performance End      | 12/31/2024                                 |

### Subward No: 18598-583623

| Subaward Type                  | Direct Payment                                |
|--------------------------------|---|
| Subaward Obligation            | \$846,253.75                                  |
| Subaward Date                  | 2/1/2022                                      |
| Place of Performance Address 1 | 365 Airport Road                              |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | New Castle                                    |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19720   |
| Place of Performance Zip+4     |   |
| Description                    | Emergency Housing payments, hotel/motel stays |
| Subrecipient                   | HERSHA HOSPITALITY MANAGEMENT                 |
| Period of Performance Start    | 2/1/2022                                      |
| Period of Performance End      | 12/31/2024                                    |

| Subaward Type                  | Direct Payment     |
|--------------------------------|--------------------|
| Subaward Obligation            | \$583,955.95       |
| Subaward Date                  | 2/1/2022           |
| Place of Performance Address 1 | 1119 S College Ave |
| Place of Performance Address 2 |                    |
|                                |                    |

| Place of Performance Address 3 |   |
|--------------------------------|---|
| Place of Performance City      | Newark  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19713   |
| Place of Performance Zip+4     |   |
| Description                    | Emergency Housing payments, hotel/motel stays |
| Subrecipient                   | SHRI SWAMI NARAYAN LLC                        |
| Period of Performance Start    | 2/1/2022                                      |
| Period of Performance End      | 12/31/2024                                    |

| Subaward Type                  | Direct Payment                             |
|--------------------------------|--|
| Subaward Obligation            | \$574,035.00                               |
| Subaward Date                  | 2/1/2022                                   |
| Place of Performance Address 1 | 1426 N DuPont Highway                      |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Dover                                      |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19901                                      |
| Place of Performance Zip+4     |  |
| Description                    | emergency housing costs, hotel/motel stays |
| Subrecipient                   | DOVER BUDGET INN INC                       |
| Period of Performance Start    | 2/1/2022                                   |
| Period of Performance End      | 12/31/2024                                 |

| Subaward Type                  | Direct Payment                             |
|--------------------------------|--|
| Subaward Obligation            | \$486,337.00                               |
| Subaward Date                  | 2/1/2022                                   |
| Place of Performance Address 1 | 1612 North Dupont Hwy                      |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | New Castle                                 |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19720                                      |
| Place of Performance Zip+4     |  |
| Description                    | emergency housing costs, hotel/motel stays |
| Subrecipient                   | LABURNUM HOSPITALITY LLC                   |

| Period of Performance Start | 2/1/2022   |
|-----------------------------|------------|
| Period of Performance End   | 12/31/2024 |

| Subaward Type                  | Direct Payment                             |
|--------------------------------|--|
| Subaward Obligation            | \$424,015.00                               |
| Subaward Date                  | 2/1/2022                                   |
| Place of Performance Address 1 | 16218 Coastal Hwy                          |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Lewes                                      |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19958                                      |
| Place of Performance Zip+4     |  |
| Description                    | emergency housing costs, hotel/motel stays |
| Subrecipient                   | MALL MANAGEMENT LLC                        |
| Period of Performance Start    | 2/1/2022                                   |
| Period of Performance End      | 12/31/2024                                 |

#### Subward No: 18598-319890

| Subaward Type                  | Direct Payment                             |
|--------------------------------|--|
| Subaward Obligation            | \$399,769.00                               |
| Subaward Date                  | 2/1/2022                                   |
| Place of Performance Address 1 | 17010 S DuPont Highway                     |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Harrington                                 |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19952                                      |
| Place of Performance Zip+4     |  |
| Description                    | emergency housing costs, hotel/motel stays |
| Subrecipient                   | RP HOSPITALITY LLC                         |
| Period of Performance Start    | 2/1/2022                                   |
| Period of Performance End      | 12/31/2024                                 |

| Subaward Type       | Direct Payment |
|---------------------|----------------|
| Subaward Obligation | \$337,187.00   |
| Subaward Date       | 2/1/2022       |
|                     |                |

| Place of Performance Address 1 | 22512 Sussex Highway                       |
|--------------------------------|--|
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Seaford                                    |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19973                                      |
| Place of Performance Zip+4     |  |
| Description                    | emergency housing costs, hotel/motel stays |
| Subrecipient                   | SAS DE LLC                                 |
| Period of Performance Start    | 2/1/2022                                   |
| Period of Performance End      | 12/31/2024                                 |

| Subaward Type                  | Direct Payment                             |
|--------------------------------|--|
| Subaward Obligation            | \$200,943.00                               |
| Subaward Date                  | 2/1/2022                                   |
| Place of Performance Address 1 | 1213 West Ave                              |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | New Castle                                 |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19720                                      |
| Place of Performance Zip+4     |  |
| Description                    | emergency housing costs, hotel/motel stays |
| Subrecipient                   | AATMEEYA HOSPITALITIES LLC                 |
| Period of Performance Start    | 2/1/2022                                   |
| Period of Performance End      | 12/31/2024                                 |

| Subaward Type                  | Direct Payment |  |
|--------------------------------|----------------|--|
| Subaward Obligation            | \$108,821.00   |  |
| Subaward Date                  | 2/1/2022       |  |
| Place of Performance Address 1 | 1120 S College |  |
| Place of Performance Address 2 |                |  |
| Place of Performance Address 3 |                |  |
| Place of Performance City      | Newark         |  |
| Place of Performance State     | DE             |  |
| Place of Performance Zip       | 19713          |  |
| Place of Performance Zip+4     |                |  |

| Description                 | emergency house, hotel/motel stay costs |
|-----------------------------|---|
| Subrecipient                | BHAVI MOTEL LLC                         |
| Period of Performance Start | 2/1/2022                                |
| Period of Performance End   | 12/31/2024                              |

| Subaward Type                  | Direct Payment                          |
|--------------------------------|---|
| Subaward Obligation            | \$112,653.48                            |
| Subaward Date                  | 2/1/2022                                |
| Place of Performance Address 1 | 9544 Ocean Highway                      |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Delmar                                  |
| Place of Performance State     | MD                                      |
| Place of Performance Zip       | 21875                                   |
| Place of Performance Zip+4     |   |
| Description                    | emergency house, hotel/motel stay costs |
| Subrecipient                   | SOUKOON INC                             |
| Period of Performance Start    | 2/1/2022                                |
| Period of Performance End      | 12/31/2024                              |

### Subward No: 18598-302881

| Subaward Type                  | Direct Payment                          |
|--------------------------------|---|
| Subaward Obligation            | \$89,692.52                             |
| Subaward Date                  | 2/1/2022                                |
| Place of Performance Address 1 | 5209 Concord Pike                       |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Wilmington                              |
| Place of Performance State     | DE                                      |
| Place of Performance Zip       | 19803                                   |
| Place of Performance Zip+4     |   |
| Description                    | emergency house, hotel/motel stay costs |
| Subrecipient                   | DIPNA INC                               |
| Period of Performance Start    | 2/1/2022                                |
| Period of Performance End      | 12/31/2024                              |

| Subaward Type | Direct Payment |
|---------------|----------------|
|               |                |

| Subaward Obligation            | \$163,530.00                               |
|--------------------------------|--|
| Subaward Date                  | 2/1/2022                                   |
| Place of Performance Address 1 | 3 Memorial Dr                              |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | New Castle                                 |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19720                                      |
| Place of Performance Zip+4     |  |
| Description                    | emergency housing costs, hotel/motel stays |
| Subrecipient                   | SAHAJ NEW CASTLE HOSPITALITY LLC           |
| Period of Performance Start    | 2/1/2022                                   |
| Period of Performance End      | 12/31/2024                                 |

| Subaward Type                  | Direct Payment                             |
|--------------------------------|--|
| Subaward Obligation            | \$120,498.57                               |
| Subaward Date                  | 2/1/2022                                   |
| Place of Performance Address 1 | 1200 West Ave                              |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | New Castle                                 |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19720                                      |
| Place of Performance Zip+4     |  |
| Description                    | emergency housing costs, hotel/motel stays |
| Subrecipient                   | 300 GATEWAY LLC                            |
| Period of Performance Start    | 2/1/2022                                   |
| Period of Performance End      | 12/31/2024                                 |

| Subaward Type                  | Direct Payment       |   |
|--------------------------------|----------------------|---|
| Subaward Obligation            | \$112,165.00         |   |
| Subaward Date                  | 2/1/2022             |   |
| Place of Performance Address 1 | 12036 Sussex Highway |   |
| Place of Performance Address 2 |                      |   |
| Place of Performance Address 3 |                      |   |
| Place of Performance City      | Greenwood            |   |
| Place of Performance State     | DE                   |   |
|                                |                      | 1 |

| Place of Performance Zip    | 19950                                   |
|-----------------------------|---|
| Place of Performance Zip+4  |   |
| Description                 | emergency house, hotel/motel stay costs |
| Subrecipient                | AKSHAR LLC                              |
| Period of Performance Start | 2/1/2022                                |
| Period of Performance End   | 12/31/2024                              |

| Subaward Type                  | Direct Payment                          |
|--------------------------------|---|
| Subaward Obligation            | \$127,581.05                            |
| Subaward Date                  | 2/1/2022                                |
| Place of Performance Address 1 | 28344 DuPont Blvd                       |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Millsboro                               |
| Place of Performance State     | DE                                      |
| Place of Performance Zip       | 19966                                   |
| Place of Performance Zip+4     |   |
| Description                    | emergency house, hotel/motel stay costs |
| Subrecipient                   | CHUDASAMA ENTERPRISE LLC                |
| Period of Performance Start    | 2/1/2022                                |
| Period of Performance End      | 12/31/2024                              |

# Subward No: 18667-0001

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$473,217.00             |
| Subaward Date                  | 4/1/2022                 |
| Place of Performance Address 1 | 2117 N Dupont Hwy        |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | New Castle               |
| Place of Performance State     | DE                       |
| Place of Performance Zip       | 19720                    |
| Place of Performance Zip+4     |                          |
| Description                    | Emergency housing        |
| Subrecipient                   | FAIRFIELD INN & SUITES   |
| Period of Performance Start    | 4/1/2022                 |
| Period of Performance End      | 12/31/2024               |

Subward No: 18749-24438

| Subaward Type                  | Contract: Purchase Order                      |
|--------------------------------|---|
| Subaward Obligation            | \$0.00  |
| Subaward Date                  | 11/16/2022                                    |
| Place of Performance Address 1 | PO BOX 454                                    |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | SMYRNA  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19977   |
| Place of Performance Zip+4     |   |
| Description                    | Homebound Program, Other Professional Service |
| Subrecipient                   | DELAWARE PHARMACISTS SOCIETY                  |
| Period of Performance Start    | 11/16/2022                                    |
| Period of Performance End      | 12/31/2026                                    |

## Subward No: 35-1400-2022-67

| Subaward Tupa                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Type                  |   |
| Subaward Obligation            | \$0.00  |
| Subaward Date                  | 2/1/2022  |
| Place of Performance Address 1 | 16924 Savannah Road   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Lewes   |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19958   |
| Place of Performance Zip+4     |   |
| Description                    | Vaccinating as many homebound adults as possible                                    |
| Subrecipient                   | Laurel Health Services  |
| Period of Performance Start    | 2/1/2022  |
| Period of Performance End      | 2/1/2023  |
| Primary Sector                 | home- and community-based health care or assistance with activities of daily living |
| Purpose of Funds               | To provide COVID-19 vaccines to homebound adults.                                   |

## Subward No: 35-1400-2022-61

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$0.00                   |
| Subaward Date                  | 2/1/2022                 |
| Place of Performance Address 1 | 2500 West 4th Street     |

| Place of Performance Address 2 |   |
|--------------------------------|---|
| Place of Performance Address 3 |   |
| Place of Performance City      | Wilmington  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19805   |
| Place of Performance Zip+4     |   |
| Description                    | Vaccinating as many homebound adults as possible                                    |
| Subrecipient                   | Laurel Health Services  |
| Period of Performance Start    | 2/1/2022  |
| Period of Performance End      | 2/1/2023  |
| Primary Sector                 | home- and community-based health care or assistance with activities of daily living |
| Purpose of Funds               | To provide COVID-19 vaccines to homebound adults.                                   |

# Subward No: 35-1400-2022-65

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$0.00  |
| Subaward Date                  | 2/1/2022  |
| Place of Performance Address 1 | 337 Civic Ave   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Salisbury   |
| Place of Performance State     | MD  |
| Place of Performance Zip       | 21804   |
| Place of Performance Zip+4     |   |
| Description                    | Vaccinating as many homebound adults as possible                                    |
| Subrecipient                   | Laurel Health Services  |
| Period of Performance Start    | 2/1/2022  |
| Period of Performance End      | 2/1/2023  |
| Primary Sector                 | home- and community-based health care or assistance with activities of daily living |
| Purpose of Funds               | To provide COVID-19 vaccines to homebound adults.                                   |

# Subward No: 35-1400-2022-66

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$0.00                   |
| Subaward Date                  | 2/1/2022                 |
| Place of Performance Address 1 | 117 East Glenwood Ave    |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |

| Place of Performance City   | Smyrna  |
|-----------------------------|---|
| Place of Performance State  | DE  |
| Place of Performance Zip    | 19977   |
| Place of Performance Zip+4  |   |
| Description                 | Vaccinating as many homebound adults as possible                                    |
| Subrecipient                | Laurel Health Services  |
| Period of Performance Start | 2/1/2022  |
| Period of Performance End   | 2/1/2023  |
| Primary Sector              | home- and community-based health care or assistance with activities of daily living |
| Purpose of Funds            | To provide COVID-19 vaccines to homebound adults.                                   |

# Subward No: 35-1400-2022-64

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$0.00  |
| Subaward Date                  | 2/1/2022  |
| Place of Performance Address 1 | 30214 Sussex Highway  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Laurel  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19956   |
| Place of Performance Zip+4     |   |
| Description                    | Vaccinating as many homebound adults as possible                                    |
| Subrecipient                   | Laurel Health Services  |
| Period of Performance Start    | 2/1/2022  |
| Period of Performance End      | 2/1/2023  |
| Primary Sector                 | home- and community-based health care or assistance with activities of daily living |
| Purpose of Funds               | To provide COVID-19 vaccines to homebound adults.                                   |

# Subward No: 35-1400-2022-63

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$0.00                   |
| Subaward Date                  | 2/1/2022                 |
| Place of Performance Address 1 | 723 N. Broad Street      |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Middletown               |
| Place of Performance State     | DE                       |

| Place of Performance Zip    | 19709   |
|-----------------------------|---|
| Place of Performance Zip+4  |   |
| Description                 | Vaccinating as many homebound adults as possible                                    |
| Subrecipient                | Laurel Health Services  |
| Period of Performance Start | 2/1/2022  |
| Period of Performance End   | 2/1/2023  |
| Primary Sector              | home- and community-based health care or assistance with activities of daily living |
| Purpose of Funds            | To provide COVID-19 vaccines to homebound adults.                                   |

# Subward No: 18749-

| Subaward Type                  | Contract: Purchase Order     |
|--------------------------------|------------------------------|
| Subaward Obligation            | \$0.00                       |
| Subaward Date                  | 4/1/2022                     |
| Place of Performance Address 1 | 16924 Savannah Road          |
| Place of Performance Address 2 |                              |
| Place of Performance Address 3 |                              |
| Place of Performance City      | Lewes                        |
| Place of Performance State     | DE                           |
| Place of Performance Zip       | 19958                        |
| Place of Performance Zip+4     |                              |
| Description                    | Vaccine Booster distribution |
| Subrecipient                   | Cape Pharmacy                |
| Period of Performance Start    | 4/1/2022                     |
| Period of Performance End      | 12/31/2024                   |

# Subward No: 18749-187529

| Subaward Type                  | Contract: Purchase Order     |  |
|--------------------------------|------------------------------|--|
| Subaward Obligation            | \$0.00                       |  |
| Subaward Date                  | 4/1/2022                     |  |
| Place of Performance Address 1 | 337 Civic Ave                |  |
| Place of Performance Address 2 | Suite 20                     |  |
| Place of Performance Address 3 |                              |  |
| Place of Performance City      | Salisbury                    |  |
| Place of Performance State     | MD                           |  |
| Place of Performance Zip       | 21804                        |  |
| Place of Performance Zip+4     |                              |  |
| Description                    | Vaccine Booster distribution |  |
| Subrecipient                   | Civic Health Services        |  |
|                                |                              |  |

| Period of Performance Start | 4/1/2022   |
|-----------------------------|------------|
| Period of Performance End   | 12/31/2024 |

#### Subward No: 18749-566117

| Subaward Type                  | Contract: Purchase Order             |
|--------------------------------|--------------------------------------|
| Subaward Obligation            | \$0.00                               |
| Subaward Date                  | 4/1/2022                             |
| Place of Performance Address 1 | 117 East Glenwood Ave                |
| Place of Performance Address 2 |                                      |
| Place of Performance Address 3 |                                      |
| Place of Performance City      | Smyrna                               |
| Place of Performance State     | DE                                   |
| Place of Performance Zip       | 19977                                |
| Place of Performance Zip+4     |                                      |
| Description                    | vaccine booster program distribution |
| Subrecipient                   | Focus Pharmacy                       |
| Period of Performance Start    | 4/1/2022                             |
| Period of Performance End      | 12/31/2024                           |

## Subward No: 18749-582824

| Subaward Type                  | Contract: Purchase Order             |
|--------------------------------|--------------------------------------|
| Subaward Obligation            | \$0.00                               |
| Subaward Date                  | 4/1/2022                             |
| Place of Performance Address 1 | 723 N. Broad Street                  |
| Place of Performance Address 2 |                                      |
| Place of Performance Address 3 |                                      |
| Place of Performance City      | Middletown                           |
| Place of Performance State     | DE                                   |
| Place of Performance Zip       | 19709                                |
| Place of Performance Zip+4     |                                      |
| Description                    | vaccine booster program distribution |
| Subrecipient                   | Living Well Pharmacy                 |
| Period of Performance Start    | 4/1/2022                             |
| Period of Performance End      | 12/31/2024                           |

# Subward No: 18749-577283

| Subaward Type       | Contract: Purchase Order |
|---------------------|--------------------------|
| Subaward Obligation | \$0.00                   |
| Subaward Date       | 4/1/2022                 |
|                     |                          |

| Place of Performance Address 1 | 2500 West 4th Street         |
|--------------------------------|------------------------------|
| Place of Performance Address 2 | Suite 1                      |
| Place of Performance Address 3 |                              |
| Place of Performance City      | Wilmington                   |
| Place of Performance State     | DE                           |
| Place of Performance Zip       | 19805                        |
| Place of Performance Zip+4     |                              |
| Description                    | vaccine booster distribution |
| Subrecipient                   | Shayona Health               |
| Period of Performance Start    | 4/1/2022                     |
| Period of Performance End      | 12/31/2024                   |

## Subward No: 3292

| Subaward Type                  | Grant: Lump Sum Payment(s)   |
|--------------------------------|--|
| Subaward Obligation            | \$2,000,000.00   |
| Subaward Date                  | 2/1/2022   |
| Place of Performance Address 1 | 21444 Carmean Way  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Georgetown   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19947  |
| Place of Performance Zip+4     |  |
| Description                    | provide grant funding to healthcare facility to provide staff<br>recruitment and retention due to shortages caused by<br>COVID-19 pandemic |
| Subrecipient                   | La Red Health Center   |
| Period of Performance Start    | 2/1/2022   |
| Period of Performance End      | 2/1/2023   |

## Subward No: 44

| Subaward Type                  | Grant: Lump Sum Payment(s) |  |
|--------------------------------|----------------------------|--|
| Subaward Obligation            | \$2,500,000.00             |  |
| Subaward Date                  | 2/1/2022                   |  |
| Place of Performance Address 1 | 300 Water Street           |  |
| Place of Performance Address 2 | Suite 200                  |  |
| Place of Performance Address 3 |                            |  |
| Place of Performance City      | Wilmington                 |  |
| Place of Performance State     | DE                         |  |
| Place of Performance Zip       | 19801                      |  |

| Place of Performance Zip+4  |  |
|-----------------------------|--|
| Description                 | provide grant funding to healthcare facility to provide staff<br>recruitment and retention due to shortages caused by<br>COVID-19 pandemic |
| Subrecipient                | Westside Family Healthcare   |
| Period of Performance Start | 2/1/2022   |
| Period of Performance End   | 2/1/2023   |

# Subward No: 18872-261559

| Subaward Type                  | Grant: Lump Sum Payment(s) |
|--------------------------------|----------------------------|
| Subaward Obligation            | \$0.00                     |
| Subaward Date                  | 7/20/2022                  |
| Place of Performance Address 1 | 9975 Summers Ridge Rd      |
| Place of Performance Address 2 |                            |
| Place of Performance Address 3 |                            |
| Place of Performance City      | San Diego                  |
| Place of Performance State     | СА                         |
| Place of Performance Zip       | 92121                      |
| Place of Performance Zip+4     |                            |
| Description                    | Child Testing              |
| Subrecipient                   | QUIDEL CORP                |
| Period of Performance Start    | 7/20/2022                  |
| Period of Performance End      | 12/31/2026                 |

## Subward No: 18874-22700

| Subaward Type                  | Contract: Purchase Order   |
|--------------------------------|--|
| Subaward Obligation            | \$1,272,726.77   |
| Subaward Date                  | 7/29/2022  |
| Place of Performance Address 1 | 5811 PELICAN BAY BLVD STE 500  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | NAPLES   |
| Place of Performance State     | FL   |
| Place of Performance Zip       | 34108  |
| Place of Performance Zip+4     |  |
| Description                    | To be used for the following service: build state and local capacity, and test small-scale innovative strategies to shift the impact of social determinants of health tied to root causes of infant mortality. |
| Subrecipient                   | HEALTH MANAGEMENT ASSOC INC  |
| Period of Performance Start    | 7/29/2022  |

#### Subward No: 18637-76974

| Subaward Type                  | Contract: Purchase Order                        |
|--------------------------------|---|
| Subaward Obligation            | \$173,935.50                                    |
| Subaward Date                  | 9/1/2022  |
| Place of Performance Address 1 | 330 N WABASH AVE STE 3200                       |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | CHICAGO   |
| Place of Performance State     | IL  |
| Place of Performance Zip       | 60611   |
| Place of Performance Zip+4     |   |
| Description                    | Compliance monitoring services of subrecipients |
| Subrecipient                   | BDO USA LLP                                     |
| Period of Performance Start    | 9/1/2022  |
| Period of Performance End      | 12/31/2026                                      |

#### Subward No: 18637-599219

| Subaward Type                  | Contract: Purchase Order                        |
|--------------------------------|---|
| Subaward Obligation            | \$129,473.75                                    |
| Subaward Date                  | 9/1/2022  |
| Place of Performance Address 1 | 2211 CONGRESS STREET                            |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | PORTLAND  |
| Place of Performance State     | ME  |
| Place of Performance Zip       | 04102   |
| Place of Performance Zip+4     |   |
| Description                    | Compliance monitoring services of subrecipients |
| Subrecipient                   | BERRY DUNN MCNEIL AND PARKER LLC                |
| Period of Performance Start    | 9/1/2022  |
| Period of Performance End      | 12/31/2026                                      |

### Subward No: 18637-649525

| Subaward Type                  | Contract: Purchase Order     |
|--------------------------------|------------------------------|
| Subaward Obligation            | \$159,444.33                 |
| Subaward Date                  | 9/1/2022                     |
| Place of Performance Address 1 | 7230 Lee Deforest Dr Ste 202 |
|                                |                              |

| Place of Performance Address 2 |   |
|--------------------------------|---|
| Place of Performance Address 3 |   |
| Place of Performance City      | Columbia  |
| Place of Performance State     | MD  |
| Place of Performance Zip       | 21046   |
| Place of Performance Zip+4     |   |
| Description                    | Compliance monitoring services of subrecipients |
| Subrecipient                   | Booth Management Consulting, LLC                |
| Period of Performance Start    | 9/1/2022  |
| Period of Performance End      | 12/31/2026                                      |

# Subward No: 18637-649221

| Subaward Type                  | Contract: Purchase Order                        |
|--------------------------------|---|
| Subaward Obligation            | \$282,154.50                                    |
| Subaward Date                  | 9/1/2022  |
| Place of Performance Address 1 | 27725 STANSBURY BLVD                            |
| Place of Performance Address 2 | SUITE 385                                       |
| Place of Performance Address 3 |   |
| Place of Performance City      | FARMINGTON HILLS                                |
| Place of Performance State     | MI  |
| Place of Performance Zip       | 48334   |
| Place of Performance Zip+4     |   |
| Description                    | Compliance monitoring services of subrecipients |
| Subrecipient                   | UHY Advisors Inc                                |
| Period of Performance Start    | 9/1/2022  |
| Period of Performance End      | 12/31/2026                                      |
|                                |   |

#### Subward No: 18637-208766

| Subaward Type                  | Contract: Purchase Order |  |
|--------------------------------|--------------------------|--|
| Subaward Obligation            | \$80,499.83              |  |
| Subaward Date                  | 1/1/2022                 |  |
| Place of Performance Address 1 | 800 Silver Lake Blvd     |  |
| Place of Performance Address 2 | Suite 100                |  |
| Place of Performance Address 3 |                          |  |
| Place of Performance City      | Dover                    |  |
| Place of Performance State     | DE                       |  |
| Place of Performance Zip       | 19901                    |  |
| Place of Performance Zip+4     |                          |  |
| Description                    | ARPA Admin Office Lease  |  |

| Subrecipient                | SILVER LAKE REALTY LLC |
|-----------------------------|------------------------|
| Period of Performance Start | 1/1/2022               |
| Period of Performance End   | 12/31/2026             |

## Subward No: 18955-197556

| Subaward Type                  | Direct Payment                    |
|--------------------------------|-----------------------------------|
| Subaward Obligation            | \$130,177.32                      |
| Subaward Date                  | 7/1/2022                          |
| Place of Performance Address 1 | 800 North king Street Plaza Level |
| Place of Performance Address 2 |                                   |
| Place of Performance Address 3 |                                   |
| Place of Performance City      | Wilmington                        |
| Place of Performance State     | DE                                |
| Place of Performance Zip       | 19801                             |
| Place of Performance Zip+4     |                                   |
| Description                    | Business Interface                |
| Subrecipient                   | Business Interface of Maryland    |
| Period of Performance Start    | 7/1/2022                          |
| Period of Performance End      | 12/31/2024                        |

# Subward No: 18955-24324

| Subaward Type                  | Direct Payment            |
|--------------------------------|---------------------------|
| Subaward Obligation            | \$566,692.47              |
| Subaward Date                  | 7/1/2022                  |
| Place of Performance Address 1 | 300 East Lea Blvd         |
| Place of Performance Address 2 |                           |
| Place of Performance Address 3 |                           |
| Place of Performance City      | Wilmington                |
| Place of Performance State     | DE                        |
| Place of Performance Zip       | 19802                     |
| Place of Performance Zip+4     |                           |
| Description                    | Goodwill services         |
| Subrecipient                   | Goodwill DE and DE County |
| Period of Performance Start    | 7/1/2022                  |
| Period of Performance End      | 12/31/2026                |

# Subward No: 502453

| Subaward Type       | Direct Payment |
|---------------------|----------------|
| Subaward Obligation | \$149,651.00   |
|                     |                |

| Subaward Date                  | 2/1/2022  |
|--------------------------------|---|
| Place of Performance Address 1 | 1401 Aliceanna St.  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Baltimore   |
| Place of Performance State     | MD  |
| Place of Performance Zip       | 21231   |
| Place of Performance Zip+4     |   |
| Description                    | Families became unable to find permanent or even<br>temporary housing as a result of conditions created or<br>exacerbated by the pandemic   |
| Subrecipient                   | Campus Cafe LLC   |
| Period of Performance Start    | 2/1/2022  |
| Period of Performance End      | 2/1/2023  |
| Primary Sector                 | grocery stores, restaurants, food production, and food delivery   |
| Purpose of Funds               | "During the pandemic, Delaware citizens including many<br>families with children became homeless because of a variety<br>of reasons including eviction, inability to pay rent or<br>utilities, lack of available housing stock, lack of shelter<br>space, and lack of other state or federal supports to enter<br>permanent housing. These residents were placed in hotel and<br>motels to provide safe temporary living arrangements by the<br>Division of State Service Centers (DSSC). DSSC referred<br>clients to the Division of Social Services (DSS) for<br>supportive services including food, delivery of food, and<br>case management services. DSS purchased and delivered<br>food to hotel residents and assignment case management<br>staff to work with hotel residents. Case managers assessed<br>the needs of clients and assisted hotel residents in finding<br>employment, finding permanent housing, applying for<br>housing grants and vouchers, accessing public benefits,<br>connecting with community and family resources,<br>developing short term financial plans, and linking to<br>appropriate medical services." |

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$67,559.50              |
| Subaward Date                  | 10/1/2022                |
| Place of Performance Address 1 | 186 TIMBER LN            |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | CLARKSBORO               |
| Place of Performance State     | NJ                       |
| Place of Performance Zip       | 08020                    |
| Place of Performance Zip+4     |                          |

| Description                 | Supplies                |
|-----------------------------|-------------------------|
| Subrecipient                | G A Blanco and Sons Inc |
| Period of Performance Start | 10/1/2022               |
| Period of Performance End   | 12/31/2022              |

| Subaward Type                  | Contract: Purchase Order             |
|--------------------------------|--------------------------------------|
| Subaward Obligation            | \$305,987.25                         |
| Subaward Date                  | 1/1/2023                             |
| Place of Performance Address 1 | 9800 CROSSPOINT BOULEVARD            |
| Place of Performance Address 2 |                                      |
| Place of Performance Address 3 |                                      |
| Place of Performance City      | INDIANAPOLIS                         |
| Place of Performance State     | IN                                   |
| Place of Performance Zip       | 46256                                |
| Place of Performance Zip+4     |                                      |
| Description                    | IT services and consulting           |
| Subrecipient                   | GUIDESOFT INC DBA KNOWLEDGE SERVICES |
| Period of Performance Start    | 1/1/2023                             |
| Period of Performance End      | 12/31/2026                           |

# Subward No: 18869-401860

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$69,749.51              |
| Subaward Date                  | 7/1/2023                 |
| Place of Performance Address 1 | 4425 North Market Street |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Wilmington               |
| Place of Performance State     | DE                       |
| Place of Performance Zip       | 19802                    |
| Place of Performance Zip+4     |                          |
| Description                    | Temp employee services   |
| Subrecipient                   | EXPRESS SERVICES         |
| Period of Performance Start    | 7/1/2023                 |
| Period of Performance End      | 9/30/2023                |

| Subaward Type | Contract: Purchase Order |
|---------------|--------------------------|
|               |                          |

| Subaward Obligation            | \$1,052,235.00              |
|--------------------------------|-----------------------------|
| Subaward Date                  | 7/1/2022                    |
| Place of Performance Address 1 | 219 W 9th Street, Suite 230 |
| Place of Performance Address 2 |                             |
| Place of Performance Address 3 |                             |
| Place of Performance City      | Wilmington                  |
| Place of Performance State     | DE                          |
| Place of Performance Zip       | 19801                       |
| Place of Performance Zip+4     |                             |
| Description                    | Rental office               |
| Subrecipient                   | ROCKFORD CHAPMAN LLC        |
| Period of Performance Start    | 7/1/2022                    |
| Period of Performance End      | 12/31/2026                  |

| Subaward Type                  | Contract: Purchase Order      |
|--------------------------------|-------------------------------|
| Subaward Obligation            | \$74,000.00                   |
| Subaward Date                  | 7/1/2022                      |
| Place of Performance Address 1 | Suite No. 334. 743 Horizon Ct |
| Place of Performance Address 2 |                               |
| Place of Performance Address 3 |                               |
| Place of Performance City      | Grand Junction                |
| Place of Performance State     | СО                            |
| Place of Performance Zip       | 81506                         |
| Place of Performance Zip+4     |                               |
| Description                    | operational expenses          |
| Subrecipient                   | CX PARTNER SOURCE             |
| Period of Performance Start    | 7/1/2022                      |
| Period of Performance End      | 12/31/2024                    |

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$107,444.83             |
| Subaward Date                  | 7/1/2022                 |
| Place of Performance Address 1 | 100 W 10TH St Ste 103    |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Wilmington               |
| Place of Performance State     | DE                       |
|                                |                          |

| Place of Performance Zip    | 19801                                  |
|-----------------------------|--|
| Place of Performance Zip+4  |  |
| Description                 | job services                           |
| Subrecipient                | DELAWARE ASSOCIATION OF REHABILITATION |
| Period of Performance Start | 7/1/2022                               |
| Period of Performance End   | 12/31/2026                             |

| Subaward Type                  | Direct Payment  |
|--------------------------------|---|
| Subaward Obligation            | \$6,838,757.46  |
| Subaward Date                  | 4/1/2022  |
| Place of Performance Address 1 | 39209 W SIX MILE ROAD   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | LIVONIA   |
| Place of Performance State     | MI  |
| Place of Performance Zip       | 48152   |
| Place of Performance Zip+4     |   |
| Description                    | Aid the Division to continue to work through a backlog of claims, adjudications, fraud investigations, and appeals (~10,000) claimants. |
| Subrecipient                   | ACRO SERVICE CORP   |
| Period of Performance Start    | 4/1/2022  |
| Period of Performance End      | 6/30/2022   |

| Subaward Type                  | Direct Payment   |
|--------------------------------|--|
| Subaward Obligation            | \$1,897,947.59   |
| Subaward Date                  | 4/1/2022   |
| Place of Performance Address 1 | 792 EAST 280 SOUTH   |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | AMERICAN FORK  |
| Place of Performance State     | UT   |
| Place of Performance Zip       | 84003  |
| Place of Performance Zip+4     |  |
| Description                    | Help the Division continues to work through a backlog of claims, adjudications, fraud investigations, and appeals (~10,000) claimants. |
| Subrecipient                   | ROI SOLUTIONS LLC  |
| Period of Performance Start    | 4/1/2022   |

| Period of Performance End | 6/30/2023 |
|---------------------------|-----------|

| Subaward Type                  | Direct Payment   |
|--------------------------------|--|
| Subaward Obligation            | \$1,366,082.55   |
| Subaward Date                  | 4/1/2022   |
| Place of Performance Address 1 | POST OFFICE BOX 75343  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Chicago  |
| Place of Performance State     | IL   |
| Place of Performance Zip       | 60675  |
| Place of Performance Zip+4     |  |
| Description                    | Help the Division continues to work through a backlog of claims, adjudications, fraud investigations, and appeals (~10,000) claimants. |
| Subrecipient                   | DELMARVA TEMP STAFFING INC   |
| Period of Performance Start    | 4/1/2022   |
| Period of Performance End      | 6/30/2023  |

#### Subward No: 18869-553545

| Subaward Type                  | Direct Payment   |
|--------------------------------|--|
| Subaward Obligation            | \$138,000.00   |
| Subaward Date                  | 4/1/2022   |
| Place of Performance Address 1 | 422 COUNTY ROAD D EAST   |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | ST PAUL  |
| Place of Performance State     | MN   |
| Place of Performance Zip       | 55117  |
| Place of Performance Zip+4     |  |
| Description                    | Help the Division continues to work through a backlog of claims, adjudications, fraud investigations, and appeals (~10,000) claimants. |
| Subrecipient                   | SAGITEC SOLUTIONS LLC  |
| Period of Performance Start    | 4/1/2022   |
| Period of Performance End      | 6/30/2023  |

| Subaward Type | Contract: Purchase Order |
|---------------|--------------------------|
|               |                          |

| Subaward Obligation            | \$1,078,672.40  |
|--------------------------------|---|
| Subaward Date                  | 4/1/2022  |
| Place of Performance Address 1 | 300 E LEA BLVD  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Wilmington  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19802   |
| Place of Performance Zip+4     |   |
| Description                    | Help the Division continue to work through a backlog of claims, adjudications, fraud investigations, and appeals (~10,000) claimants. |
| Subrecipient                   | Goodwill DE and DE County   |
| Period of Performance Start    | 4/1/2022  |
| Period of Performance End      | 6/30/2023   |

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$1,414,314.07  |
| Subaward Date                  | 4/1/2022  |
| Place of Performance Address 1 | 1390 RIDGEVIEW DR   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | allentown   |
| Place of Performance State     | РА  |
| Place of Performance Zip       | 18104   |
| Place of Performance Zip+4     |   |
| Description                    | Help the Division continue to work through a backlog of claims, adjudications, fraud investigations, and appeals (~10,000) claimants. |
| Subrecipient                   | COMPUTER AID INC  |
| Period of Performance Start    | 4/1/2022  |
| Period of Performance End      | 6/30/2023   |

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$324,873.77             |
| Subaward Date                  | 4/1/2022                 |
| Place of Performance Address 1 | 11493 SUNSET HILLS ROAD  |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |

|                             | ,   |
|-----------------------------|---|
| Place of Performance City   | RESTON  |
| Place of Performance State  | VA  |
| Place of Performance Zip    | 20190   |
| Place of Performance Zip+4  |   |
| Description                 | Help the Division continue to work through a backlog of claims, adjudications, fraud investigations, and appeals (~10,000) claimants. |
| Subrecipient                | CARAHSOFT TECHNOLOGY CORPORATION  |
| Period of Performance Start | 4/1/2022  |
| Period of Performance End   | 6/30/2023   |

| Sector second Trans            | Contract, Developer Orden   |
|--------------------------------|---|
| Subaward Type                  | Contract: Purchase Order  |
| Subaward Obligation            | \$311,317.31  |
| Subaward Date                  | 4/1/2022  |
| Place of Performance Address 1 | 710 OLD BRIDGE TPKE &EDGEBORO RD  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | EAST BRUNSWICK  |
| Place of Performance State     | NJ  |
| Place of Performance Zip       | 08816   |
| Place of Performance Zip+4     |   |
| Description                    | Help the Division continue to work through a backlog of claims, adjudications, fraud investigations, and appeals (~10,000) claimants. |
| Subrecipient                   | AUM TECH INCORPORATED   |
| Period of Performance Start    | 4/1/2022  |
| Period of Performance End      | 6/30/2023   |

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$80,000.00              |
| Subaward Date                  | 4/1/2022                 |
| Place of Performance Address 1 | 4001 MILLER ROAD SUITE 3 |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | wilmington               |
| Place of Performance State     | DE                       |
| Place of Performance Zip       | 19802                    |
| Place of Performance Zip+4     |                          |
|                                |                          |

| Description                 | Help the Division continues to work through a backlog of claims, adjudications, fraud investigations, and appeals (~10,000) claimants. |
|-----------------------------|--|
| Subrecipient                | DIAMOND TECHNOLOGIES INC   |
| Period of Performance Start | 4/1/2022   |
| Period of Performance End   | 6/30/2023  |

| Subaward Type                  | Contract: Purchase Order   |
|--------------------------------|--|
| Subaward Obligation            | \$200,000.00   |
| Subaward Date                  | 4/1/2022   |
| Place of Performance Address 1 | 18 JAMES PLACE   |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | CINCINNATI   |
| Place of Performance State     | ОН   |
| Place of Performance Zip       | 45246  |
| Place of Performance Zip+4     |  |
| Description                    | Help the Division continues to work through a backlog of claims, adjudications, fraud investigations, and appeals (~10,000) claimants. |
| Subrecipient                   | RUSSELL ALLEN PARTNERS   |
| Period of Performance Start    | 4/1/2022   |
| Period of Performance End      | 6/30/2023  |

| Subaward Type                  | Contract: Purchase Order              |
|--------------------------------|---------------------------------------|
| Subaward Obligation            | \$92,752.29                           |
| Subaward Date                  | 6/1/2023                              |
| Place of Performance Address 1 | 250 STATE STREET                      |
| Place of Performance Address 2 |                                       |
| Place of Performance Address 3 |                                       |
| Place of Performance City      | NORTH HAVEN                           |
| Place of Performance State     | СТ                                    |
| Place of Performance Zip       | 06473                                 |
| Place of Performance Zip+4     |                                       |
| Description                    | non-degree credit certificate program |
| Subrecipient                   | CAREER T E A M LLC                    |
| Period of Performance Start    | 6/1/2023                              |
| Period of Performance End      | 12/31/2026                            |

| Subaward Type                  | Contract: Purchase Order          |
|--------------------------------|-----------------------------------|
| Subaward Obligation            | \$95,000.00                       |
| Subaward Date                  | 6/1/2023                          |
| Place of Performance Address 1 | 192 Lexington Avenue              |
| Place of Performance Address 2 |                                   |
| Place of Performance Address 3 |                                   |
| Place of Performance City      | NEW YORK                          |
| Place of Performance State     | NY                                |
| Place of Performance Zip       | 10016                             |
| Place of Performance Zip+4     |                                   |
| Description                    | non-degree certification programs |
| Subrecipient                   | DELAWARE FUTURES INC              |
| Period of Performance Start    | 6/1/2023                          |
| Period of Performance End      | 12/31/2026                        |

#### Subward No: 18898-25444

| Subaward Type                  | Contract: Purchase Order          |
|--------------------------------|-----------------------------------|
| Subaward Obligation            | \$91,938.52                       |
| Subaward Date                  | 6/1/2023                          |
| Place of Performance Address 1 | 381 W NORTH ST                    |
| Place of Performance Address 2 |                                   |
| Place of Performance Address 3 |                                   |
| Place of Performance City      | DOVER                             |
| Place of Performance State     | DE                                |
| Place of Performance Zip       | 19904                             |
| Place of Performance Zip+4     |                                   |
| Description                    | non-degree certificaiton programs |
| Subrecipient                   | JOBS FOR DE GRADUATES             |
| Period of Performance Start    | 6/1/2023                          |
| Period of Performance End      | 12/31/2026                        |
|                                |                                   |

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$63,616.29              |
| Subaward Date                  | 6/1/2023                 |
| Place of Performance Address 1 | 710 N LINCOLN ST         |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |

| Place of Performance City   | WILMINGTON                        |
|-----------------------------|-----------------------------------|
| Place of Performance State  | DE                                |
| Place of Performance Zip    | 19805                             |
| Place of Performance Zip+4  |                                   |
| Description                 | non-degree certificaiton programs |
| Subrecipient                | WEST END NEIGHBORHOOD HOUSE       |
| Period of Performance Start | 6/1/2023                          |
| Period of Performance End   | 12/31/2026                        |
|                             |                                   |

| Subaward Type                  | Contract: Purchase Order               |
|--------------------------------|--|
| Subaward Obligation            | \$450,000.00                           |
| Subaward Date                  | 6/15/2023                              |
| Place of Performance Address 1 | 2800 SW TOPEKA BLVD                    |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | ТОРЕКА                                 |
| Place of Performance State     | KS                                     |
| Place of Performance Zip       | 66611                                  |
| Place of Performance Zip+4     |  |
| Description                    | Computer Services                      |
| Subrecipient                   | STATE OF KANSAS DEPARTMENT OF COMMERCE |
| Period of Performance Start    | 6/15/2023                              |
| Period of Performance End      | 12/31/2026                             |

# Subward No: 18823-30078

| Contract: Purchase Order               |
|--|
| \$740,900.00                           |
| 4/1/2022                               |
| 1 Park Avenue                          |
|  |
|  |
| Milford                                |
| DE                                     |
| 19963                                  |
|  |
| Design DE NG Pandemic Readiness Center |
| Davis Bowen & Friedel Inc              |
| 4/1/2022                               |
|  |

#### Subward No: 19108

| Subaward Type                  | Grant: Lump Sum Payment(s)   |
|--------------------------------|--|
| Subaward Obligation            | \$5,000,000.00   |
| Subaward Date                  | 4/20/2022  |
| Place of Performance Address 1 | 4765 Ogletown-Stanton Road   |
| Place of Performance Address 2 | Suite L10  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Wilmington   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19713  |
| Place of Performance Zip+4     |  |
| Description                    | Delaware Health Force database initiative, tracking all types<br>of healthcare providers against changing demographics, and<br>current acute and chronic disease data. |
| Subrecipient                   | The Delaware Academy of Medicine, Inc.   |
| Period of Performance Start    | 4/20/2022  |
| Period of Performance End      | 12/31/2024   |

#### Subward No: 19110

| h                              |   |
|--------------------------------|---|
| Subaward Type                  | Grant: Lump Sum Payment(s)  |
| Subaward Obligation            | \$41,000,000.00   |
| Subaward Date                  | 4/28/2022   |
| Place of Performance Address 1 | 210 Hullihen Hall   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Newark  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19716   |
| Place of Performance Zip+4     |   |
| Description                    | Construct a faculty for education and research in<br>understanding, treatment, and prevention of diseases. This is<br>a rebuild of the McKinley Lab that was destroyed on the<br>University of Delaware's campus in 2018 due to a fire. |
| Subrecipient                   | University of Delaware  |
| Period of Performance Start    | 4/28/2022   |
| Period of Performance End      | 12/31/2024  |
|                                |   |

# Subward No: 19161

| Subaward Type | Grant: Lump Sum Payment(s) |
|---------------|----------------------------|
|               | T                          |

| Subaward Obligation            | \$500,000.00   |
|--------------------------------|--|
| Subaward Date                  | 5/16/2022  |
| Place of Performance Address 1 | 4765 Ogletown Stanton Road   |
| Place of Performance Address 2 | Suite L10  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Newark   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19713  |
| Place of Performance Zip+4     |  |
| Description                    | The development of a 'HealthyNurse Healthy Delaware'<br>comprehensive program with overarching focus on<br>measurably improving mental health, post-traumatic growth<br>and overall wellbeing of Delaware's nursing workforce. |
| Subrecipient                   | Delaware Nurses Association  |
| Period of Performance Start    | 5/16/2022  |
| Period of Performance End      | 12/31/2024   |

# Subward No: 19315

| Subaward Type                  | Grant: Lump Sum Payment(s)  |
|--------------------------------|---|
| Subaward Obligation            | \$300,000.00  |
| Subaward Date                  | 6/2/2022  |
| Place of Performance Address 1 | 800 N. State Street   |
| Place of Performance Address 2 | Suite 301   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Dover   |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19901   |
| Place of Performance Zip+4     |   |
| Description                    | Expanded access to telemedicine healthcare services, mental<br>health resources, and substance abuse prevention for<br>Delaware's restaurant workforce. |
| Subrecipient                   | Delaware Restaurant Association   |
| Period of Performance Start    | 6/2/2022  |
| Period of Performance End      | 12/31/2024  |

| Subaward Type                  | Grant: Lump Sum Payment(s) |
|--------------------------------|----------------------------|
| Subaward Obligation            | \$276,625.00               |
| Subaward Date                  | 6/7/2022                   |
| Place of Performance Address 1 | 555 Justison Street        |
| Place of Performance Address 2 |                            |
|                                |                            |

| Place of Performance Address 3 |  |
|--------------------------------|--|
| Place of Performance City      | Wlimington   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19801  |
| Place of Performance Zip+4     |  |
| Description                    | Behavioral health supports for children & youth in Delaware. |
| Subrecipient                   | Children and Families first                                  |
| Period of Performance Start    | 6/7/2022   |
| Period of Performance End      | 12/31/2024   |

# Subward No: 19323

| Subaward Type                  | Grant: Lump Sum Payment(s)   |
|--------------------------------|--|
| Subaward Obligation            | \$183,400.00   |
| Subaward Date                  | 6/7/2022   |
| Place of Performance Address 1 | 212 Carter Drive   |
| Place of Performance Address 2 | Suite C  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Middletown   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19709  |
| Place of Performance Zip+4     |  |
| Description                    | Advanced Family Care's Healthy Minds, Healthy Lives<br>project will bring mental health awareness through<br>continued community outreach efforts in the cities of<br>Middletown, Odessa, Townsend and beyond. |
| Subrecipient                   | Advanced Family Care   |
| Period of Performance Start    | 6/7/2022   |
| Period of Performance End      | 12/31/2024   |
|                                | •  |

| Subaward Type                  | Grant: Lump Sum Payment(s) |
|--------------------------------|----------------------------|
| Subaward Obligation            | \$1,000,000.00             |
| Subaward Date                  | 6/6/2022                   |
| Place of Performance Address 1 | 99 Passmore Road           |
| Place of Performance Address 2 |                            |
| Place of Performance Address 3 |                            |
| Place of Performance City      | Wilmington                 |
| Place of Performance State     | DE                         |
| Place of Performance Zip       | 19803                      |
| Place of Performance Zip+4     |                            |

| Description                 | Increase staffing of therapists and case managers, open new<br>counseling office in Newark, renovate main campus in<br>Wilmington to accommodate more staff and expand food<br>pantry space. |
|-----------------------------|--|
| Subrecipient                | Jewish Family Services   |
| Period of Performance Start | 6/6/2022   |
| Period of Performance End   | 12/31/2024   |

### Subward No: 19162-24423

| Subaward Type                  | Contract: Definitive Contract  |
|--------------------------------|--|
| Subaward Obligation            | \$1,000,000.00   |
| Subaward Date                  | 5/17/2022  |
| Place of Performance Address 1 | 625 North Orange Street  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | WILMINGTON   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19801  |
| Place of Performance Zip+4     |  |
| Description                    | Governors Summer Fellowship program at a cost of up to \$1<br>million. The Governors Summer Fellowship is a joint<br>partnership between the United Way of Delaware (UWDE),<br>the Delaware Department of Education (DDOE), and the<br>Office of Governor John Carney. The program will use<br>APRA funds to support elementary and middle school aged<br>youth to enroll in high-quality summer learning experiences. |
| Subrecipient                   | United Way of Delaware   |
| Period of Performance Start    | 5/17/2022  |
| Period of Performance End      | 12/31/2024   |

| Subaward Type                  | Contract: Definitive Contract                         |
|--------------------------------|---|
| Subaward Obligation            | \$1,700,000.00  |
| Subaward Date                  | 6/13/2022   |
| Place of Performance Address 1 | 19 Lambson Lane                                       |
| Place of Performance Address 2 | Suite 001   |
| Place of Performance Address 3 |   |
| Place of Performance City      | New Castle  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19720   |
| Place of Performance Zip+4     |   |
|                                | ARPA Funding to partially fund a business development |

| Description                 | initiative for small local contractors proposed by local<br>non-profit L.E.E.P., Inc. (LEEP). The Program is designed<br>to span three years and will serve as a training and business<br>incubator/accelerator program for up to 100 small local<br>contractors. The Program is focused on local contractors<br>with annual sales between \$100,000 and \$2 million and is<br>designed to help them compete for public and private capital<br>improvement projects throughout the State. |
|-----------------------------|---|
| Subrecipient                | LEEP Inc Labor Economics Education emPowerment  |
| Period of Performance Start | 6/13/2022   |
| Period of Performance End   | 12/31/2024  |

# Subward No: 19222-583966

| Subaward Type                  | Contract: Purchase Order             |
|--------------------------------|--------------------------------------|
| Subaward Obligation            | \$200,000.00                         |
| Subaward Date                  | 7/1/2023                             |
| Place of Performance Address 1 | 920 JUSTISON STREET                  |
| Place of Performance Address 2 |                                      |
| Place of Performance Address 3 |                                      |
| Place of Performance City      | WILMINGTON                           |
| Place of Performance State     | DE                                   |
| Place of Performance Zip       | 19801                                |
| Place of Performance Zip+4     |                                      |
| Description                    | Fire School Sys Program              |
| Subrecipient                   | SYMBIOSYS CONSULTING LLC DBA BELSHAM |
| Period of Performance Start    | 9/30/2023                            |
| Period of Performance End      | 12/31/2026                           |

# Subward No: 19285-24324

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---------------------------|
| Subaward Obligation            | \$72,923.99               |
| Subaward Date                  | 6/1/2022                  |
| Place of Performance Address 1 | 4425 North Market Street  |
| Place of Performance Address 2 |                           |
| Place of Performance Address 3 |                           |
| Place of Performance City      | Wilmington                |
| Place of Performance State     | DE                        |
| Place of Performance Zip       | 19802                     |
| Place of Performance Zip+4     |                           |
| Description                    | Temp-staff services       |
| Subrecipient                   | Goodwill DE and DE County |
| Period of Performance Start    | 6/1/2022                  |

| Period of Performance End | 12/31/2026 |
|---------------------------|------------|
|                           |            |

#### Subward No: 19141-133149

| Subaward Type                  | Contract: Purchase Order   |
|--------------------------------|--|
| Subaward Obligation            | \$77,189.75  |
| Subaward Date                  | 4/1/2022   |
| Place of Performance Address 1 | 11493 SUNSET HILLS ROAD  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | RESTON   |
| Place of Performance State     | VA   |
| Place of Performance Zip       | 20190  |
| Place of Performance Zip+4     |  |
| Description                    | The project is to develop a platform/application to support<br>increased security measures related to the substantial<br>workforce turnover that has taken place during the<br>pandemic. The application that was built to support the<br>Employee Attestation mandate from the Governor and<br>manages vaccination status or testing on a weekly basis<br>across the state. |
| Subrecipient                   | CARAHSOFT TECHNOLOGY CORPORATION   |
| Period of Performance Start    | 4/1/2022   |
| Period of Performance End      | 6/30/2022  |

# Subward No: 19144-22295

| Subaward Type                  | Contract: Purchase Order                                       |
|--------------------------------|--|
| Subaward Obligation            | \$2,941,299.78   |
| Subaward Date                  | 10/27/2022   |
| Place of Performance Address 1 | 6820 S HARL AVE  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | TEMPE  |
| Place of Performance State     | AZ   |
| Place of Performance Zip       | 85283  |
| Place of Performance Zip+4     |  |
| Description                    | ARPA- Data Center Modern- VMWare Software Software Maintenance |
| Subrecipient                   | INSIGHT PUBLIC SECTOR  |
| Period of Performance Start    | 10/27/2022   |
| Period of Performance End      | 12/31/2026   |

Subward No: 19144-35850

| Subaward Type                  | Contract: Purchase Order                          |
|--------------------------------|---|
| Subaward Obligation            | \$2,350,925.21                                    |
| Subaward Date                  | 6/5/2023  |
| Place of Performance Address 1 | 555 E NORTH LN STE 5045                           |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | CONSHOHOCKEN                                      |
| Place of Performance State     | PA  |
| Place of Performance Zip       | 19428   |
| Place of Performance Zip+4     |   |
| Description                    | Computer services Wm Penn Data Center Engineering |
| Subrecipient                   | PRESIDIO NETWORKED SOLUTIONS GROUP, LLC           |
| Period of Performance Start    | 6/5/2023  |
| Period of Performance End      | 12/31/2023  |

# Subward No: 19144-133149

| Subaward Type                  | Contract: Purchase Order         |
|--------------------------------|----------------------------------|
| Subaward Obligation            | \$2,554,053.41                   |
| Subaward Date                  | 7/1/2023                         |
| Place of Performance Address 1 | 11493 SUNSET HILLS ROAD          |
| Place of Performance Address 2 |                                  |
| Place of Performance Address 3 |                                  |
| Place of Performance City      | RESTON                           |
| Place of Performance State     | VA                               |
| Place of Performance Zip       | 20190                            |
| Place of Performance Zip+4     |                                  |
| Description                    | Data Storage                     |
| Subrecipient                   | CARAHSOFT TECHNOLOGY CORPORATION |
| Period of Performance Start    | 7/1/2023                         |
| Period of Performance End      | 12/31/2026                       |

# Subward No: 19144-16884

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$58,300.00              |
| Subaward Date                  | 10/1/2023                |
| Place of Performance Address 1 | 290 DAVIDSON AVE, # 101  |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | SOMERSET                 |

| Place of Performance State  | NJ   |
|-----------------------------|--|
| Place of Performance Zip    | 08873  |
| Place of Performance Zip+4  |  |
| Description                 | WorldTech professional services / IT Professional Services |
| Subrecipient                | SHI INTERNATIONAL CORP                                     |
| Period of Performance Start | 10/1/2023  |
| Period of Performance End   | 12/31/2023   |

### Subward No: 19144-18102

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$234,000.00             |
| Subaward Date                  | 7/1/2022                 |
| Place of Performance Address 1 | 1390 Ridgeview Drive     |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Allentown                |
| Place of Performance State     | PA                       |
| Place of Performance Zip       | 18104                    |
| Place of Performance Zip+4     |                          |
| Description                    | IT professional services |
| Subrecipient                   | COMPUTER AID INC         |
| Period of Performance Start    | 7/27/2022                |
| Period of Performance End      | 12/31/2026               |

# Subward No: 19144-33778

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$854,992.33             |
| Subaward Date                  | 4/1/2022                 |
| Place of Performance Address 1 | 801 Silver Lake Blvd     |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Dover                    |
| Place of Performance State     | DE                       |
| Place of Performance Zip       | 19901                    |
| Place of Performance Zip+4     |                          |
| Description                    | Hardware Purchase        |
| Subrecipient                   | DELL MARKETING LP        |
| Period of Performance Start    | 4/1/2022                 |
| Period of Performance End      | 6/30/2022                |

#### Subward No: 19144-49758

| Subaward Type                  | Contract: Purchase Order |  |
|--------------------------------|--------------------------|--|
| Subaward Obligation            | \$456,815.00             |  |
| Subaward Date                  | 4/1/2022                 |  |
| Place of Performance Address 1 | 801 Silver Lake Blvd     |  |
| Place of Performance Address 2 |                          |  |
| Place of Performance Address 3 |                          |  |
| Place of Performance City      | Dover                    |  |
| Place of Performance State     | DE                       |  |
| Place of Performance Zip       | 19901                    |  |
| Place of Performance Zip+4     |                          |  |
| Description                    | Technology Purchase      |  |
| Subrecipient                   | Info Solutions LLC       |  |
| Period of Performance Start    | 4/1/2022                 |  |
| Period of Performance End      | 6/30/2023                |  |
|                                |                          |  |

# Subward No: 19176-666611

| Subaward Type                  | Contract: Purchase Order |  |
|--------------------------------|--------------------------|--|
| Subaward Obligation            | \$7,114,739.00           |  |
| Subaward Date                  | 1/1/2023                 |  |
| Place of Performance Address 1 | 3333 FINLEY RD           |  |
| Place of Performance Address 2 |                          |  |
| Place of Performance Address 3 |                          |  |
| Place of Performance City      | DOWNERS GROVE            |  |
| Place of Performance State     | IL                       |  |
| Place of Performance Zip       | 60515                    |  |
| Place of Performance Zip+4     |                          |  |
| Description                    | IT services contract     |  |
| Subrecipient                   | ENSONO LLC               |  |
| Period of Performance Start    | 1/1/2023                 |  |
| Period of Performance End      | 12/31/2026               |  |

# Subward No: 19176-31655

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$1,011,000.00           |
| Subaward Date                  | 1/1/2023                 |
| Place of Performance Address 1 | PO Box 910600            |
| Place of Performance Address 2 |                          |
|                                |                          |

| Place of Performance Address 3 |                      |
|--------------------------------|----------------------|
| Place of Performance City      | DALLAS               |
| Place of Performance State     | TX                   |
| Place of Performance Zip       | 75391                |
| Place of Performance Zip+4     |                      |
| Description                    | IT services contract |
| Subrecipient                   | SOFTWARE AG USA INC  |
| Period of Performance Start    | 1/1/2023             |
| Period of Performance End      | 12/26/2024           |

# Subward No: 19176-22295

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$301,891.94             |
| Subaward Date                  | 4/1/2023                 |
| Place of Performance Address 1 | 6820 S HARL AVE          |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | TEMPE                    |
| Place of Performance State     | AZ                       |
| Place of Performance Zip       | 85283                    |
| Place of Performance Zip+4     |                          |
| Description                    | computer services        |
| Subrecipient                   | INSIGHT PUBLIC SECTOR    |
| Period of Performance Start    | 4/1/2023                 |
| Period of Performance End      | 12/31/2026               |

# Subward No: 19176-17433

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$0.00                   |
| Subaward Date                  | 4/1/2023                 |
| Place of Performance Address 1 | 70 VALLEY STREAM PARKWAY |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Malvern                  |
| Place of Performance State     | PA                       |
| Place of Performance Zip       | 19355                    |
| Place of Performance Zip+4     |                          |
| Description                    | computer services        |
| Subrecipient                   | INSIGHT PUBLIC SECTOR    |
|                                |                          |

| Period of Performance Start | 4/1/2023   |
|-----------------------------|------------|
| Period of Performance End   | 12/31/2026 |

#### Subward No: 19176/17433

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$380,669.00             |
| Subaward Date                  | 7/1/2023                 |
| Place of Performance Address 1 | 70 VALLEY STREAM PARKWAY |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | MALVERN                  |
| Place of Performance State     | PA                       |
| Place of Performance Zip       | 19355                    |
| Place of Performance Zip+4     |                          |
| Description                    | Software Purchases       |
| Subrecipient                   | RICOH USA INC            |
| Period of Performance Start    | 7/1/2023                 |
| Period of Performance End      | 12/31/2026               |

### Subward No: 19176-630238

| Subaward Type                  | Contract: Purchase Order   |
|--------------------------------|--|
| Subaward Obligation            | \$140,000.00   |
| Subaward Date                  | 9/1/2022   |
| Place of Performance Address 1 | 1700 Market St Suite 1005  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Philadelphia   |
| Place of Performance State     | PA   |
| Place of Performance Zip       | 19103  |
| Place of Performance Zip+4     |  |
| Description                    | Mainframe contractor for MFaaS Project staffing, IT<br>Professional Services |
| Subrecipient                   | GUIDESOFT INC DBA KNOWLEDGE SERVICES   |
| Period of Performance Start    | 9/6/2022   |
| Period of Performance End      | 12/31/2026   |

### Subward No: 19176-16884

| Subaward Type       | Contract: Purchase Order |
|---------------------|--------------------------|
| Subaward Obligation | \$879,540.79             |
| Subaward Date       | 4/1/2022                 |

| 801 Silver Lake Blvd         |
|------------------------------|
|                              |
|                              |
| Dover                        |
| DE                           |
| 19901                        |
|                              |
| Software Service Maintenance |
| SHI INTERNATIONAL CORP       |
| 4/1/2022                     |
| 6/30/2022                    |
|                              |

### Subward No: 19279-511907

| Subaward Type                  | Contract: Purchase Order                                |
|--------------------------------|---|
| Subaward Obligation            | \$500,000.00  |
| Subaward Date                  | 4/1/2022  |
| Place of Performance Address 1 | 801 Silver Lake Blvd                                    |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Dover   |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19901   |
| Place of Performance Zip+4     |   |
| Description                    | Splunk License renewal and Capacity increase Quote #798 |
| Subrecipient                   | NUHARBOR SECURITY INC                                   |
| Period of Performance Start    | 4/1/2022  |
| Period of Performance End      | 6/30/2022   |

# Subward No: 19280-16884

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$1,564,343.87           |
| Subaward Date                  | 4/1/2022                 |
| Place of Performance Address 1 | 801 Silver Lake Blvd     |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Dover                    |
| Place of Performance State     | DE                       |
| Place of Performance Zip       | 19901                    |
| Place of Performance Zip+4     |                          |
|                                |                          |

| Description                 | Agency Training, evaluation and reporting duties and developer tools. |
|-----------------------------|---|
| Subrecipient                | SHI INTERNATIONAL CORP  |
| Period of Performance Start | 4/1/2022  |
| Period of Performance End   | 6/30/2022   |

# Subward No: 19109

| Subaward Type                  | Grant: Lump Sum Payment(s)   |
|--------------------------------|--|
| Subaward Obligation            | \$600,000.00   |
| Subaward Date                  | 4/12/2022  |
| Place of Performance Address 1 | 100 W. 10th Street   |
| Place of Performance Address 2 | Suite 606  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Wilmington   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19801  |
| Place of Performance Zip+4     |  |
| Description                    | Funding to address educational disparities for foster children that were exacerbated by the COVID-19 pandemic. |
| Subrecipient                   | Kind to Kids Foundation  |
| Period of Performance Start    | 4/12/2022  |
| Period of Performance End      | 12/31/2024   |

# Subward No: 19189-24928

| Subaward Type                  | Direct Payment                            |
|--------------------------------|---|
| Subaward Obligation            | \$99,992.00                               |
| Subaward Date                  | 1/9/2023                                  |
| Place of Performance Address 1 | 819 N WASHINGTON ST                       |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Wilmington                                |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19899                                     |
| Place of Performance Zip+4     |   |
| Description                    | Advertising and creative services         |
| Subrecipient                   | Aloysius, Butler & Clark Associates, Inc. |
| Period of Performance Start    | 1/9/2023                                  |
| Period of Performance End      | 12/31/2026                                |

#### Subward No: 19177-299895

| Subaward Type                  | Contract: Delivery Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$65,549.00              |
| Subaward Date                  | 3/10/2023                |
| Place of Performance Address 1 | 303B NATIONAL RD         |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Exton                    |
| Place of Performance State     | РА                       |
| Place of Performance Zip       | 19341                    |
| Place of Performance Zip+4     |                          |
| Description                    | Building Improvement     |
| Subrecipient                   | ECOSERVICES LLC          |
| Period of Performance Start    | 3/10/2023                |
| Period of Performance End      | 12/31/2026               |

# Subward No: 19177-25843

| Subaward Type                  | Contract: Purchase Order     |
|--------------------------------|------------------------------|
| Subaward Obligation            | \$12,900,000.00              |
| Subaward Date                  | 7/1/2023                     |
| Place of Performance Address 1 | 1825 Faulkland Rd            |
| Place of Performance Address 2 |                              |
| Place of Performance Address 3 |                              |
| Place of Performance City      | Wilmington                   |
| Place of Performance State     | DE                           |
| Place of Performance Zip       | 19805                        |
| Place of Performance Zip+4     |                              |
| Description                    | Building Improvement         |
| Subrecipient                   | COMMONWEALTH CONSTRUCTION CO |
| Period of Performance Start    | 7/1/2023                     |
| Period of Performance End      | 12/31/2026                   |

# Subward No: 19177-30207

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$93,275.00              |
| Subaward Date                  | 10/1/2023                |
| Place of Performance Address 1 | 1825 FAULKLAND RD        |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Wilmington               |
|                                |                          |

| Place of Performance State  | DE  |
|-----------------------------|---|
| Place of Performance Zip    | 19805                                     |
| Place of Performance Zip+4  |   |
| Description                 | Building Improvement                      |
| Subrecipient                | Facility Dynamics Engineering Corporation |
| Period of Performance Start | 10/1/2023                                 |
| Period of Performance End   | 12/31/2026                                |

# Subward No: 19177-19558

| Subaward Type                  | Contract: Purchase Order      |
|--------------------------------|-------------------------------|
| Subaward Obligation            | \$78,240.00                   |
| Subaward Date                  | 10/1/2023                     |
| Place of Performance Address 1 | 1825 FAULKLAND RD             |
| Place of Performance Address 2 |                               |
| Place of Performance Address 3 |                               |
| Place of Performance City      | Wilmington                    |
| Place of Performance State     | DE                            |
| Place of Performance Zip       | 19805                         |
| Place of Performance Zip+4     |                               |
| Description                    | Building Improvement          |
| Subrecipient                   | PLYMOUTH ENVIRONMENTAL CO INC |
| Period of Performance Start    | 10/1/2023                     |
| Period of Performance End      | 12/31/2023                    |

# Subward No: 19177-6674

| Subaward Type                  | Contract: Definitive Contract |
|--------------------------------|-------------------------------|
| Subaward Obligation            | \$1,163,105.00                |
| Subaward Date                  | 8/23/2022                     |
| Place of Performance Address 1 | 200 W Main Street             |
| Place of Performance Address 2 |                               |
| Place of Performance Address 3 |                               |
| Place of Performance City      | Middletown                    |
| Place of Performance State     | DE                            |
| Place of Performance Zip       | 19709                         |
| Place of Performance Zip+4     |                               |
| Description                    | Renovation of Wharton Hall    |
| Subrecipient                   | R G ARCHITECTS                |
| Period of Performance Start    | 8/23/2022                     |
| Period of Performance End      | 9/6/2022                      |

# Subward No: 18015-258955

| Subaward Type                  | Contract: Purchase Order   |
|--------------------------------|--|
| Subaward Obligation            | \$1,209,158.00   |
| Subaward Date                  | 9/1/2022   |
| Place of Performance Address 1 | 485 Park Way   |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Broomall   |
| Place of Performance State     | РА   |
| Place of Performance Zip       | 19008  |
| Place of Performance Zip+4     |  |
| Description                    | EOC Video Wall System Installation, Communications Devices/Systems |
| Subrecipient                   | VISUAL SOUND INC   |
| Period of Performance Start    | 9/1/2022   |
| Period of Performance End      | 12/31/2026   |

### Subward No: 24878\_18015

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$57,600.00   |
| Subaward Date                  | 1/20/2022   |
| Place of Performance Address 1 | 165 Brick Store Landing Rd  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Smyrna  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19977   |
| Place of Performance Zip+4     |   |
| Description                    | Emergency operations put life safety first, property<br>preservation and economic impact as priorities in managing<br>disasters |
| Subrecipient                   | P&C Roofing   |
| Period of Performance Start    | 1/20/2022   |
| Period of Performance End      | 4/20/2022   |

## Subward No: 17949-560289

| Subaward Type       | Contract: Definitive Contract |
|---------------------|-------------------------------|
| Subaward Obligation | \$1,800,000.00                |
| Subaward Date       | 2/9/2022                      |
|                     |                               |

| Place of Performance Address 1 | 165 Brick Store Landing Rd,                               |
|--------------------------------|---|
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Smyrna  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19977   |
| Place of Performance Zip+4     |   |
| Description                    | Services to provide COVID-19 testing throughout Delaware. |
| Subrecipient                   | VAULT MEDICAL SERVICES PA                                 |
| Period of Performance Start    | 2/9/2022  |
| Period of Performance End      | 3/31/2022   |

# Subward No: 17949-550494

| Subaward Type                  | Contract: Definitive Contract                             |
|--------------------------------|---|
| Subaward Obligation            | \$19,673,520.00   |
| Subaward Date                  | 1/1/2022  |
| Place of Performance Address 1 | 165 Brick Store Landing Road                              |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Smyrna  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19977   |
| Place of Performance Zip+4     |   |
| Description                    | Services to provide COVID-19 testing throughout Delaware. |
| Subrecipient                   | GOTHAMS LLC   |
| Period of Performance Start    | 2/15/2022   |
| Period of Performance End      | 3/31/2022   |

# Subward No: 17949-621325

| Subaward Type                  | Contract: Definitive Contract |  |
|--------------------------------|-------------------------------|--|
| Subaward Obligation            | \$4,776,148.00                |  |
| Subaward Date                  | 1/10/2022                     |  |
| Place of Performance Address 1 | 165 Brick Store Landing Road  |  |
| Place of Performance Address 2 |                               |  |
| Place of Performance Address 3 |                               |  |
| Place of Performance City      | Smyrna                        |  |
| Place of Performance State     | DE                            |  |
| Place of Performance Zip       | 19977                         |  |
| Place of Performance Zip+4     |                               |  |

| Description                 | Services to provide COVID-19 testing throughout Delaware. |
|-----------------------------|---|
| Subrecipient                | RANDOM RUBBER CHICKEN                                     |
| Period of Performance Start | 1/10/2022   |
| Period of Performance End   | 3/31/2022   |

# Subward No: 621429\_17949

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$1,350,000.00  |
| Subaward Date                  | 1/12/2022   |
| Place of Performance Address 1 | 1575 McKee Rd   |
| Place of Performance Address 2 | Suite 6   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Dover   |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19904   |
| Place of Performance Zip+4     |   |
| Description                    | COVID testing program. Ensuring the general public has access to COVID testing per the State Plan |
| Subrecipient                   | Transpara EHLP LLC dba Zebra Health Solutions   |
| Period of Performance Start    | 1/12/2022   |
| Period of Performance End      | 6/24/2022   |

### Subward No: 18014\_22005

| Subaward Type                  | Contract: Purchase Order                        |
|--------------------------------|---|
| Subaward Obligation            | \$96,918.99                                     |
| Subaward Date                  | 1/25/2023                                       |
| Place of Performance Address 1 | 820 Silver Lake Blvd                            |
| Place of Performance Address 2 | Suite 200                                       |
| Place of Performance Address 3 |   |
| Place of Performance City      | Dover   |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19904   |
| Place of Performance Zip+4     |   |
| Description                    | ENHANCED APX6500 MOBILE RADIO W/<br>ACCESSORIES |
| Subrecipient                   | MOTOROLA SOLUTIONS INC                          |
| Period of Performance Start    | 1/25/2023                                       |
| Period of Performance End      | 12/31/2024                                      |

٦

# Subward No: GSS22901-CMD\_VEHV01

Г

| Subaward Type                  | Contract: Purchase Order   |
|--------------------------------|--|
| Subaward Obligation            | \$2,073,382.00   |
| Subaward Date                  | 1/25/2022  |
| Place of Performance Address 1 | 743 BICENTENNIAL BLVD  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Dover  |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19904  |
| Place of Performance Zip+4     |  |
| Description                    | Procurement and design of a Mobile Command Unit Vehicle<br>to provide a command and control platform for DSP<br>leadership on site at critical incident, large public events and<br>natural disasters Funding provided by the American<br>Rescue Plan SLFRF. The current DSP Mobile Command is<br>over 25 years old and in need of replacement of both the<br>main vehicle and technology up-grades. |
| Subrecipient                   | ATLANTIC EMERGENCY SOLUTIONS INC   |
| Period of Performance Start    | 1/25/2022  |
| Period of Performance End      | 12/31/2023   |

| Subaward Type                  | Contract: Purchase Order                    |
|--------------------------------|---|
| Subaward Obligation            | \$1,855,170.00                              |
| Subaward Date                  | 10/1/2023                                   |
| Place of Performance Address 1 | 500 N King St                               |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Wilmington                                  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19801                                       |
| Place of Performance Zip+4     |   |
| Description                    | Holding cell plumbing services and upgrades |
| Subrecipient                   | AMAKOR INC                                  |
| Period of Performance Start    | 10/1/2023                                   |
| Period of Performance End      | 12/31/2026                                  |

| Subaward Type       | Contract: Purchase Order |
|---------------------|--------------------------|
| Subaward Obligation | \$271,402.00             |
| Subaward Date       | 3/7/2022                 |
|                     |                          |

| Place of Performance Address 1 | 500 N. King Street   |
|--------------------------------|--|
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Wilmington   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19801  |
| Place of Performance Zip+4     |  |
| Description                    | Upgrades of holding cells at Leonard L. Williams Justice<br>Center |
| Subrecipient                   | Jaed Corp  |
| Period of Performance Start    | 3/7/2022   |
| Period of Performance End      | 12/31/2024   |
| Primary Sector                 | public health work   |
| Purpose of Funds               | Contract follows DOL Wage Rates                                    |

# Subward No: 18396-656774

| Subaward Type                  | Contract: Purchase Order   |
|--------------------------------|--|
| Subaward Obligation            | \$343,950.50   |
| Subaward Date                  | 10/1/2023  |
| Place of Performance Address 1 | 100 Sunnyside Rd   |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Smyrna   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19977  |
| Place of Performance Zip+4     |  |
| Description                    | DHSS Hospital for the Chronically Ill Commissioning<br>needed om this project FY21/18396 |
| Subrecipient                   | CHINOOK SYSTEMS INC  |
| Period of Performance Start    | 10/1/2023  |
| Period of Performance End      | 12/31/2023   |

# Subward No: 18396-30078

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$3,955,995.00           |
| Subaward Date                  | 3/17/2022                |
| Place of Performance Address 1 | Sunnyside Road           |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Smryna                   |

| Place of Performance State  | DE  |
|-----------------------------|---|
| Place of Performance Zip    | 19977   |
| Place of Performance Zip+4  |   |
| Description                 | New Delaware Hospital for the Chronically Ill |
| Subrecipient                | Davis Bowen & Friedel Inc                     |
| Period of Performance Start | 3/17/2022                                     |
| Period of Performance End   | 12/31/2024                                    |
| Primary Sector              | public health work                            |
| Purpose of Funds            | Contract follows DOL Wage Rates               |

### Subward No: 18396-17673

| Subaward Type                  | Contract: Purchase Order           |
|--------------------------------|------------------------------------|
| Subaward Obligation            | \$566,679.00                       |
| Subaward Date                  | 4/28/2022                          |
| Place of Performance Address 1 | 100 Sunnyside Road                 |
| Place of Performance Address 2 |                                    |
| Place of Performance Address 3 |                                    |
| Place of Performance City      | Smyrna                             |
| Place of Performance State     | DE                                 |
| Place of Performance Zip       | 19977                              |
| Place of Performance Zip+4     |                                    |
| Description                    | Construction and building services |
| Subrecipient                   | WOHLSEN CONSTRUCTION COMPANY       |
| Period of Performance Start    | 4/28/2022                          |
| Period of Performance End      | 12/31/2024                         |

### Subward No: 18541-303187

| Subaward Type                  | Contract: Purchase Order    |
|--------------------------------|-----------------------------|
| Subaward Obligation            | \$9,258,916.43              |
| Subaward Date                  | 10/1/2023                   |
| Place of Performance Address 1 | 9615 PHILADELPHIA RD        |
| Place of Performance Address 2 |                             |
| Place of Performance Address 3 |                             |
| Place of Performance City      | ROSEDALE                    |
| Place of Performance State     | MD                          |
| Place of Performance Zip       | 21237                       |
| Place of Performance Zip+4     |                             |
| Description                    | construction services       |
| Subrecipient                   | KIMBALL CONSTRUCTION CO INC |

| Period of Performance Start | 10/1/2023  |
|-----------------------------|------------|
| Period of Performance End   | 12/31/2026 |

#### Subward No: 18541-25395

| Subaward Type                  | Contract: Purchase Order                                      |
|--------------------------------|---|
| Subaward Obligation            | \$721,150.00  |
| Subaward Date                  | 2/21/2022   |
| Place of Performance Address 1 | 5408 DuPont Pkwy  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Smyrna  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19977   |
| Place of Performance Zip+4     |   |
| Description                    | New Office of Management and Budget Food Service<br>Warehouse |
| Subrecipient                   | Jaed Corp   |
| Period of Performance Start    | 2/21/2022   |
| Period of Performance End      | 12/31/2024  |
| Primary Sector                 | public health work  |
| Purpose of Funds               | Contract follows DOL Wage Rates                               |

#### Subward No: 18550-656774

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$230,282.50             |
| Subaward Date                  | 6/5/2023                 |
| Place of Performance Address 1 | 1235 S CLARK ST          |
| Place of Performance Address 2 | #625                     |
| Place of Performance Address 3 |                          |
| Place of Performance City      | ARLINGTON                |
| Place of Performance State     | VA                       |
| Place of Performance Zip       | 22202                    |
| Place of Performance Zip+4     |                          |
| Description                    | Engineering consultant   |
| Subrecipient                   | CHINOOK SYSTEMS INC      |
| Period of Performance Start    | 6/5/2023                 |
| Period of Performance End      | 12/31/2026               |

# Subward No: 18550-18283

Subaward Type

| al |
|----|
|    |
|    |
|    |
|    |
|    |
|    |

### Subward No: 18017-610035

| Subaward Type                  | Contract: Definitive Contract       |
|--------------------------------|-------------------------------------|
| Subaward Obligation            | \$0.00                              |
| Subaward Date                  | 6/22/2021                           |
| Place of Performance Address 1 | 500 N. King Street                  |
| Place of Performance Address 2 |                                     |
| Place of Performance Address 3 |                                     |
| Place of Performance City      | Wilmington                          |
| Place of Performance State     | DE                                  |
| Place of Performance Zip       | 19801                               |
| Place of Performance Zip+4     |                                     |
| Description                    | Provide COVID-19 testing at Courts. |
| Subrecipient                   | W3 LLC DBA Healthcare IT Leaders    |
| Period of Performance Start    | 6/22/2021                           |
| Period of Performance End      | 2/27/2022                           |

# Subward No: 18214-17483

| Subaward Type                  | Contract: Definitive Contract |
|--------------------------------|-------------------------------|
| Subaward Obligation            | \$200,000.00                  |
| Subaward Date                  | 10/25/2021                    |
| Place of Performance Address 1 | 405 N. King Street            |
| Place of Performance Address 2 | Suite 507                     |
|                                |                               |

| Place of Performance Address 3 |   |
|--------------------------------|---|
| Place of Performance City      | Wilmington  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19801   |
| Place of Performance Zip+4     |   |
| Description                    | Provide services to allow for eFiling and case management<br>in Courts throughout Delaware. |
| Subrecipient                   | Morgan Lewis & Bockius LLP  |
| Period of Performance Start    | 10/25/2021  |
| Period of Performance End      | 3/31/2022   |

### Subward No: 18214-327000

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$800,000.00  |
| Subaward Date                  | 4/1/2022  |
| Place of Performance Address 1 | 500 East John Carpenter FRWY  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Irving  |
| Place of Performance State     | TX  |
| Place of Performance Zip       | 75062   |
| Place of Performance Zip+4     |   |
| Description                    | Design software project: a unified e-filing, case management<br>and document management system. |
| Subrecipient                   | FSX HOLDINGS LLC  |
| Period of Performance Start    | 4/1/2022  |
| Period of Performance End      | 12/31/2024  |

# Subward No: 18215-27762

| Subaward Type                  | Contract: Purchase Order           |
|--------------------------------|------------------------------------|
| Subaward Obligation            | \$67,610.00                        |
| Subaward Date                  | 1/1/2023                           |
| Place of Performance Address 1 | PO BOX 319                         |
| Place of Performance Address 2 |                                    |
| Place of Performance Address 3 |                                    |
| Place of Performance City      | DELAWARE CITY                      |
| Place of Performance State     | DE                                 |
| Place of Performance Zip       | 19706                              |
| Place of Performance Zip+4     |                                    |
| Description                    | technology installation contractor |

| Subrecipient                | PSC CONTRACTING INC |
|-----------------------------|---------------------|
| Period of Performance Start | 1/1/2023            |
| Period of Performance End   | 12/31/2026          |

# Subward No: 18215-472209

| Subaward Type                  | Contract: Purchase Order   |
|--------------------------------|--|
| Subaward Obligation            | \$4,873,601.81   |
| Subaward Date                  | 4/1/2022   |
| Place of Performance Address 1 | 1401 17th Street   |
| Place of Performance Address 2 | STE 525  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Denver   |
| Place of Performance State     | СО   |
| Place of Performance Zip       | 80202  |
| Place of Performance Zip+4     |  |
| Description                    | Funding to upgrade Courtroom technology and technology<br>expansion to prepare for remote and hybrid hearings.<br>Upgrades of courtroom technology, include cameras and<br>A/V system to allow eCourtroom proceedings to take place. |
| Subrecipient                   | FTR LTD  |
| Period of Performance Start    | 4/1/2022   |
| Period of Performance End      | 12/31/2026   |
|                                |  |

# Subward No: 18488-16884

| Contract: Purchase Order          |
|-----------------------------------|
| \$197,917.02                      |
| 1/1/2023                          |
| 290 DAVIDSON AVENUE               |
|                                   |
|                                   |
| SOMERSET                          |
| NJ                                |
| 08873                             |
|                                   |
| IT Cloud Infrastructure contract. |
| SHI INTERNATIONAL CORP            |
| 1/1/2023                          |
| 12/31/2026                        |
|                                   |

# Subward No: 18489-49758

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$55,166.77              |
| Subaward Date                  | 4/1/2022                 |
| Place of Performance Address 1 | 920 Justison Street      |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Wilmington               |
| Place of Performance State     | DE                       |
| Place of Performance Zip       | 19801                    |
| Place of Performance Zip+4     |                          |
| Description                    | Software purchase        |
| Subrecipient                   | Info Solutions LLC       |
| Period of Performance Start    | 4/1/2022                 |
| Period of Performance End      | 12/31/2024               |

# Subward No: 18298-17144

| Subaward Type                  | Contract: Definitive Contract                                |
|--------------------------------|--|
| Subaward Obligation            | \$238,000.00   |
| Subaward Date                  | 10/27/2021   |
| Place of Performance Address 1 | 217 Lisa Dr., Ste B  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | New Castle   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19720  |
| Place of Performance Zip+4     |  |
| Description                    | Provide classified driver training to develop the workforce. |
| Subrecipient                   | Bordentown Driver Training, LLC                              |
| Period of Performance Start    | 10/27/2021   |
| Period of Performance End      | 12/31/2026   |

# Subward No: 18300-24324

| Subaward Type                  | Contract: Definitive Contract |
|--------------------------------|-------------------------------|
| Subaward Obligation            | \$228,662.70                  |
| Subaward Date                  | 9/1/2021                      |
| Place of Performance Address 1 | 300 E Lea Blvd                |
| Place of Performance Address 2 |                               |
| Place of Performance Address 3 |                               |
| Place of Performance City      | Wilmington                    |
|                                |                               |

| Place of Performance State  | DE                                      |
|-----------------------------|---|
| Place of Performance Zip    | 19802                                   |
| Place of Performance Zip+4  |   |
| Description                 | provide cleanup along Delaware roadways |
| Subrecipient                | Goodwill DE and DE County               |
| Period of Performance Start | 9/1/2021                                |
| Period of Performance End   | 12/1/2024                               |

# Subward No: 18299-31213

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$80,000.00              |
| Subaward Date                  | 1/1/2023                 |
| Place of Performance Address 1 | 737 W LOMBARD STREET     |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | BALTIMORE                |
| Place of Performance State     | MD                       |
| Place of Performance Zip       | 21201                    |
| Place of Performance Zip+4     |                          |
| Description                    | Summer learning program  |
| Subrecipient                   | UNIVERSITY OF MD         |
| Period of Performance Start    | 1/1/2023                 |
| Period of Performance End      | 3/31/2023                |

| Subaward Type                  | Contract: Purchase Order             |
|--------------------------------|--------------------------------------|
| Subaward Obligation            | \$103,558.32                         |
| Subaward Date                  | 10/22/2021                           |
| Place of Performance Address 1 | 30 S Keller Rd                       |
| Place of Performance Address 2 | Ste 100                              |
| Place of Performance Address 3 |                                      |
| Place of Performance City      | Orlando                              |
| Place of Performance State     | FL                                   |
| Place of Performance Zip       | 32810                                |
| Place of Performance Zip+4     |                                      |
| Description                    | Point of Care Rapid Testing          |
| Subrecipient                   | "ABBOTT RAPID DX NORTH AMERICA, LLC" |
| Period of Performance Start    | 10/22/2021                           |
| Period of Performance End      | 3/1/2022                             |

| Primary Sector   | emergency response |
|------------------|--------------------|
| Purpose of Funds | Rapid Test Kits    |

#### Subward No: 0000018807

| Subaward Type                  | Contract: Purchase Order               |
|--------------------------------|--|
| Subaward Obligation            | \$310,496.28                           |
| Subaward Date                  | 10/4/2021                              |
| Place of Performance Address 1 | 4500 Turnberry DR                      |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Hanover Park                           |
| Place of Performance State     | IL                                     |
| Place of Performance Zip       | 60133                                  |
| Place of Performance Zip+4     |  |
| Description                    | Point of Care Rapid Testing            |
| Subrecipient                   | FISHER SCIENTIFIC                      |
| Period of Performance Start    | 10/4/2021                              |
| Period of Performance End      | 3/1/2022                               |
| Primary Sector                 | emergency response                     |
| Purpose of Funds               | Veritor Test Kits & COVID-19 test kits |

### Subward No: 0000023798

| Subaward Type                  | Contract: Purchase Order             |
|--------------------------------|--------------------------------------|
| Subaward Obligation            | \$96,000.00                          |
| Subaward Date                  | 10/24/2021                           |
| Place of Performance Address 1 | 824 INTERCHANGE BLVD                 |
| Place of Performance Address 2 |                                      |
| Place of Performance Address 3 |                                      |
| Place of Performance City      | NEWARK                               |
| Place of Performance State     | DE                                   |
| Place of Performance Zip       | 19711                                |
| Place of Performance Zip+4     |                                      |
| Description                    | Point of Care Rapid Testing          |
| Subrecipient                   | ANP TECHNOLOGIES INC                 |
| Period of Performance Start    | 10/24/2021                           |
| Period of Performance End      | 3/1/2022                             |
| Primary Sector                 | emergency response                   |
| Purpose of Funds               | Covid-19 Antigen Rapid Test Kit Pack |

| Subaward Type                  | Contract: Purchase Order           |
|--------------------------------|------------------------------------|
| Subaward Obligation            | \$232,000.00                       |
| Subaward Date                  | 5/9/2023                           |
| Place of Performance Address 1 | 30 Sunnyside Road                  |
| Place of Performance Address 2 |                                    |
| Place of Performance Address 3 |                                    |
| Place of Performance City      | Smyrna                             |
| Place of Performance State     | DE                                 |
| Place of Performance Zip       | 19977                              |
| Place of Performance Zip+4     |                                    |
| Description                    | SWITCHGEAR Environmental Equipment |
| Subrecipient                   | U S ELECTRICAL SERVICES Inc        |
| Period of Performance Start    | 5/9/2023                           |
| Period of Performance End      | 12/31/2026                         |

| Subaward Type                  | Contract: Purchase Order       |
|--------------------------------|--------------------------------|
| Subaward Obligation            | \$277,402.86                   |
| Subaward Date                  | 10/1/2023                      |
| Place of Performance Address 1 | 30 Sunnyside Rd                |
| Place of Performance Address 2 |                                |
| Place of Performance Address 3 |                                |
| Place of Performance City      | Smyrna                         |
| Place of Performance State     | DE                             |
| Place of Performance Zip       | 19977                          |
| Place of Performance Zip+4     |                                |
| Description                    | Permit/Certs/Trans/MisFee/Lics |
| Subrecipient                   | Town of Smyrna                 |
| Period of Performance Start    | 10/1/2023                      |
| Period of Performance End      | 12/31/2023                     |

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$822,250.00             |
| Subaward Date                  | 10/1/2023                |
| Place of Performance Address 1 | 30 Sunnyside Rd          |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
|                                |                          |

| Place of Performance City   | Smyrna                              |
|-----------------------------|-------------------------------------|
| Place of Performance State  | DE                                  |
| Place of Performance Zip    | 19977                               |
| Place of Performance Zip+4  |                                     |
| Description                 | METAL SIDING MATERIALS AND SERVICES |
| Subrecipient                | A & H METALS INC                    |
| Period of Performance Start | 10/1/2023                           |
| Period of Performance End   | 12/31/2023                          |

| Subaward Type                  | Contract: Purchase Order               |
|--------------------------------|--|
| Subaward Obligation            | \$153,329.00                           |
| Subaward Date                  | 10/1/2023                              |
| Place of Performance Address 1 | 30 Sunnyside Rd                        |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Smyrna                                 |
| Place of Performance State     | DE                                     |
| Place of Performance Zip       | 19977                                  |
| Place of Performance Zip+4     |  |
| Description                    | Fire Protection Materials and Services |
| Subrecipient                   | BEAR INDUSTRIES INC                    |
| Period of Performance Start    | 10/1/2023                              |
| Period of Performance End      | 12/31/2026                             |

| Subaward Type                  | Contract: Purchase Order       |
|--------------------------------|--------------------------------|
| Subaward Obligation            | \$301,246.00                   |
| Subaward Date                  | 10/1/2023                      |
| Place of Performance Address 1 | 30 Sunnyside Rd                |
| Place of Performance Address 2 |                                |
| Place of Performance Address 3 |                                |
| Place of Performance City      | Smyrna                         |
| Place of Performance State     | DE                             |
| Place of Performance Zip       | 19977                          |
| Place of Performance Zip+4     |                                |
| Description                    | ELEVATOR MATERIAL AND SERVICES |
| Subrecipient                   | DELAWARE ELEVATOR INC          |
| Period of Performance Start    | 10/1/2023                      |

| Subaward Type                  | Contract: Purchase Order            |
|--------------------------------|-------------------------------------|
| Subaward Obligation            | \$78,750.00                         |
| Subaward Date                  | 10/1/2023                           |
| Place of Performance Address 1 | 30 Sunnyside Rd                     |
| Place of Performance Address 2 |                                     |
| Place of Performance Address 3 |                                     |
| Place of Performance City      | Smyrna                              |
| Place of Performance State     | DE                                  |
| Place of Performance Zip       | 19977                               |
| Place of Performance Zip+4     |                                     |
| Description                    | Construction MATERIALS AND SERVICES |
| Subrecipient                   | DUREX COVERINGS INC                 |
| Period of Performance Start    | 10/1/2023                           |
| Period of Performance End      | 12/31/2023                          |

#### Subward No: 18470-28899

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$108,116.00             |
| Subaward Date                  | 10/1/2023                |
| Place of Performance Address 1 | 30 Sunnyside Rd          |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Smyrna                   |
| Place of Performance State     | DE                       |
| Place of Performance Zip       | 19977                    |
| Place of Performance Zip+4     |                          |
| Description                    | MATERIALS AND SERVICES   |
| Subrecipient                   | FLOORING SOLUTIONS INC   |
| Period of Performance Start    | 10/1/2023                |
| Period of Performance End      | 12/31/2026               |

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$64,499.00              |
| Subaward Date                  | 10/1/2023                |
| Place of Performance Address 1 | 30 Sunnyside Rd          |
|                                |                          |

| Place of Performance Address 2 |                               |
|--------------------------------|-------------------------------|
| Place of Performance Address 3 |                               |
| Place of Performance City      | Smyrna                        |
| Place of Performance State     | DE                            |
| Place of Performance Zip       | 19977                         |
| Place of Performance Zip+4     |                               |
| Description                    | ROOFING MATERIAL AND SERVICES |
| Subrecipient                   | QUALITY EXTERIORS             |
| Period of Performance Start    | 10/1/2023                     |
| Period of Performance End      | 12/31/2026                    |

| Subaward Type                  | Contract: Purchase Order                |
|--------------------------------|---|
| Subaward Obligation            | \$3,215,850.00                          |
| Subaward Date                  | 10/1/2023                               |
| Place of Performance Address 1 | 30 Sunnyside Rd                         |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Smyrna                                  |
| Place of Performance State     | DE                                      |
| Place of Performance Zip       | 19977                                   |
| Place of Performance Zip+4     |   |
| Description                    | Plumbing and HVAC Material and Services |
| Subrecipient                   | ID GRIFFITH INC                         |
| Period of Performance Start    | 10/1/2023                               |
| Period of Performance End      | 12/31/2023                              |

| Subaward Type                  | Contract: Purchase Order      |  |
|--------------------------------|-------------------------------|--|
| Subaward Obligation            | \$99,000.00                   |  |
| Subaward Date                  | 10/1/2023                     |  |
| Place of Performance Address 1 | 30 Sunnyside Rd               |  |
| Place of Performance Address 2 |                               |  |
| Place of Performance Address 3 |                               |  |
| Place of Performance City      | Smyrna                        |  |
| Place of Performance State     | DE                            |  |
| Place of Performance Zip       | 19977                         |  |
| Place of Performance Zip+4     |                               |  |
| Description                    | Masonry Material and Services |  |

| Subrecipient                | JOSEPH RIZZO & SONS |
|-----------------------------|---------------------|
| Period of Performance Start | 10/1/2023           |
| Period of Performance End   | 12/31/2026          |

| Subaward Type                  | Contract: Purchase Order      |
|--------------------------------|-------------------------------|
| Subaward Obligation            | \$73,911.00                   |
| Subaward Date                  | 10/1/2023                     |
| Place of Performance Address 1 | 30 Sunnyside Rd               |
| Place of Performance Address 2 |                               |
| Place of Performance Address 3 |                               |
| Place of Performance City      | Smyrna                        |
| Place of Performance State     | DE                            |
| Place of Performance Zip       | 19977                         |
| Place of Performance Zip+4     |                               |
| Description                    | PAINTING- MATERIALS / SERVICE |
| Subrecipient                   | M & S PAINTING INC            |
| Period of Performance Start    | 10/1/2023                     |
| Period of Performance End      | 12/31/2026                    |

# Subward No: 18470-7141

| Subaward Type                  | Contract: Purchase Order       |
|--------------------------------|--------------------------------|
| Subaward Obligation            | \$103,198.00                   |
| Subaward Date                  | 10/1/2023                      |
| Place of Performance Address 1 | 30 Sunnyside Rd                |
| Place of Performance Address 2 |                                |
| Place of Performance Address 3 |                                |
| Place of Performance City      | Smyrna                         |
| Place of Performance State     | DE                             |
| Place of Performance Zip       | 19977                          |
| Place of Performance Zip+4     |                                |
| Description                    | Sitework and Landscaping       |
| Subrecipient                   | REYBOLD CONSTRUCTION GROUP LLC |
| Period of Performance Start    | 10/1/2023                      |
| Period of Performance End      | 12/31/2026                     |

| Subaward Type       | Contract: Purchase Order |
|---------------------|--------------------------|
| Subaward Obligation | \$219,450.00             |
|                     |                          |

| Subaward Date                  | 10/1/2023                          |
|--------------------------------|------------------------------------|
| Place of Performance Address 1 | 30 Sunnyside Rd                    |
| Place of Performance Address 2 |                                    |
| Place of Performance Address 3 |                                    |
| Place of Performance City      | Smyrna                             |
| Place of Performance State     | DE                                 |
| Place of Performance Zip       | 19977                              |
| Place of Performance Zip+4     |                                    |
| Description                    | ALUMINUM AND GLASS SERVICES        |
| Subrecipient                   | WALKER AND LABERGE OF DELAWARE INC |
| Period of Performance Start    | 10/1/2023                          |
| Period of Performance End      | 12/31/2026                         |

| Subaward Type                  | Contract: Purchase Order            |
|--------------------------------|-------------------------------------|
| Subaward Obligation            | \$1,695,500.00                      |
| Subaward Date                  | 10/1/2023                           |
| Place of Performance Address 1 | 30 Sunnyside Rd                     |
| Place of Performance Address 2 |                                     |
| Place of Performance Address 3 |                                     |
| Place of Performance City      | Smyrna                              |
| Place of Performance State     | DE                                  |
| Place of Performance Zip       | 19977                               |
| Place of Performance Zip+4     |                                     |
| Description                    | Carpentry, Drywall and General Work |
| Subrecipient                   | WALLWORKS INC                       |
| Period of Performance Start    | 10/1/2023                           |
| Period of Performance End      | 12/31/2026                          |

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$1,986,919.00           |
| Subaward Date                  | 10/1/2023                |
| Place of Performance Address 1 | 30 Sunnyside Rd          |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Smyrna                   |
| Place of Performance State     | DE                       |
| Place of Performance Zip       | 19977                    |
|                                |                          |

| Place of Performance Zip+4  |  |
|-----------------------------|--|
| Description                 | CONSTRUCTION MANAGEMENT ADMINISTRATION |
| Subrecipient                | WOHLSEN CONSTRUCTION COMPANY           |
| Period of Performance Start | 10/1/2023                              |
| Period of Performance End   | 12/31/2026                             |

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$808,800.00             |
| Subaward Date                  | 10/1/2023                |
| Place of Performance Address 1 | 30 Sunnyside Rd          |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Smyrna                   |
| Place of Performance State     | DE                       |
| Place of Performance Zip       | 19977                    |
| Place of Performance Zip+4     |                          |
| Description                    | construction services    |
| Subrecipient                   | R C FABRICATORS INC      |
| Period of Performance Start    | 10/1/2023                |
| Period of Performance End      | 12/31/2023               |

# Subward No: 18574-630238

| Subaward Type                  | Contract: Purchase Order             |
|--------------------------------|--------------------------------------|
| Subaward Obligation            | \$1,321,415.00                       |
| Subaward Date                  | 2/8/2023                             |
| Place of Performance Address 1 | 9800 CROSSPOINT BOULEVARD            |
| Place of Performance Address 2 |                                      |
| Place of Performance Address 3 |                                      |
| Place of Performance City      | INDIANAPOLIS                         |
| Place of Performance State     | IN                                   |
| Place of Performance Zip       | 46256                                |
| Place of Performance Zip+4     |                                      |
| Description                    | IT Professional Services             |
| Subrecipient                   | GUIDESOFT INC DBA KNOWLEDGE SERVICES |
| Period of Performance Start    | 2/8/2023                             |
| Period of Performance End      | 12/31/2026                           |

l

| Subaward Type                  | Contract: Purchase Order   |
|--------------------------------|--|
| Subaward Obligation            | \$0.00   |
| Subaward Date                  | 2/1/2022   |
| Place of Performance Address 1 | 225 Executive Drive  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Moorestown   |
| Place of Performance State     | NJ   |
| Place of Performance Zip       | 08057  |
| Place of Performance Zip+4     |  |
| Description                    | "This upgrade would allow us to move away from<br>paper-based inspections and applications, which must be<br>hand-entered, to electronic reporting and recordkeeping.<br>Reductions in staff time to improved efficiency and allow<br>for more consistent and timely communication with the<br>public and regulated community are the outcomes of this<br>request. " |
| Subrecipient                   | MTS SOFTWARE SOLUTIONS INC   |
| Period of Performance Start    | 2/1/2022   |
| Period of Performance End      | 2/1/2023   |
| Primary Sector                 | Other  |
| Purpose of Funds               | "Replace of existing data systems within the Division of<br>Public Health, Health Systems Protection section."   |

| Subaward Type                  | Contract: Purchase Order   |
|--------------------------------|--|
| Subaward Obligation            | \$377,200.15   |
| Subaward Date                  | 2/1/2022   |
| Place of Performance Address 1 | 1390 Ridgeview Dr  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Allentown  |
| Place of Performance State     | PA   |
| Place of Performance Zip       | 18104  |
| Place of Performance Zip+4     |  |
| Description                    | "This upgrade would allow us to move away from<br>paper-based inspections and applications, which must be<br>hand-entered, to electronic reporting and recordkeeping.<br>Reductions in staff time to improved efficiency and allow<br>for more consistent and timely communication with the<br>public and regulated community are the outcomes of this<br>request. " |
| Subrecipient                   | COMPUTER AID INC   |
| Period of Performance Start    | 2/1/2022   |

| Period of Performance End | 2/1/2023   |
|---------------------------|--|
| Primary Sector            | Other  |
|                           | "Replace of existing data systems within the Division of<br>Public Health, Health Systems Protection section." |

#### Subward No: 0000586945

| Subaward Type                  | Contract: Purchase Order            |
|--------------------------------|-------------------------------------|
| Subaward Obligation            | \$958,380.00                        |
| Subaward Date                  | 3/3/2022                            |
| Place of Performance Address 1 | 1 Vavala Way                        |
| Place of Performance Address 2 |                                     |
| Place of Performance Address 3 |                                     |
| Place of Performance City      | New Castle                          |
| Place of Performance State     | DE                                  |
| Place of Performance Zip       | 19720                               |
| Place of Performance Zip+4     |                                     |
| Description                    | To purchase mobile vehicle barriers |
| Subrecipient                   | Advanced Security Technologies LLC  |
| Period of Performance Start    | 3/3/2022                            |
| Period of Performance End      | 3/3/2022                            |

#### Subward No: 0000587078

| Subaward Type                  | Contract: Purchase Order         |
|--------------------------------|----------------------------------|
| Subaward Obligation            | \$0.00                           |
| Subaward Date                  | 3/3/2022                         |
| Place of Performance Address 1 | 1 Park Place                     |
| Place of Performance Address 2 |                                  |
| Place of Performance Address 3 |                                  |
| Place of Performance City      | Milford                          |
| Place of Performance State     | DE                               |
| Place of Performance Zip       | 19963                            |
| Place of Performance Zip+4     |                                  |
| Description                    | purchase mobile vehicle barriers |
| Subrecipient                   | Davis Bowen & Friedel Inc        |
| Period of Performance Start    | 3/3/2022                         |
| Period of Performance End      | 12/31/2024                       |

# Subward No: 18508-33778

| Subaward Type | Contract: Purchase Order |
|---------------|--------------------------|
|               |                          |

| Subaward Obligation            | \$329,970.00                 |
|--------------------------------|------------------------------|
| Subaward Date                  | 4/1/2022                     |
| Place of Performance Address 1 | ONE DELL WAY                 |
| Place of Performance Address 2 |                              |
| Place of Performance Address 3 |                              |
| Place of Performance City      | ROUND ROCK                   |
| Place of Performance State     | TX                           |
| Place of Performance Zip       | 78682                        |
| Place of Performance Zip+4     |                              |
| Description                    | technology purchase, laptops |
| Subrecipient                   | DELL MARKETING LP            |
| Period of Performance Start    | 4/1/2022                     |
| Period of Performance End      | 6/30/2022                    |

#### Subward No: 18549-167948

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$260,000.00             |
| Subaward Date                  | 10/1/2023                |
| Place of Performance Address 1 | 843 S 100 W              |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | LOGAN                    |
| Place of Performance State     | UT                       |
| Place of Performance Zip       | 84321                    |
| Place of Performance Zip+4     |                          |
| Description                    | e-suites                 |
| Subrecipient                   | JOURNAL TECHNOLOGIES INC |
| Period of Performance Start    | 10/1/2023                |
| Period of Performance End      | 12/31/2023               |

| Subaward Type                  | Contract: Definitive Contract |
|--------------------------------|-------------------------------|
| Subaward Obligation            | \$0.00                        |
| Subaward Date                  | 1/1/2020                      |
| Place of Performance Address 1 | 819 N. Washington Street      |
| Place of Performance Address 2 |                               |
| Place of Performance Address 3 |                               |
| Place of Performance City      | Wilmington                    |
| Place of Performance State     | DE                            |
|                                |                               |

| Place of Performance Zip    | 19801   |
|-----------------------------|---|
| Place of Performance Zip+4  |   |
| Description                 | Healthcare Marketplace Open Enrollment Marketing<br>Campaign            |
| Subrecipient                | Aloysius, Butler & Clark Associates, Inc.                               |
| Period of Performance Start | 12/27/2021  |
| Period of Performance End   | 11/1/2022   |
| Primary Sector              | emergency response  |
| Purpose of Funds            | Marketing services related to the Healthplace Insurance<br>Marketplace. |

#### Subward No: 18362-171231

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$150,000.00  |
| Subaward Date                  | 3/15/2023   |
| Place of Performance Address 1 | 275 SEVENTH AVENUE  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | New York  |
| Place of Performance State     | NY  |
| Place of Performance Zip       | 10001   |
| Place of Performance Zip+4     |   |
| Description                    | BRFSS Grant-Prevention Interviewing Services for<br>Behavioral Risk Factor Survey |
| Subrecipient                   | ABT SRBI INC  |
| Period of Performance Start    | 3/15/2023   |
| Period of Performance End      | 12/31/2026  |

#### Subward No: 18362-24928

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$156,000.00             |
| Subaward Date                  | 7/1/2023                 |
| Place of Performance Address 1 | 819 N WASHINGTON ST      |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Wilmington               |
| Place of Performance State     | DE                       |
| Place of Performance Zip       | 19801                    |
| Place of Performance Zip+4     |                          |
| Description                    | creative consultants     |
|                                |                          |

| Subrecipient                | Aloysius, Butler & Clark Associates, Inc. |
|-----------------------------|---|
| Period of Performance Start | 7/1/2023                                  |
| Period of Performance End   | 12/31/2026                                |

| Subaward Type                  | Grant: Lump Sum Payment(s)                                    |
|--------------------------------|---|
| Subaward Obligation            | \$144,444.44  |
| Subaward Date                  | 10/26/2021  |
| Place of Performance Address 1 | 725 Horsepond Road  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Dover   |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19901   |
| Place of Performance Zip+4     |   |
| Description                    | Increase and/or retain staffing capacity impacted by COVID-19 |
| Subrecipient                   | UHS of Dover LLC  |
| Period of Performance Start    | 10/26/2021  |
| Period of Performance End      | 12/31/2021  |
| Primary Sector                 | health care   |
| Purpose of Funds               | Provide staffing relief for COVID-19                          |

| Subaward Type                  | Grant: Lump Sum Payment(s)                                    |
|--------------------------------|---|
| Subaward Obligation            | \$145,833.33  |
| Subaward Date                  | 10/26/2021  |
| Place of Performance Address 1 | 100 Rockford Drive  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Newark  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19713   |
| Place of Performance Zip+4     |   |
| Description                    | Increase and/or retain staffing capacity impacted by COVID-19 |
| Subrecipient                   | UHS of Rockford LLC   |
| Period of Performance Start    | 10/26/2021  |
| Period of Performance End      | 12/31/2021  |
| Primary Sector                 | health care   |
|                                |   |

| Subaward Type                  | Grant: Lump Sum Payment(s)                                    |
|--------------------------------|---|
| Subaward Obligation            | \$2,134,062.93  |
| Subaward Date                  | 11/15/2021  |
| Place of Performance Address 1 | 1600 Rockland Road  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Wilmington  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19803   |
| Place of Performance Zip+4     |   |
| Description                    | Increase and/or retain staffing capacity impacted by COVID-19 |
| Subrecipient                   | The Nemours Foundation  |
| Period of Performance Start    | 11/15/2021  |
| Period of Performance End      | 12/31/2021  |
| Primary Sector                 | health care   |
| Purpose of Funds               | Provide staffing relief for COVID-19                          |

| Subaward Type                  | Grant: Lump Sum Payment(s)                                    |
|--------------------------------|---|
| Subaward Obligation            | \$1,984,952.12  |
| Subaward Date                  | 10/26/2021  |
| Place of Performance Address 1 | 701 North Clayton Street                                      |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Wilmington  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19805   |
| Place of Performance Zip+4     |   |
| Description                    | Increase and/or retain staffing capacity impacted by COVID-19 |
| Subrecipient                   | St. Francis Hospital, Inc                                     |
| Period of Performance Start    | 10/26/2021  |
| Period of Performance End      | 12/31/2021  |
| Primary Sector                 | health care   |
| Purpose of Funds               | Provide staffing relief for COVID-19                          |

| Subaward Type                  | Grant: Lump Sum Payment(s)                                    |
|--------------------------------|---|
| Subaward Obligation            | \$113,888.89  |
| Subaward Date                  | 11/1/2021   |
| Place of Performance Address 1 | 21655 Biden Avenue  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Georgetown  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19947   |
| Place of Performance Zip+4     |   |
| Description                    | Increase and/or retain staffing capacity impacted by COVID-19 |
| Subrecipient                   | SUN Behavioral Delaware                                       |
| Period of Performance Start    | 11/1/2021   |
| Period of Performance End      | 12/31/2021  |
| Primary Sector                 | health care   |
| Purpose of Funds               | Provide staffing relief for COVID-19                          |

#### Subward No: 071620025

| Subaward Type                  | Grant: Lump Sum Payment(s)                                    |
|--------------------------------|---|
| Subaward Obligation            | \$2,015,731.87  |
| Subaward Date                  | 11/2/2021   |
| Place of Performance Address 1 | 801 Middleford Road   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Seaford   |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19973   |
| Place of Performance Zip+4     |   |
| Description                    | Increase and/or retain staffing capacity impacted by COVID-19 |
| Subrecipient                   | Tidal Health Nanticoke Memorial Hospital                      |
| Period of Performance Start    | 11/2/2021   |
| Period of Performance End      | 12/31/2021  |
| Primary Sector                 | health care   |
| Purpose of Funds               | Provide staffing relief for COVID-19                          |

#### Subward No: 069885374

Γ

| Subaward Type                  | Grant: Lump Sum Payment(s)                                    |
|--------------------------------|---|
| Subaward Obligation            | \$2,154,582.76  |
| Subaward Date                  | 11/15/2021  |
| Place of Performance Address 1 | 424 Savannah Road   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Lewes   |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19958   |
| Place of Performance Zip+4     |   |
| Description                    | Increase and/or retain staffing capacity impacted by COVID-19 |
| Subrecipient                   | Beebe Medical Center Inc                                      |
| Period of Performance Start    | 11/15/2021  |
| Period of Performance End      | 12/31/2021  |
| Primary Sector                 | health care   |
| Purpose of Funds               | Provide staffing relief for COVID-19                          |

| Subaward Type                  | Grant: Lump Sum Payment(s)                                    |
|--------------------------------|---|
| Subaward Obligation            | \$4,124,487.00  |
| Subaward Date                  | 11/15/2021  |
| Place of Performance Address 1 | 640 S. State Street   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Dover   |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19901   |
| Place of Performance Zip+4     |   |
| Description                    | Increase and/or retain staffing capacity impacted by COVID-19 |
| Subrecipient                   | Bayhealth Medical Center, Inc.                                |
| Period of Performance Start    | 11/15/2021  |
| Period of Performance End      | 12/31/2021  |
| Primary Sector                 | health care   |
| Purpose of Funds               | Provide staffing relief for COVID-19                          |

| Subaward Type       | Grant: Lump Sum Payment(s) |
|---------------------|----------------------------|
| Subaward Obligation | \$12,086,183.31            |

| Subaward Date                  | 12/2/2021   |
|--------------------------------|---|
| Place of Performance Address 1 | 501 W 14th Street   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Wilmington  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19801   |
| Place of Performance Zip+4     |   |
| Description                    | Increase and/or retain staffing capacity impacted by COVID-19 |
| Subrecipient                   | Christiana Care Health Services Inc                           |
| Period of Performance Start    | 12/2/2021   |
| Period of Performance End      | 12/31/2021  |
| Primary Sector                 | health care   |
| Purpose of Funds               | Provide staffing relief for COVID-19                          |

| Subaward Type                  | Grant: Lump Sum Payment(s)  |
|--------------------------------|---|
| Subaward Obligation            | \$174,304.00  |
| Subaward Date                  | 1/5/2022  |
| Place of Performance Address 1 | 420 Delaware Drive  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Fort Washington   |
| Place of Performance State     | PA  |
| Place of Performance Zip       | 19034   |
| Place of Performance Zip+4     |   |
| Description                    | expect to recruit and retain additional staff to assist with staff shortages as a result of the COVID-19 pandemic |
| Subrecipient                   | ACTS RETIREMENT LIFE COMMUNITIES INC  |
| Period of Performance Start    | 1/5/2022  |
| Period of Performance End      | 12/31/2024  |
| Primary Sector                 | home- and community-based health care or assistance with activities of daily living                               |
| Purpose of Funds               | to provide LTC facilities with grant funding for retaining<br>and recruiting staffing due to COVID-19             |

| Subaward Type       | Grant: Lump Sum Payment(s) |
|---------------------|----------------------------|
| Subaward Obligation | \$728,699.00               |
|                     |                            |

| Subaward Date                  | 3/15/2022   |
|--------------------------------|---|
| Place of Performance Address 1 | 2723 Shipley Road   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Wilmington  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19810   |
| Place of Performance Zip+4     |   |
| Description                    | expect to recruit and retain additional staff to assist with staff shortages as a result of the COVID-19 pandemic |
| Subrecipient                   | SNH DEL TENANT LLC- SHIPLEY MANOR   |
| Period of Performance Start    | 3/15/2022   |
| Period of Performance End      | 12/31/2024  |
| Primary Sector                 | home- and community-based health care or assistance with activities of daily living                               |
| Purpose of Funds               | to provide LTC facilities with grant funding for retaining<br>and recruiting staffing due to COVID-19             |

| Subaward Type                  | Grant: Lump Sum Payment(s)  |
|--------------------------------|---|
| Subaward Obligation            | \$176,234.00  |
| Subaward Date                  | 3/15/2022   |
| Place of Performance Address 1 | 21111 Arrington Drive   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Selbyville  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19975   |
| Place of Performance Zip+4     |   |
| Description                    | expect to recruit and retain additional staff to assist with staff shortages as a result of the COVID-19 pandemic |
| Subrecipient                   | WELL BL OPCO LLC  |
| Period of Performance Start    | 3/15/2022   |
| Period of Performance End      | 12/31/2024  |
| Primary Sector                 | home- and community-based health care or assistance with activities of daily living                               |
| Purpose of Funds               | to provide LTC facilities with grant funding for retaining<br>and recruiting staffing due to COVID-19             |

| Sul | baward Type | Grant: Lump Sum Payment(s) |
|-----|-------------|----------------------------|
|     |             |                            |

| Subaward Obligation            | \$831,130.00  |
|--------------------------------|---|
| Subaward Date                  | 1/1/2022  |
| Place of Performance Address 1 | 110 W. North Street   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Georgetown  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19947   |
| Place of Performance Zip+4     |   |
| Description                    | expect to recruit and retain additional staff to assist with staff shortages as a result of the COVID-19 pandemic |
| Subrecipient                   | HARRISON SENIOR LIVING OF GEORGETOWN  |
| Period of Performance Start    | 1/1/2022  |
| Period of Performance End      | 12/31/2024  |
| Primary Sector                 | home- and community-based health care or assistance with activities of daily living                               |
| Purpose of Funds               | to provide LTC facilities with grant funding for retaining<br>and recruiting staffing due to COVID-19             |

| Subaward Type                  | Grant: Lump Sum Payment(s)   |
|--------------------------------|--|
| Subaward Obligation            | \$780,962.00   |
| Subaward Date                  | 1/1/2022   |
| Place of Performance Address 1 | 700 Marvel Road  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Milford  |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19963  |
| Place of Performance Zip+4     |  |
| Description                    | expect to recruit and retain additional staff to assist with<br>staff shortages as a result of the COVID-19 pandemic |
| Subrecipient                   | 700 MARVEL ROAD OPERATIONS LLC   |
| Period of Performance Start    | 1/1/2022   |
| Period of Performance End      | 12/31/2024   |
| Primary Sector                 | home- and community-based health care or assistance with activities of daily living                                  |
| Purpose of Funds               | to provide LTC facilities with grant funding for retaining<br>and recruiting staffing due to COVID-19                |

# Subward No: 18206-19849

Γ

T

| Subaward Type                  | Grant: Lump Sum Payment(s)  |
|--------------------------------|---|
| Subaward Obligation            | \$769,070.00  |
| Subaward Date                  | 1/1/2022  |
| Place of Performance Address 1 | 5651 Limestone Rd   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Wilmington  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19808   |
| Place of Performance Zip+4     |   |
| Description                    | expect to recruit and retain additional staff to assist with staff shortages as a result of the COVID-19 pandemic |
| Subrecipient                   | MANOR CARE - PIKE CREEK   |
| Period of Performance Start    | 1/1/2022  |
| Period of Performance End      | 12/31/2024  |
| Primary Sector                 | home- and community-based health care or assistance with activities of daily living                               |
| Purpose of Funds               | to provide LTC facilities with grant funding for retaining<br>and recruiting staffing due to COVID-19             |

| Subaward Type                  | Grant: Lump Sum Payment(s)  |
|--------------------------------|---|
| Subaward Obligation            | \$742,424.00  |
| Subaward Date                  | 1/1/2022  |
| Place of Performance Address 1 | 1080 Silver Lake Blvd   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Dover   |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19904   |
| Place of Performance Zip+4     |   |
| Description                    | expect to recruit and retain additional staff to assist with staff shortages as a result of the COVID-19 pandemic |
| Subrecipient                   | COMPLETE CARE AT SILVER LAKE LLC  |
| Period of Performance Start    | 1/1/2022  |
| Period of Performance End      | 12/31/2024  |
| Primary Sector                 | home- and community-based health care or assistance with activities of daily living                               |
| Purpose of Funds               | to provide LTC facilities with grant funding for retaining<br>and recruiting staffing due to COVID-19             |

| Subaward Type                  | Grant: Lump Sum Payment(s)   |
|--------------------------------|--|
| Subaward Obligation            | \$740,453.00   |
| Subaward Date                  | 1/1/2022   |
| Place of Performance Address 1 | 1100 Norman Eskridge Highway   |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Seaford  |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19973  |
| Place of Performance Zip+4     |  |
| Description                    | expect to recruit and retain additional staff to assist with<br>staff shortages as a result of the COVID-19 pandemic |
| Subrecipient                   | 1100 NORMAN ESKRIDGE HIGHWAY LLC   |
| Period of Performance Start    | 1/1/2022   |
| Period of Performance End      | 12/31/2024   |
| Primary Sector                 | home- and community-based health care or assistance with activities of daily living                                  |
| Purpose of Funds               | to provide LTC facilities with grant funding for retaining<br>and recruiting staffing due to COVID-19                |

| Subaward Type                  | Grant: Lump Sum Payment(s)   |
|--------------------------------|--|
| Subaward Obligation            | \$738,597.00   |
| Subaward Date                  | 1/1/2022   |
| Place of Performance Address 1 | 1225 Walker Road   |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Dover  |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19904  |
| Place of Performance Zip+4     |  |
| Description                    | expect to recruit and retain additional staff to assist with<br>staff shortages as a result of the COVID-19 pandemic |
| Subrecipient                   | CAPITOL HEALTHCARE   |
| Period of Performance Start    | 1/1/2022   |
| Period of Performance End      | 12/31/2024   |
| Primary Sector                 | home- and community-based health care or assistance with activities of daily living                                  |
| Purpose of Funds               | to provide LTC facilities with grant funding for retaining<br>and recruiting staffing due to COVID-19                |

| Subaward Type                  | Grant: Lump Sum Payment(s)  |
|--------------------------------|---|
| Subaward Obligation            | \$720,981.00  |
| Subaward Date                  | 1/1/2022  |
| Place of Performance Address 1 | 700 Foulk Rd  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Wilmington  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19803   |
| Place of Performance Zip+4     |   |
| Description                    | expect to recruit and retain additional staff to assist with staff shortages as a result of the COVID-19 pandemic |
| Subrecipient                   | MANOR CARE OF WILMINGTON DE LLC   |
| Period of Performance Start    | 1/1/2022  |
| Period of Performance End      | 12/31/2024  |
| Primary Sector                 | home- and community-based health care or assistance with activities of daily living                               |
| Purpose of Funds               | to provide LTC facilities with grant funding for retaining<br>and recruiting staffing due to COVID-19             |

| Subaward Type                  | Grant: Lump Sum Payment(s)   |
|--------------------------------|--|
| Subaward Obligation            | \$716,138.00   |
| Subaward Date                  | 1/1/2022   |
| Place of Performance Address 1 | 715 East King Street   |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Seaford  |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19973  |
| Place of Performance Zip+4     |  |
| Description                    | expect to recruit and retain additional staff to assist with<br>staff shortages as a result of the COVID-19 pandemic |
| Subrecipient                   | 715 EAST KING STREET OPERATIONS LLC  |
| Period of Performance Start    | 1/1/2022   |
| Period of Performance End      | 12/31/2024   |
| Primary Sector                 | home- and community-based health care or assistance with activities of daily living                                  |
| Purpose of Funds               | to provide LTC facilities with grant funding for retaining<br>and recruiting staffing due to COVID-19                |

| Subaward Type                  | Grant: Lump Sum Payment(s)  |
|--------------------------------|---|
| Subaward Obligation            | \$704,874.00  |
| Subaward Date                  | 1/1/2022  |
| Place of Performance Address 1 | 26002 John J Williams Hwy   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Millsboro   |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19966   |
| Place of Performance Zip+4     |   |
| Description                    | expect to recruit and retain additional staff to assist with staff shortages as a result of the COVID-19 pandemic |
| Subrecipient                   | PENINSULA HEALTHCARE LLC  |
| Period of Performance Start    | 1/1/2022  |
| Period of Performance End      | 12/31/2024  |
| Primary Sector                 | home- and community-based health care or assistance with activities of daily living                               |
| Purpose of Funds               | to provide LTC facilities with grant funding for retaining<br>and recruiting staffing due to COVID-19             |

| Subaward Type                  | Grant: Lump Sum Payment(s)   |
|--------------------------------|--|
| Subaward Obligation            | \$609,830.00   |
| Subaward Date                  | 1/1/2022   |
| Place of Performance Address 1 | 3322 Silverside Road   |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Wilmington   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19810  |
| Place of Performance Zip+4     |  |
| Description                    | expect to recruit and retain additional staff to assist with<br>staff shortages as a result of the COVID-19 pandemic |
| Subrecipient                   | ONIX SILVERSIDE LLC  |
| Period of Performance Start    | 1/1/2022   |
| Period of Performance End      | 12/31/2024   |
| Primary Sector                 | home- and community-based health care or assistance with activities of daily living                                  |
|                                | to provide LTC facilities with grant funding for retaining   |

| Subaward Type                  | Grant: Lump Sum Payment(s)   |
|--------------------------------|--|
| Subaward Obligation            | \$609,064.00   |
| Subaward Date                  | 1/1/2022   |
| Place of Performance Address 1 | 500 South Broad Street   |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Middletown   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19709  |
| Place of Performance Zip+4     |  |
| Description                    | expect to recruit and retain additional staff to assist with<br>staff shortages as a result of the COVID-19 pandemic |
| Subrecipient                   | BROADMEADOW HEALTHCARE   |
| Period of Performance Start    | 1/1/2022   |
| Period of Performance End      | 12/31/2024   |
| Primary Sector                 | home- and community-based health care or assistance with activities of daily living                                  |
| Purpose of Funds               | to provide LTC facilities with grant funding for retaining<br>and recruiting staffing due to COVID-19                |

| Subaward Type                  | Grant: Lump Sum Payment(s)   |
|--------------------------------|--|
| Subaward Obligation            | \$604,892.00   |
| Subaward Date                  | 1/1/2022   |
| Place of Performance Address 1 | 101 Delaware Avenue  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Delmar   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19940  |
| Place of Performance Zip+4     |  |
| Description                    | expect to recruit and retain additional staff to assist with<br>staff shortages as a result of the COVID-19 pandemic |
| Subrecipient                   | 101 E DELAWARE AVENUE OPERATIONS LLC   |
| Period of Performance Start    | 1/1/2022   |
| Period of Performance End      | 12/31/2024   |
| Primary Sector                 | home- and community-based health care or assistance with activities of daily living                                  |
|                                |  |

Purpose of Funds

| Subaward Type                  | Grant: Lump Sum Payment(s)   |
|--------------------------------|--|
| Subaward Obligation            | \$539,659.00   |
| Subaward Date                  | 1/1/2022   |
| Place of Performance Address 1 | 100 St. Claire Road  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Hockessin  |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19707  |
| Place of Performance Zip+4     |  |
| Description                    | expect to recruit and retain additional staff to assist with<br>staff shortages as a result of the COVID-19 pandemic |
| Subrecipient                   | COMPLETE CARE AT BRACKENVILLE LLC  |
| Period of Performance Start    | 1/1/2022   |
| Period of Performance End      | 12/31/2024   |
| Primary Sector                 | home- and community-based health care or assistance with activities of daily living                                  |
| Purpose of Funds               | to provide LTC facilities with grant funding for retaining<br>and recruiting staffing due to COVID-19                |

| Subaward Type                  | Grant: Lump Sum Payment(s)   |
|--------------------------------|--|
| Subaward Obligation            | \$430,438.00   |
| Subaward Date                  | 1/1/2022   |
| Place of Performance Address 1 | 889 South Little Creek Road  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Dover  |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19901  |
| Place of Performance Zip+4     |  |
| Description                    | expect to recruit and retain additional staff to assist with<br>staff shortages as a result of the COVID-19 pandemic |
| Subrecipient                   | Courtland Manor Inc.   |
| Period of Performance Start    | 1/1/2022   |
| Period of Performance End      | 12/31/2024   |
|                                | home- and community-based health care or assistance with   |

| Primary Sector   | activities of daily living  |
|------------------|---|
| Purpose of Funds | to provide LTC facilities with grant funding for retaining<br>and recruiting staffing due to COVID-19 |

| Subaward Type                  | Grant: Lump Sum Payment(s)   |
|--------------------------------|--|
| Subaward Obligation            | \$532,456.00   |
| Subaward Date                  | 1/1/2022   |
| Place of Performance Address 1 | 3540 Three Little Bakers Blvd  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Wilmington   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19808  |
| Place of Performance Zip+4     |  |
| Description                    | expect to recruit and retain additional staff to assist with<br>staff shortages as a result of the COVID-19 pandemic |
| Subrecipient                   | PIKE CREEK HEALTHCARE SVCS LLC   |
| Period of Performance Start    | 1/1/2022   |
| Period of Performance End      | 12/31/2024   |
| Primary Sector                 | home- and community-based health care or assistance with activities of daily living                                  |
| Purpose of Funds               | to provide LTC facilities with grant funding for retaining<br>and recruiting staffing due to COVID-19                |

| Subaward Type                  | Grant: Lump Sum Payment(s)   |
|--------------------------------|--|
| Subaward Obligation            | \$318,000.00   |
| Subaward Date                  | 1/1/2022   |
| Place of Performance Address 1 | 11 Independence Way  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Newark   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19713  |
| Place of Performance Zip+4     |  |
| Description                    | expect to recruit and retain additional staff to assist with<br>staff shortages as a result of the COVID-19 pandemic |
| Subrecipient                   | EXCEPTIONAL CARE FOR CHILDREN INC  |
| Period of Performance Start    | 1/1/2022   |
| Period of Performance End      | 12/31/2024   |

| Primary Sector   | home- and community-based health care or assistance with activities of daily living                   |
|------------------|---|
| Purpose of Funds | to provide LTC facilities with grant funding for retaining<br>and recruiting staffing due to COVID-19 |

| Subaward Type                  | Grant: Lump Sum Payment(s)   |
|--------------------------------|--|
| Subaward Obligation            | \$198,967.00   |
| Subaward Date                  | 1/1/2022   |
| Place of Performance Address 1 | 26890 Lewes Georgetown Hwy   |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Harbeson   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19961  |
| Place of Performance Zip+4     |  |
| Description                    | expect to recruit and retain additional staff to assist with<br>staff shortages as a result of the COVID-19 pandemic |
| Subrecipient                   | PEACHTREE HEALTH GROUP   |
| Period of Performance Start    | 1/1/2022   |
| Period of Performance End      | 12/31/2024   |
| Primary Sector                 | home- and community-based health care or assistance with activities of daily living                                  |
| Purpose of Funds               | to provide LTC facilities with grant funding for retaining<br>and recruiting staffing due to COVID-19                |

| Grant: Lump Sum Payment(s)   |
|--|
| \$159,177.00   |
| 1/1/2022   |
| 1605 N. Broom Street   |
|  |
|  |
| Wilmington   |
| DE   |
| 19806  |
|  |
| expect to recruit and retain additional staff to assist with<br>staff shortages as a result of the COVID-19 pandemic |
| INGLESIDE HOMES INC  |
| 1/1/2022   |
|  |

| Period of Performance End | 12/31/2024  |
|---------------------------|---|
| Primary Sector            | home- and community-based health care or assistance with activities of daily living                   |
| Purpose of Funds          | to provide LTC facilities with grant funding for retaining<br>and recruiting staffing due to COVID-19 |

| Subaward Type                  | Grant: Lump Sum Payment(s)  |
|--------------------------------|---|
| Subaward Obligation            | \$293,356.00  |
| Subaward Date                  | 1/1/2022  |
| Place of Performance Address 1 | 185 Salem Church Rd.  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Newark  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19713   |
| Place of Performance Zip+4     |   |
| Description                    | expect to recruit and retain additional staff to assist with staff shortages as a result of the COVID-19 pandemic |
| Subrecipient                   | LITTLE SISTERS OF THE POOR INC  |
| Period of Performance Start    | 1/1/2022  |
| Period of Performance End      | 12/31/2024  |
| Primary Sector                 | home- and community-based health care or assistance with activities of daily living                               |
| Purpose of Funds               | to provide LTC facilities with grant funding for retaining<br>and recruiting staffing due to COVID-19             |

| Subaward Type                  | Grant: Lump Sum Payment(s)   |
|--------------------------------|--|
| Subaward Obligation            | \$73,903.00  |
| Subaward Date                  | 1/1/2022   |
| Place of Performance Address 1 | 150 Saulsbury Rd   |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Dover  |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19904  |
| Place of Performance Zip+4     |  |
| Description                    | expect to recruit and retain additional staff to assist with<br>staff shortages as a result of the COVID-19 pandemic |
| Subrecipient                   | EMERITUS CORPORATION   |
| Subrecipient                   | EMERITUS CORPORATION   |

| Period of Performance Start | 1/1/2022  |
|-----------------------------|---|
| Period of Performance End   | 12/31/2024  |
| Primary Sector              | home- and community-based health care or assistance with activities of daily living                   |
| Purpose of Funds            | to provide LTC facilities with grant funding for retaining<br>and recruiting staffing due to COVID-19 |

| Subaward Type                  | Grant: Lump Sum Payment(s)  |
|--------------------------------|---|
| Subaward Obligation            | \$259,615.00  |
| Subaward Date                  | 1/1/2022  |
| Place of Performance Address 1 | 1175 McKee Road   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Dover   |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19904   |
| Place of Performance Zip+4     |   |
| Description                    | expect to recruit and retain additional staff to assist with staff shortages as a result of the COVID-19 pandemic |
| Subrecipient                   | PRESBYTERIAN HOMES INC  |
| Period of Performance Start    | 1/1/2022  |
| Period of Performance End      | 12/31/2024  |
| Primary Sector                 | home- and community-based health care or assistance with activities of daily living                               |
| Purpose of Funds               | to provide LTC facilities with grant funding for retaining<br>and recruiting staffing due to COVID-19             |

| Subaward Type                  | Grant: Lump Sum Payment(s)   |
|--------------------------------|--|
| Subaward Obligation            | \$228,021.00   |
| Subaward Date                  | 1/1/2022   |
| Place of Performance Address 1 | 21 W Clarke Avenue   |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Milford  |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19963  |
| Place of Performance Zip+4     |  |
| Description                    | expect to recruit and retain additional staff to assist with<br>staff shortages as a result of the COVID-19 pandemic |
|                                |  |

| Subrecipient                | POLARIS HEALTHCARE  |
|-----------------------------|---|
| Period of Performance Start | 1/1/2022  |
| Period of Performance End   | 12/31/2024  |
| Primary Sector              | home- and community-based health care or assistance with activities of daily living                   |
| Purpose of Funds            | to provide LTC facilities with grant funding for retaining<br>and recruiting staffing due to COVID-19 |

| Subaward Type                  | Grant: Lump Sum Payment(s)   |
|--------------------------------|--|
| Subaward Obligation            | \$89,797.00  |
| Subaward Date                  | 1/1/2022   |
| Place of Performance Address 1 | 4800 Lancaster Pike  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Wilmington   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19807  |
| Place of Performance Zip+4     |  |
| Description                    | expect to recruit and retain additional staff to assist with<br>staff shortages as a result of the COVID-19 pandemic |
| Subrecipient                   | MADELINE CARE CENTER LLC   |
| Period of Performance Start    | 1/1/2022   |
| Period of Performance End      | 12/31/2024   |
| Primary Sector                 | home- and community-based health care or assistance with activities of daily living                                  |
| Purpose of Funds               | to provide LTC facilities with grant funding for retaining<br>and recruiting staffing due to COVID-19                |

| Subaward Type                  | Grant: Lump Sum Payment(s)                                   |
|--------------------------------|--|
| Subaward Obligation            | \$51,161.00  |
| Subaward Date                  | 1/1/2022   |
| Place of Performance Address 1 | 500 S DuPont Blvd  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Milford  |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19963  |
| Place of Performance Zip+4     |  |
|                                | expect to recruit and retain additional staff to assist with |

| Description                 | staff shortages as a result of the COVID-19 pandemic  |
|-----------------------------|---|
| Subrecipient                | MILFORD AID II OPCO LLC   |
| Period of Performance Start | 1/1/2022  |
| Period of Performance End   | 12/31/2024  |
| Primary Sector              | home- and community-based health care or assistance with activities of daily living                   |
| Purpose of Funds            | to provide LTC facilities with grant funding for retaining<br>and recruiting staffing due to COVID-19 |

| Grant: Lump Sum Payment(s)  |
|---|
|   |
| \$697,237.00  |
| 1/1/2022  |
| 810 S. Broom Street   |
|   |
|   |
| Wilmington  |
| DE  |
| 19805   |
|   |
| expect to recruit and retain additional staff to assist with staff shortages as a result of the COVID-19 pandemic |
| COMPLETE CARE AT HILLSIDE LLC   |
| 1/1/2022  |
| 12/31/2024  |
| home- and community-based health care or assistance with activities of daily living                               |
| to provide LTC facilities with grant funding for retaining<br>and recruiting staffing due to COVID-19             |
|   |

### Subward No: 18205-Millcroft

| Subaward Type                  | Grant: Lump Sum Payment(s) |  |
|--------------------------------|----------------------------|--|
| Subaward Obligation            | \$0.00                     |  |
| Subaward Date                  | 1/1/2022                   |  |
| Place of Performance Address 1 | 255 Possum Park Road       |  |
| Place of Performance Address 2 |                            |  |
| Place of Performance Address 3 |                            |  |
| Place of Performance City      | Newark                     |  |
| Place of Performance State     | DE                         |  |
| Place of Performance Zip       | 19711                      |  |
| Place of Performance Zip+4     |                            |  |

| Description                 | expect to recruit and retain additional staff to assist with staff shortages as a result of the COVID-19 pandemic |
|-----------------------------|---|
| Subrecipient                | Millcroft   |
| Period of Performance Start | 1/1/2022  |
| Period of Performance End   | 12/31/2024  |
| Primary Sector              | home- and community-based health care or assistance with activities of daily living                               |
| Purpose of Funds            | to provide LTC facilities with grant funding for retaining<br>and recruiting staffing due to COVID-19             |

### Subward No: 18205-Foulk

| Subaward Type                  | Grant: Lump Sum Payment(s)  |
|--------------------------------|---|
| Subaward Obligation            | \$0.00  |
| Subaward Date                  | 1/1/2022  |
| Place of Performance Address 1 | 1212 Foulk Road   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Wilmington  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19803   |
| Place of Performance Zip+4     |   |
| Description                    | expect to recruit and retain additional staff to assist with staff shortages as a result of the COVID-19 pandemic |
| Subrecipient                   | Foulk Manor North   |
| Period of Performance Start    | 1/1/2022  |
| Period of Performance End      | 12/31/2024  |
| Primary Sector                 | home- and community-based health care or assistance with activities of daily living                               |
| Purpose of Funds               | to provide LTC facilities with grant funding for retaining<br>and recruiting staffing due to COVID-19             |

| Subaward Type                  | Grant: Lump Sum Payment(s) |  |
|--------------------------------|----------------------------|--|
| Subaward Obligation            | \$701,549.00               |  |
| Subaward Date                  | 12/14/2021                 |  |
| Place of Performance Address 1 | 801 N. Broom Street        |  |
| Place of Performance Address 2 |                            |  |
| Place of Performance Address 3 |                            |  |
| Place of Performance City      | Wilmington                 |  |
| Place of Performance State     | DE                         |  |
| Place of Performance Zip       | 19806                      |  |
|                                |                            |  |

| Place of Performance Zip+4  |   |
|-----------------------------|---|
| Description                 | Increase and/or retain staffing capacity impacted by COVID-19 |
| Subrecipient                | Regency Healthcare and Rehabilitation Center LLC              |
| Period of Performance Start | 12/14/2021  |
| Period of Performance End   | 12/31/2024  |
| Primary Sector              | health care   |
| Purpose of Funds            | Provide staffing relief for COVID-19                          |

| Subaward Type                  | Grant: Lump Sum Payment(s)                                    |
|--------------------------------|---|
| Subaward Obligation            | \$1,223,476.00  |
| Subaward Date                  | 12/16/2021  |
| Place of Performance Address 1 | 505 Greenbank Road  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Wilmington  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19808   |
| Place of Performance Zip+4     |   |
| Description                    | Increase and/or retain staffing capacity impacted by COVID-19 |
| Subrecipient                   | Coral Springs Rehab & Healthcare                              |
| Period of Performance Start    | 12/16/2021  |
| Period of Performance End      | 12/31/2024  |
| Primary Sector                 | health care   |
| Purpose of Funds               | Provide staffing relief for COVID-19                          |
|                                |   |

| Subaward Type                  | Grant: Lump Sum Payment(s)                           |
|--------------------------------|--|
| Subaward Obligation            | \$527,892.00   |
| Subaward Date                  | 12/16/2021   |
| Place of Performance Address 1 | 704 River Road                                       |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Wilmington   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19809  |
| Place of Performance Zip+4     |  |
|                                | Increase and/or retain staffing capacity impacted by |

| Description                 | COVID-19                             |
|-----------------------------|--------------------------------------|
| Subrecipient                | Kutz Rehab & Nursing                 |
| Period of Performance Start | 12/16/2021                           |
| Period of Performance End   | 12/31/2024                           |
| Primary Sector              | health care                          |
| Purpose of Funds            | Provide staffing relief for COVID-19 |

| Subaward Type                  | Grant: Lump Sum Payment(s)                                    |
|--------------------------------|---|
| Subaward Obligation            | \$527,989.00  |
| Subaward Date                  | 12/17/2021  |
| Place of Performance Address 1 | 4949 Ogletown Stanton Road                                    |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Newark  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19713   |
| Place of Performance Zip+4     |   |
| Description                    | Increase and/or retain staffing capacity impacted by COVID-19 |
| Subrecipient                   | Churchman Village   |
| Period of Performance Start    | 12/17/2021  |
| Period of Performance End      | 12/31/2024  |
| Primary Sector                 | health care   |
| Purpose of Funds               | Provide staffing relief for COVID-19                          |

| Grant: Lump Sum Payment(s)                                    |
|---|
| \$592,833.00  |
| 12/17/2021  |
| 1900 Lovering Avenue  |
|   |
|   |
| Wilmington  |
| DE  |
| 19806   |
|   |
| Increase and/or retain staffing capacity impacted by COVID-19 |
| Kentmere Rehab & Healthcare                                   |
|   |

| Period of Performance Start | 12/17/2021                           |
|-----------------------------|--------------------------------------|
| Period of Performance End   | 12/31/2024                           |
| Primary Sector              | health care                          |
| Purpose of Funds            | Provide staffing relief for COVID-19 |

| Subaward Type                  | Grant: Lump Sum Payment(s)                                    |
|--------------------------------|---|
| Subaward Obligation            | \$1,071,176.00  |
| Subaward Date                  | 12/17/2021  |
| Place of Performance Address 1 | 2801 W. 6th Street  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Wilmington  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19805   |
| Place of Performance Zip+4     |   |
| Description                    | Increase and/or retain staffing capacity impacted by COVID-19 |
| Subrecipient                   | Parkview Nursing & Rehab Center                               |
| Period of Performance Start    | 12/17/2021  |
| Period of Performance End      | 12/31/2024  |
| Primary Sector                 | health care   |
| Purpose of Funds               | Provide staffing relief for COVID-19                          |

| Subaward Type                  | Grant: Lump Sum Payment(s)                                    |
|--------------------------------|---|
| Subaward Obligation            | \$1,054,509.00  |
| Subaward Date                  | 12/17/2021  |
| Place of Performance Address 1 | 301 Ocean View Boulevard                                      |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Lewes   |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19958   |
| Place of Performance Zip+4     |   |
| Description                    | Increase and/or retain staffing capacity impacted by COVID-19 |
| Subrecipient                   | Harbor Health Care & Rehab Center                             |
| Period of Performance Start    | 12/17/2021  |
| Period of Performance End      | 12/31/2024  |

| Primary Sector   | health care                          |
|------------------|--------------------------------------|
| Purpose of Funds | Provide staffing relief for COVID-19 |

| Subaward Type                  | Grant: Lump Sum Payment(s)                                    |
|--------------------------------|---|
| Subaward Obligation            | \$561,034.00  |
| Subaward Date                  | 12/20/2021  |
| Place of Performance Address 1 | 4641 Weldin Road  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Wilmington  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19803   |
| Place of Performance Zip+4     |   |
| Description                    | Increase and/or retain staffing capacity impacted by COVID-19 |
| Subrecipient                   | The Mary Campbell Center                                      |
| Period of Performance Start    | 12/20/2021  |
| Period of Performance End      | 12/31/2024  |
| Primary Sector                 | health care   |
| Purpose of Funds               | Provide staffing relief for COVID-19                          |

| Subaward Type                  | Grant: Lump Sum Payment(s)                                    |
|--------------------------------|---|
| Subaward Obligation            | \$1,104,975.00  |
| Subaward Date                  | 12/14/2021  |
| Place of Performance Address 1 | 6525 Lancaster Pike   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Hockessin   |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19707   |
| Place of Performance Zip+4     |   |
| Description                    | Increase and/or retain staffing capacity impacted by COVID-19 |
| Subrecipient                   | Regal Heights Health Rehab Center LLC                         |
| Period of Performance Start    | 12/14/2021  |
| Period of Performance End      | 12/31/2024  |
| Primary Sector                 | health care   |
| Purpose of Funds               | Provide staffing relief for COVID-19                          |

| Subaward Type                  | Grant: Lump Sum Payment(s)                                    |
|--------------------------------|---|
|                                | • • •   |
| Subaward Obligation            | \$971,953.00  |
| Subaward Date                  | 12/16/2021  |
| Place of Performance Address 1 | 231 S. Washington Street                                      |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Millsboro   |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19966   |
| Place of Performance Zip+4     |   |
| Description                    | Increase and/or retain staffing capacity impacted by COVID-19 |
| Subrecipient                   | Atlantic Shore Rehab & Health Center                          |
| Period of Performance Start    | 12/16/2021  |
| Period of Performance End      | 12/31/2024  |
| Primary Sector                 | health care   |
| Purpose of Funds               | Provide staffing relief for COVID-19                          |

#### Subward No: 0000551705

| Subaward Type                  | Grant: Lump Sum Payment(s)                                    |
|--------------------------------|---|
| Subaward Obligation            | \$701,375.00  |
| Subaward Date                  | 12/17/2021  |
| Place of Performance Address 1 | 32 Buena Vista Drive  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | New Castle  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19720   |
| Place of Performance Zip+4     |   |
| Description                    | Increase and/or retain staffing capacity impacted by COVID-19 |
| Subrecipient                   | New Castle Health & Rehab                                     |
| Period of Performance Start    | 12/17/2021  |
| Period of Performance End      | 12/31/2024  |
| Primary Sector                 | health care   |
| Purpose of Funds               | Provide staffing relief for COVID-19                          |

| Subaward Type                  | Grant: Lump Sum Payment(s)                                    |
|--------------------------------|---|
| Subaward Obligation            | \$468,540.00  |
| Subaward Date                  | 12/20/2021  |
| Place of Performance Address 1 | 254 W. Main Street  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Newark  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19711   |
| Place of Performance Zip+4     |   |
| Description                    | Increase and/or retain staffing capacity impacted by COVID-19 |
| Subrecipient                   | Newark Manor Nursing Home                                     |
| Period of Performance Start    | 12/20/2021  |
| Period of Performance End      | 12/31/2024  |
| Primary Sector                 | health care   |
| Purpose of Funds               | Provide staffing relief for COVID-19                          |

| Subaward Type                  | Grant: Lump Sum Payment(s)                                    |
|--------------------------------|---|
| Subaward Obligation            | \$892,695.00  |
| Subaward Date                  | 12/20/2021  |
| Place of Performance Address 1 | 3034 South DuPont Boulevard                                   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Smyrna  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19977   |
| Place of Performance Zip+4     |   |
| Description                    | Increase and/or retain staffing capacity impacted by COVID-19 |
| Subrecipient                   | Pinnacle Rehabilitation and Health Center                     |
| Period of Performance Start    | 12/20/2021  |
| Period of Performance End      | 12/31/2024  |
| Primary Sector                 | health care   |
| Purpose of Funds               | Provide staffing relief for COVID-19                          |

| Subaward Type       | Grant: Lump Sum Payment(s) |
|---------------------|----------------------------|
| Subaward Obligation | \$0.00                     |

| 12/20/2021  |
|---|
| 420 Delaware Drive  |
|   |
|   |
| Fort Washington   |
| РА  |
| 19034   |
|   |
| Increase and/or retain staffing capacity impacted by COVID-19 |
| Manor House - ACTS  |
| 12/20/2021  |
| 12/31/2024  |
| health care   |
| Provide staffing relief for COVID-19                          |
|   |

| Subaward Type                  | Grant: Lump Sum Payment(s)  |
|--------------------------------|---|
| Subaward Obligation            | \$758,396.00  |
| Subaward Date                  | 12/14/2021  |
| Place of Performance Address 1 | 1101 Gilpin Avenue  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Wilmington  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19801   |
| Place of Performance Zip+4     |   |
| Description                    | Increase and/or retain staffing capacity impacted by COVID-19 and COVID-19 Infection Control Measures |
| Subrecipient                   | Gilpin Hall   |
| Period of Performance Start    | 12/14/2021  |
| Period of Performance End      | 12/31/2021  |
| Primary Sector                 | health care   |
| Purpose of Funds               | Provide staffing relief for COVID-19  |

| Subaward Type                  | Grant: Lump Sum Payment(s) |
|--------------------------------|----------------------------|
| Subaward Obligation            | \$7,300,000.00             |
| Subaward Date                  | 12/8/2021                  |
| Place of Performance Address 1 | PO Box 1636                |

| 4  |
|--|
|  |
|  |
| Wilmington   |
| DE   |
| 19899  |
|  |
| Funding to expand a Delaware career pathways program to<br>unemployed, underemployed, and displaced adult workers<br>and the States' middle school student population ("Pathways<br>2.0"). |
| Delaware Community Foundation  |
| 3/18/2022  |
| 12/31/2024   |
|  |

| Subaward Type                  | Grant: Lump Sum Payment(s)  |
|--------------------------------|---|
| Subaward Obligation            | \$2,500,000.00  |
| Subaward Date                  | 1/18/2022   |
| Place of Performance Address 1 | 500 W. Loockerman St.   |
| Place of Performance Address 2 | Suite 400   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Dover   |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19904   |
| Place of Performance Zip+4     |   |
| Description                    | <ul> <li>Call Center to manage inquiries (1) Health and Safety Needs</li> <li>(2) Education and enrollment in Household</li> <li>assistance-Internet Access programs. Train and deploy</li> <li>safety ambassadors in communities. Energy and safety</li> <li>assessments for small business serving LMI communities.</li> <li>Train and deploy health ambassadors to do healthy home</li> <li>assessments. Education and assistance to Civic and home</li> <li>owner associations. Provide repair and mitigation for health</li> <li>and safety in identified homes. Prepare to collect data on</li> <li>interventions.</li> </ul> |
| Subrecipient                   | Delaware Sustainable Energy Utility DBA Energize<br>Delaware  |
| Period of Performance Start    | 1/18/2022   |
| Period of Performance End      | 12/31/2024  |

| Subaward Type       | Contract: Purchase Order |
|---------------------|--------------------------|
| Subaward Obligation | \$62,350.00              |
| Subaward Date       | 7/1/2023                 |

| Place of Performance Address 1 | 644 PARADISE ALLEY RD    |
|--------------------------------|--------------------------|
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | FELTON                   |
| Place of Performance State     | DE                       |
| Place of Performance Zip       | 19943                    |
| Place of Performance Zip+4     |                          |
| Description                    | First State Food Grant   |
| Subrecipient                   | DITTMAR FAMILY FARMS LLC |
| Period of Performance Start    | 7/1/2023                 |
| Period of Performance End      | 12/31/2026               |

| Subaward Type                  | Contract: Purchase Order      |
|--------------------------------|-------------------------------|
| Subaward Obligation            | \$63,794.00                   |
| Subaward Date                  | 7/1/2023                      |
| Place of Performance Address 1 | 324 VANDYKE-MD LINE ROAD      |
| Place of Performance Address 2 |                               |
| Place of Performance Address 3 |                               |
| Place of Performance City      | TOWNSEND                      |
| Place of Performance State     | DE                            |
| Place of Performance Zip       | 19734                         |
| Place of Performance Zip+4     |                               |
| Description                    | First State food system grant |
| Subrecipient                   | WILLIAM E POWERS JR           |
| Period of Performance Start    | 7/1/2023                      |
| Period of Performance End      | 12/31/2026                    |

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$106,790.00             |
| Subaward Date                  | 7/1/2023                 |
| Place of Performance Address 1 | 30993 ARMORY RD          |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | FRANKFORD                |
| Place of Performance State     | DE                       |
| Place of Performance Zip       | 19945                    |
| Place of Performance Zip+4     |                          |

| Description                 | First State food system grant |
|-----------------------------|-------------------------------|
| Subrecipient                | BENNETT ORCHARDS LLC          |
| Period of Performance Start | 7/1/2023                      |
| Period of Performance End   | 12/31/2026                    |

| Subaward Type                  | Contract: Purchase Order      |
|--------------------------------|-------------------------------|
| Subaward Obligation            | \$139,000.00                  |
| Subaward Date                  | 7/1/2023                      |
| Place of Performance Address 1 | 1919 ALLABANDS MILL RD        |
| Place of Performance Address 2 |                               |
| Place of Performance Address 3 |                               |
| Place of Performance City      | WYOMING                       |
| Place of Performance State     | DE                            |
| Place of Performance Zip       | 19934                         |
| Place of Performance Zip+4     |                               |
| Description                    | First State food system grant |
| Subrecipient                   | FIFER ORCHARDS INC            |
| Period of Performance Start    | 7/1/2023                      |
| Period of Performance End      | 12/31/2026                    |

#### Subward No: 18394-15404

| Subaward Type                  | Contract: Purchase Order      |
|--------------------------------|-------------------------------|
| Subaward Obligation            | \$140,000.00                  |
| Subaward Date                  | 7/1/2023                      |
| Place of Performance Address 1 | 89 MYERS DR                   |
| Place of Performance Address 2 |                               |
| Place of Performance Address 3 |                               |
| Place of Performance City      | HARTLY                        |
| Place of Performance State     | DE                            |
| Place of Performance Zip       | 19953                         |
| Place of Performance Zip+4     |                               |
| Description                    | First State food system grant |
| Subrecipient                   | DYLAN J NICKERSON             |
| Period of Performance Start    | 7/1/2023                      |
| Period of Performance End      | 12/31/2026                    |

| Subaward Type | Contract: Purchase Order |
|---------------|--------------------------|
|               |                          |

| Subaward Obligation            | \$60,000.00                   |
|--------------------------------|-------------------------------|
| Subaward Date                  | 7/1/2023                      |
| Place of Performance Address 1 | 3429 HORSESHOE RD             |
| Place of Performance Address 2 |                               |
| Place of Performance Address 3 |                               |
| Place of Performance City      | SEAFORD                       |
| Place of Performance State     | DE                            |
| Place of Performance Zip       | 19973                         |
| Place of Performance Zip+4     |                               |
| Description                    | First State food system grant |
| Subrecipient                   | SHANE MARVEL                  |
| Period of Performance Start    | 7/1/2023                      |
| Period of Performance End      | 12/31/2026                    |

| Subaward Type                  | Grant: Lump Sum Payment(s)    |
|--------------------------------|-------------------------------|
| Subaward Obligation            | \$100,000.00                  |
| Subaward Date                  | 7/1/2022                      |
| Place of Performance Address 1 | 669 South Union Street        |
| Place of Performance Address 2 |                               |
| Place of Performance Address 3 |                               |
| Place of Performance City      | Wilmington                    |
| Place of Performance State     | DE                            |
| Place of Performance Zip       | 19805                         |
| Place of Performance Zip+4     |                               |
| Description                    | Food assistance program       |
| Subrecipient                   | BOYS & GIRLS CLUB OF DELAWARE |
| Period of Performance Start    | 7/1/2022                      |
| Period of Performance End      | 12/31/2026                    |

| Subaward Type                  | Grant: Lump Sum Payment(s) |
|--------------------------------|----------------------------|
| Subaward Obligation            | \$75,000.00                |
| Subaward Date                  | 7/1/2022                   |
| Place of Performance Address 1 | 802 W 29th Street          |
| Place of Performance Address 2 |                            |
| Place of Performance Address 3 |                            |
| Place of Performance City      | Wilmington                 |
| Place of Performance State     | DE                         |
|                                |                            |

| Place of Performance Zip    | 19802                     |
|-----------------------------|---------------------------|
| Place of Performance Zip+4  |                           |
| Description                 | Food assistance program   |
| Subrecipient                | CONSCIOUS CONNECTIONS INC |
| Period of Performance Start | 7/1/2022                  |
| Period of Performance End   | 12/31/2026                |

| Subaward Type                  | Grant: Lump Sum Payment(s)     |
|--------------------------------|--------------------------------|
| Subaward Obligation            | \$73,033.48                    |
| Subaward Date                  | 7/1/2022                       |
| Place of Performance Address 1 | 390 North Market Street Ext.   |
| Place of Performance Address 2 |                                |
| Place of Performance Address 3 |                                |
| Place of Performance City      | Seaford                        |
| Place of Performance State     | DE                             |
| Place of Performance Zip       | 19973                          |
| Place of Performance Zip+4     |                                |
| Description                    | food assistance program        |
| Subrecipient                   | SEAFORD SCHOOL DISTRICT OFFICE |
| Period of Performance Start    | 7/1/2022                       |
| Period of Performance End      | 12/31/2026                     |

# Subward No: 18394-21040

| Subaward Type                  | Grant: Lump Sum Payment(s)     |
|--------------------------------|--------------------------------|
| Subaward Obligation            | \$60,000.00                    |
| Subaward Date                  | 7/1/2022                       |
| Place of Performance Address 1 | PO Box 847                     |
| Place of Performance Address 2 |                                |
| Place of Performance Address 3 |                                |
| Place of Performance City      | Hockessin                      |
| Place of Performance State     | DE                             |
| Place of Performance Zip       | 19707                          |
| Place of Performance Zip+4     |                                |
| Description                    | food assistance program        |
| Subrecipient                   | HEALTHY FOODS FOR HEALTHY KIDS |
| Period of Performance Start    | 7/1/2022                       |
| Period of Performance End      | 12/31/2026                     |

| Grant: Lump Sum Payment(s) |  |
|----------------------------|--|
| \$70,000.00                |  |
| 7/1/2022                   |  |
| 4664 Mud Mill Rd           |  |
|                            |  |
|                            |  |
| Camden Wyoming             |  |
| DE                         |  |
| 19934                      |  |
|                            |  |
| food assistance program    |  |
| T A FARMS LLC              |  |
| 7/1/2022                   |  |
| 12/31/2026                 |  |
|                            | \$70,000.00         7/1/2022         4664 Mud Mill Rd         Camden Wyoming         DE         19934         food assistance program         T A FARMS LLC         7/1/2022 |

| Subaward Type                  | Grant: Lump Sum Payment(s) |
|--------------------------------|----------------------------|
| Subaward Obligation            | \$100,000.00               |
| Subaward Date                  | 7/1/2022                   |
| Place of Performance Address 1 | 89 Myers Dr                |
| Place of Performance Address 2 |                            |
| Place of Performance Address 3 |                            |
| Place of Performance City      | Hartley                    |
| Place of Performance State     | DE                         |
| Place of Performance Zip       | 19953                      |
| Place of Performance Zip+4     |                            |
| Description                    | food program services      |
| Subrecipient                   | DYLAN J NICKERSON          |
| Period of Performance Start    | 7/1/2022                   |
| Period of Performance End      | 9/30/2022                  |

# Subward No: 18050-9004010000

| Subaward Type                  | Direct Payment       |  |
|--------------------------------|----------------------|--|
| Subaward Obligation            | \$490,877.05         |  |
| Subaward Date                  | 4/1/2022             |  |
| Place of Performance Address 1 | RT 13 & DENNY'S ROAD |  |
| Place of Performance Address 2 |                      |  |
| Place of Performance Address 3 |                      |  |
|                                |                      |  |

| Place of Performance City   | Dover  |
|-----------------------------|--|
| Place of Performance State  | DE   |
| Place of Performance Zip    | 19904  |
| Place of Performance Zip+4  |  |
| Description                 | Facilitate workforce training and course development for negatively impacted industry sectors. |
| Subrecipient                | Delaware Tech Community College  |
| Period of Performance Start | 4/1/2022   |
| Period of Performance End   | 6/30/2022  |

#### Subward No: 18050-9539000040

| Subaward Type                  | Direct Payment                  |
|--------------------------------|---------------------------------|
| Subaward Obligation            | \$93,706.00                     |
| Subaward Date                  | 4/1/2022                        |
| Place of Performance Address 1 | 823 Walnut Shade Road           |
| Place of Performance Address 2 |                                 |
| Place of Performance Address 3 |                                 |
| Place of Performance City      | Woodside                        |
| Place of Performance State     | DE                              |
| Place of Performance Zip       | 19980                           |
| Place of Performance Zip+4     |                                 |
| Description                    | Adult education course training |
| Subrecipient                   | POLYTECH ADULT EDUCATION        |
| Period of Performance Start    | 4/1/2022                        |
| Period of Performance End      | 6/30/2022                       |

| Subaward Type                  | Contract: Purchase Order                       |
|--------------------------------|--|
| Subaward Obligation            | \$287,194.00                                   |
| Subaward Date                  | 11/1/2021                                      |
| Place of Performance Address 1 | 4425 N Market St                               |
| Place of Performance Address 2 | 4th Floor                                      |
| Place of Performance Address 3 |  |
| Place of Performance City      | Wilmington                                     |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19801  |
| Place of Performance Zip+4     |  |
| Description                    | Workforce Development enrollments              |
| Subrecipient                   | LEEP Inc Labor Economics Education emPowerment |
|                                |  |

| Period of Performance Start | 11/1/2021  |
|-----------------------------|------------|
| Period of Performance End   | 12/31/2022 |

#### Subward No: 0000034426

| Subaward Type                  | Contract: Purchase Order                                  |
|--------------------------------|---|
| Subaward Obligation            | \$1,232,063.75  |
| Subaward Date                  | 11/1/2021   |
| Place of Performance Address 1 | PO Box 875  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | New Castle  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19720   |
| Place of Performance Zip+4     |   |
| Description                    | DOL Workforce Development driver training academy program |
| Subrecipient                   | Amer Driver Training ACAD                                 |
| Period of Performance Start    | 11/1/2021   |
| Period of Performance End      | 12/31/2024  |

## Subward No: 18444

| Subaward Type                  | Grant: Lump Sum Payment(s)  |
|--------------------------------|---|
| Subaward Obligation            | \$1,500,000.00  |
| Subaward Date                  | 1/3/2022  |
| Place of Performance Address 1 | 1007 North Orange Street  |
| Place of Performance Address 2 | Fourth Floor  |
| Place of Performance Address 3 |   |
| Place of Performance City      | Wilmington  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19801   |
| Place of Performance Zip+4     |   |
| Description                    | Zip Code Wilmington is a nonprofit software coding<br>bootcamp. Its mission is to support the economic<br>development of the greater Wilmington Region by providing<br>accessible and affordable training in software programming<br>to high-potential individuals who have the raw talent<br>necessary to become entry level software developers and<br>data engineers. The Project will address the gap in financial<br>support for those low- to middle-income Delaware residents<br>who desire to attend the Zip Code Wilmington training<br>program and thus train and help transition them into good<br>paying, high-demand careers with coveted technical skills<br>that also attract new employers to the region. |

| Subrecipient                | Zip Code Wilmington |
|-----------------------------|---------------------|
| Period of Performance Start | 1/3/2022            |
| Period of Performance End   | 12/31/2024          |

### Subward No: 18446

| Subaward Type                  | Grant: Lump Sum Payment(s)  |
|--------------------------------|---|
| Subaward Obligation            | \$900,000.00  |
| Subaward Date                  | 12/14/2021  |
| Place of Performance Address 1 | 500 Creek View Road   |
| Place of Performance Address 2 | Suite 103   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Newark  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19711   |
| Place of Performance Zip+4     |   |
| Description                    | Funding to provide workforce development training and<br>other supportive services. The restaurant and hospitality<br>industries have been significantly negatively impacted as a<br>result of the economic effects that the COVID-19 pandemic<br>had on the economy of the State and those industries in<br>particular. DRA and its philanthropic educational foundation<br>(DRAEF) seek to provide nationally recognized curriculum<br>and workforce development management and offer career<br>advancement for Delaware's restaurant and hospitality<br>workforce. |
| Subrecipient                   | Delaware Restaurant Association   |
| Period of Performance Start    | 12/14/2021  |
| Period of Performance End      | 12/31/2024  |

## Subward No: 18447

| Subaward Type                  | Grant: Lump Sum Payment(s)  |
|--------------------------------|---|
| Subaward Obligation            | \$26,400,000.00   |
| Subaward Date                  | 1/3/2022  |
| Place of Performance Address 1 | 1121 Thatcher St.   |
| Place of Performance Address 2 | Teen Warehouse Way  |
| Place of Performance Address 3 |   |
| Place of Performance City      | Wilmington  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19802   |
| Place of Performance Zip+4     |   |
|                                | Central to the success of the REACH redevelopment of<br>Wilmington's Riverside neighborhood is creating a<br>mixed-income community to break the cycle of entrenched, |

| Description                 | concentrated poverty resulting from decades of systemic<br>racial discrimination and segregation. The mixed-income<br>housing strategy will create a pipeline of housing options<br>that enable residents to remain in the neighborhood while<br>increasing self-sufficiency, and will also attract new,<br>moderate-income residents who can pay market rental rates<br>and/or purchase a home. Called "Imani Village," REACH<br>will build 591 units of permanent housing: 561<br>mixed-income rental homes in replacement of 293<br>dilapidated public housing units, as well as 30 homes for<br>ownership. Imani Village will be built |
|-----------------------------|--|
| Subrecipient                | REACH Riverside  |
| Period of Performance Start | 1/3/2022   |
| Period of Performance End   | 12/31/2024   |

## Subward No: 18436-613098

| Subaward Type                  | Contract: Purchase Order          |
|--------------------------------|-----------------------------------|
| Subaward Obligation            | \$0.00                            |
| Subaward Date                  | 11/1/2021                         |
| Place of Performance Address 1 | 11 SOUTH MERIDIAN STREET          |
| Place of Performance Address 2 |                                   |
| Place of Performance Address 3 |                                   |
| Place of Performance City      | INDIANAPOLIS                      |
| Place of Performance State     | IN                                |
| Place of Performance Zip       | 46204                             |
| Place of Performance Zip+4     |                                   |
| Description                    | NEU Legal services and assistance |
| Subrecipient                   | BARNES & THORNBURG LLP            |
| Period of Performance Start    | 11/1/2021                         |
| Period of Performance End      | 6/30/2023                         |

## Subward No: 18471

| Subaward Type                  | Grant: Lump Sum Payment(s)                                  |
|--------------------------------|---|
| Subaward Obligation            | \$5,000,000.00  |
| Subaward Date                  | 1/10/2022   |
| Place of Performance Address 1 | 800 N. French Street  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Wilmington  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19801   |
| Place of Performance Zip+4     |   |
|                                | The State used \$5 million of its ARPA award to establish a |

| Description                 | fund to assist parking garages in the City of Wilmington that<br>were adversely economically impacted by the COVID-19<br>pandemic. \$2,525.686.42 was paid to eight privately owned<br>garages in the city that were impacted by the pandemic.                             |
|-----------------------------|--|
| Subrecipient                | City of Wilmington   |
| Period of Performance Start | 1/10/2022  |
| Period of Performance End   | 12/31/2024   |
| Primary Sector              | emergency response   |
| Purpose of Funds            | To address the negative economic impacts on the parking<br>garage industry and help to ensure that sufficient parking is<br>available within the City, as its workplaces, retail businesses,<br>and cultural attractions emerge from the pandemic and<br>return to normal. |

| Subaward Type                  | Contract: Purchase Order                      |
|--------------------------------|---|
| Subaward Obligation            | \$484,710.00                                  |
| Subaward Date                  | 11/28/2022                                    |
| Place of Performance Address 1 | 9800 CROSSPOINT BOULEVARD                     |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | INDIANAPOLIS                                  |
| Place of Performance State     | IN  |
| Place of Performance Zip       | 46256   |
| Place of Performance Zip+4     |   |
| Description                    | ARPA Program Manager IT Professional Services |
| Subrecipient                   | GUIDESOFT INC DBA KNOWLEDGE SERVICES          |
| Period of Performance Start    | 11/28/2022                                    |
| Period of Performance End      | 12/31/2026                                    |

| Subaward Type                  | Contract: Purchase Order              |
|--------------------------------|---------------------------------------|
| Subaward Obligation            | \$6,705,839.00                        |
| Subaward Date                  | 1/1/2023                              |
| Place of Performance Address 1 | 1095 AVENUE OF THE AMERICAS 8TH FLOOR |
| Place of Performance Address 2 |                                       |
| Place of Performance Address 3 |                                       |
| Place of Performance City      | New York                              |
| Place of Performance State     | NY                                    |
| Place of Performance Zip       | 10036                                 |
| Place of Performance Zip+4     |                                       |
| Description                    | Broadband Telecommunication           |

| Subrecipient                | VERIZON Communications |
|-----------------------------|------------------------|
| Period of Performance Start | 1/1/2023               |
| Period of Performance End   | 12/31/2026             |

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$109,141.73  |
| Subaward Date                  | 7/1/2022  |
| Place of Performance Address 1 | 10613 Concord Street  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Kensington  |
| Place of Performance State     | MD  |
| Place of Performance Zip       | 20895   |
| Place of Performance Zip+4     |   |
| Description                    | ARPA Broadband Access - CTC Consulting services,<br>Telecommunication |
| Subrecipient                   | COLUMBIA TELECOMMUNICATIONS<br>CORPORATION                            |
| Period of Performance Start    | 7/1/2022  |
| Period of Performance End      | 12/31/2026  |

### Subward No: 17850-1425

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$7,738,848.23           |
| Subaward Date                  | 7/1/2022                 |
| Place of Performance Address 1 | 1 Mediacom Way           |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Chester                  |
| Place of Performance State     | NY                       |
| Place of Performance Zip       | 10918                    |
| Place of Performance Zip+4     |                          |
| Description                    | Telecommunication        |
| Subrecipient                   | MEDIACOM DELAWARE LLC    |
| Period of Performance Start    | 7/1/2022                 |
| Period of Performance End      | 12/31/2026               |

| Subaward Type | Contract: Purchase Order |
|---------------|--------------------------|
|---------------|--------------------------|

| Subaward Obligation            | \$14,574,490.99                                     |
|--------------------------------|---|
| Subaward Date                  | 10/1/2021   |
| Place of Performance Address 1 | 801 Silver Lake Blvd                                |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Dover   |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19901   |
| Place of Performance Zip+4     |   |
| Description                    | To conduct services for last mile broadband project |
| Subrecipient                   | COMCAST HOLDINGS CORPORATION                        |
| Period of Performance Start    | 10/1/2021   |
| Period of Performance End      | 12/24/2024  |

| Subaward Type                  | Contract: Purchase Order  |
|--------------------------------|---|
| Subaward Obligation            | \$4,161,523.27  |
| Subaward Date                  | 10/1/2021   |
| Place of Performance Address 1 | 801 Silver Lake Blvd  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Dover   |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19901   |
| Place of Performance Zip+4     |   |
| Description                    | review map to verify broadband services were provided to<br>every last mile in Delaware |
| Subrecipient                   | VERIZON WIRELESS SERVICES CELLCO  |
| Period of Performance Start    | 10/1/2021   |
| Period of Performance End      | 4/30/2025   |
| Primary Sector                 | Other   |
| Purpose of Funds               | provide broadband services to every last mile within Delaware                           |

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$336,362.50             |
| Subaward Date                  | 10/1/2021                |
| Place of Performance Address 1 | 802 Silver Lake Blvd     |
| Place of Performance Address 2 |                          |

| Place of Performance Address 3 |   |
|--------------------------------|---|
| Place of Performance City      | Dover   |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19901   |
| Place of Performance Zip+4     |   |
| Description                    | review map to verify broadband services were provided to<br>every last mile in Delaware |
| Subrecipient                   | PROGRESSIVE SOFTWARE COMP INC   |
| Period of Performance Start    | 10/1/2021   |
| Period of Performance End      | 4/30/2025   |
| Primary Sector                 | Other   |
| Purpose of Funds               | provide broadband services to every last mile within Delaware                           |

| Subaward Type                  | Direct Payment              |
|--------------------------------|-----------------------------|
| Subaward Obligation            | \$664,619.26                |
| Subaward Date                  | 4/1/2022                    |
| Place of Performance Address 1 | 7125 Columbia Gateway Drive |
| Place of Performance Address 2 |                             |
| Place of Performance Address 3 |                             |
| Place of Performance City      | Columbia                    |
| Place of Performance State     | MD                          |
| Place of Performance Zip       | 21046                       |
| Place of Performance Zip+4     |                             |
| Description                    | Telecom Charges             |
| Subrecipient                   | AT&T MOBILITY               |
| Period of Performance Start    | 4/1/2022                    |
| Period of Performance End      | 6/30/2022                   |

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$0.00                   |
| Subaward Date                  | 4/1/2022                 |
| Place of Performance Address 1 | 701 Cornell Drive        |
| Place of Performance Address 2 | Suite F-13               |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Wilmington               |
| Place of Performance State     | DE                       |
| Place of Performance Zip       | 19801                    |

| Place of Performance Zip+4  |                          |
|-----------------------------|--------------------------|
| Description                 | IT Professional Services |
| Subrecipient                | Versalign                |
| Period of Performance Start | 4/1/2022                 |
| Period of Performance End   | 12/31/2024               |

## Subward No: 19460\_27599

| Subaward Type                  | Grant: Lump Sum Payment(s)  |
|--------------------------------|---|
| Subaward Obligation            | \$125,000.00  |
| Subaward Date                  | 6/14/2022   |
| Place of Performance Address 1 | 100 W 10th Street   |
| Place of Performance Address 2 | Suite 903   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Wilmington  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19801   |
| Place of Performance Zip+4     |   |
| Description                    | DCADV's Complex Connections project will address a<br>number of barriers survivors of domestic violence face that<br>have been exacerbated by the COVID-19 pandemic. This<br>proposed project includes a three year plan that focuses on<br>the impact that COVID-19 has had on domestic violence in<br>the state by increasing the community's access to early<br>intervention and quality mental health services in Delaware.<br>This project will: 1) Increase the public's awareness of the<br>connection between trauma, mental health and domestic<br>violence and available resources for support and service<br>through the creation of resource materials and targeted<br>campaigns statewide; 2) Increase the knowledge and<br>capacity of mental health and behavioral health providers to<br>address trau |
| Subrecipient                   | Delaware Coalition Against Domestic Violence  |
| Period of Performance Start    | 6/14/2022   |
| Period of Performance End      | 12/31/2024  |
|                                |   |

## Subward No: 19463\_645838

| Subaward Type                  | Grant: Lump Sum Payment(s) |  |
|--------------------------------|----------------------------|--|
| Subaward Obligation            | \$200,000.00               |  |
| Subaward Date                  | 7/6/2022                   |  |
| Place of Performance Address 1 | 197 Possum Park Rd         |  |
| Place of Performance Address 2 |                            |  |
| Place of Performance Address 3 |                            |  |
| Place of Performance City      | Newark                     |  |
|                                |                            |  |

| Place of Performance State  | DE   |
|-----------------------------|--|
| Place of Performance Zip    | 19711  |
| Place of Performance Zip+4  | 3817   |
| Description                 | Josie's Grace program launched it's first 2 cohorts on<br>October 5th and 6th of 2022. This small group community<br>behavioral health approach accommodates 4 women and<br>their 4 babies per cohort served for a total humans served of<br>8 dyad pair a week. They will be attending for 6 weeks<br>consecutively for 2-3 hours of programming and support a<br>week. Staffed in person with Psych NP, RN, and support<br>during program run time, all who enter are served with a<br>safe, trauma aware environment to explore their emotional<br>needs. August 14th 2022, an open house was held and<br>attended by approx. 25 community members including<br>health providers, prospective volunteers as well as<br>Representative Mike Smith and his family. August and<br>September involved |
| Subrecipient                | Perinatal Prana  |
| Period of Performance Start | 7/6/2022   |
| Period of Performance End   | 12/31/2024   |

## Subward No: 19769-24324

| Subaward Type                  | Contract: Purchase Order     |
|--------------------------------|------------------------------|
| Subaward Obligation            | \$126,970.65                 |
| Subaward Date                  | 11/1/2022                    |
| Place of Performance Address 1 | 4425 North Market Street     |
| Place of Performance Address 2 |                              |
| Place of Performance Address 3 |                              |
| Place of Performance City      | Wilmington                   |
| Place of Performance State     | DE                           |
| Place of Performance Zip       | 19802                        |
| Place of Performance Zip+4     |                              |
| Description                    | Temporary Employment Service |
| Subrecipient                   | Goodwill DE and DE County    |
| Period of Performance Start    | 11/1/2022                    |
| Period of Performance End      | 12/31/2026                   |

### Subward No: 19769-34426

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$148,700.00             |
| Subaward Date                  | 6/1/2023                 |
| Place of Performance Address 1 | PO Box 875               |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |

| Place of Performance City   | New Castle                            |
|-----------------------------|---------------------------------------|
| Place of Performance State  | DE                                    |
| Place of Performance Zip    | 19720                                 |
| Place of Performance Zip+4  |                                       |
| Description                 | Driver training workforce development |
| Subrecipient                | Amer Driver Training ACAD             |
| Period of Performance Start | 6/1/2023                              |
| Period of Performance End   | 12/31/2026                            |

#### Subward No: 19769-676680

| Subaward Type                  | Contract: Purchase Order            |
|--------------------------------|-------------------------------------|
| Subaward Obligation            | \$210,000.00                        |
| Subaward Date                  | 6/1/2023                            |
| Place of Performance Address 1 | 2915 Newport Gap Pike               |
| Place of Performance Address 2 |                                     |
| Place of Performance Address 3 |                                     |
| Place of Performance City      | Wilmington                          |
| Place of Performance State     | DE                                  |
| Place of Performance Zip       | 19808                               |
| Place of Performance Zip+4     |                                     |
| Description                    | Workforce Development services      |
| Subrecipient                   | BLINDSIGHT DELAWARE ENTERPRISES INC |
| Period of Performance Start    | 6/1/2023                            |
| Period of Performance End      | 12/31/2026                          |

#### Subward No: 19769-9538000080

| Subaward Type                  | Contract: Purchase Order       |  |
|--------------------------------|--------------------------------|--|
| Subaward Obligation            | \$1,203,946.00                 |  |
| Subaward Date                  | 6/1/2023                       |  |
| Place of Performance Address 1 | 500 Ship's Landing Way         |  |
| Place of Performance Address 2 |                                |  |
| Place of Performance Address 3 |                                |  |
| Place of Performance City      | New Castle                     |  |
| Place of Performance State     | DE                             |  |
| Place of Performance Zip       | 19720                          |  |
| Place of Performance Zip+4     |                                |  |
| Description                    | Workforce Development Services |  |
| Subrecipient                   | Delaware Skills Center         |  |
| Period of Performance Start    | 6/1/2023                       |  |

#### Subward No: 19769-58

| Subaward Type                  | Contract: Purchase Order       |
|--------------------------------|--------------------------------|
| Subaward Obligation            | \$311,119.00                   |
| Subaward Date                  | 6/1/2023                       |
| Place of Performance Address 1 | 222 Lake Drive                 |
| Place of Performance Address 2 |                                |
| Place of Performance Address 3 |                                |
| Place of Performance City      | Newark                         |
| Place of Performance State     | DE                             |
| Place of Performance Zip       | 19702                          |
| Place of Performance Zip+4     |                                |
| Description                    | Workforce Development Services |
| Subrecipient                   | Food Bank of Delaware Inc      |
| Period of Performance Start    | 6/1/2023                       |
| Period of Performance End      | 12/31/2026                     |

#### Subward No: 19769-9539000040

| Subaward Type                  | Contract: Purchase Order       |
|--------------------------------|--------------------------------|
| Subaward Obligation            | \$142,920.00                   |
| Subaward Date                  | 6/1/2023                       |
| Place of Performance Address 1 | 823 Walnut Shade Rd            |
| Place of Performance Address 2 |                                |
| Place of Performance Address 3 |                                |
| Place of Performance City      | Dover                          |
| Place of Performance State     | DE                             |
| Place of Performance Zip       | 19901                          |
| Place of Performance Zip+4     |                                |
| Description                    | Workforce Development services |
| Subrecipient                   | POLYTECH ADULT EDUCATION       |
| Period of Performance Start    | 6/1/2023                       |
| Period of Performance End      | 12/31/2026                     |

#### Subward No: 19769-9540000000

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$178,729.00             |
| Subaward Date                  | 6/1/2023                 |
| Place of Performance Address 1 | 17099 County Seat Hwy    |
|                                |                          |

| Place of Performance Address 2 |                                |
|--------------------------------|--------------------------------|
| Place of Performance Address 3 |                                |
| Place of Performance City      | Georgetown                     |
| Place of Performance State     | DE                             |
| Place of Performance Zip       | 19947                          |
| Place of Performance Zip+4     |                                |
| Description                    | Workforce development services |
| Subrecipient                   | Sussex Technical Schl District |
| Period of Performance Start    | 6/1/2023                       |
| Period of Performance End      | 12/31/2026                     |

## Subward No: 19771-676612

| Subaward Type                  | Contract: Purchase Order       |
|--------------------------------|--------------------------------|
| Subaward Obligation            | \$0.00                         |
| Subaward Date                  | 2/1/2023                       |
| Place of Performance Address 1 | 4931 MERMAID BLVD              |
| Place of Performance Address 2 |                                |
| Place of Performance Address 3 |                                |
| Place of Performance City      | WILMINGTON                     |
| Place of Performance State     | DE                             |
| Place of Performance Zip       | 19808                          |
| Place of Performance Zip+4     |                                |
| Description                    | Business Liaison contract work |
| Subrecipient                   | PENNI ENAMA                    |
| Period of Performance Start    | 2/1/2023                       |
| Period of Performance End      | 12/31/2026                     |

#### Subward No: 19771-675320

| Subaward Type                  | Contract: Purchase Order  |  |
|--------------------------------|---------------------------|--|
| Subaward Obligation            | \$60,000.00               |  |
| Subaward Date                  | 2/1/2023                  |  |
| Place of Performance Address 1 | 1417 JAN DR               |  |
| Place of Performance Address 2 |                           |  |
| Place of Performance Address 3 |                           |  |
| Place of Performance City      | WILMINGTON                |  |
| Place of Performance State     | DE                        |  |
| Place of Performance Zip       | 19803                     |  |
| Place of Performance Zip+4     |                           |  |
| Description                    | Business Liaison contract |  |

| Subrecipient                | KATHERINE HOSEY CONSULTING |
|-----------------------------|----------------------------|
| Period of Performance Start | 2/1/2023                   |
| Period of Performance End   | 12/31/2026                 |

### Subward No: 19771-655253

| Subaward Type                  | Contract: Purchase Order    |
|--------------------------------|-----------------------------|
| Subaward Obligation            | \$126,000.00                |
| Subaward Date                  | 7/1/2022                    |
| Place of Performance Address 1 | 105 Chandler LANE           |
| Place of Performance Address 2 |                             |
| Place of Performance Address 3 |                             |
| Place of Performance City      | Wilmington                  |
| Place of Performance State     | DE                          |
| Place of Performance Zip       | 19807                       |
| Place of Performance Zip+4     |                             |
| Description                    | project management services |
| Subrecipient                   | GEORGE S FRANKEL            |
| Period of Performance Start    | 7/1/2022                    |
| Period of Performance End      | 12/31/2026                  |

## Subward No: 19777-9503200000

| Subaward Type                  | Contract: Purchase Order                                |
|--------------------------------|---|
| Subaward Obligation            | \$90,600.00   |
| Subaward Date                  | 10/13/2023  |
| Place of Performance Address 1 | 401 Federal St  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Dover   |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19901   |
| Place of Performance Zip+4     |   |
| Description                    | Educational and training services                       |
| Subrecipient                   | Delaware Department of Education Special Needs Programs |
| Period of Performance Start    | 10/13/2023  |
| Period of Performance End      | 12/31/2026  |

#### Subward No: 19867-28428

| Subaward Type       | Contract: Purchase Order |
|---------------------|--------------------------|
| Subaward Obligation | \$222,480.00             |
|                     |                          |

| Subaward Date                  | 6/1/2023                             |
|--------------------------------|--------------------------------------|
| Place of Performance Address 1 | 1124 E 7TH ST                        |
| Place of Performance Address 2 |                                      |
| Place of Performance Address 3 |                                      |
| Place of Performance City      | WILMINGTON                           |
| Place of Performance State     | DE                                   |
| Place of Performance Zip       | 19801                                |
| Place of Performance Zip+4     |                                      |
| Description                    | Pre-apprenticiship program services. |
| Subrecipient                   | CHALLENGE PROGRAM                    |
| Period of Performance Start    | 6/1/2023                             |
| Period of Performance End      | 12/31/2026                           |

## Subward No: 19867-473032

| Subaward Type                  | Contract: Purchase Order                       |
|--------------------------------|--|
| Subaward Obligation            | \$780,340.00                                   |
| Subaward Date                  | 6/1/2023                                       |
| Place of Performance Address 1 | 19 LAMBSON LANE                                |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | NEW CASTLE                                     |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19720  |
| Place of Performance Zip+4     |  |
| Description                    | Pre-apprenticeship programs                    |
| Subrecipient                   | LEEP Inc Labor Economics Education emPowerment |
| Period of Performance Start    | 6/1/2023                                       |
| Period of Performance End      | 12/31/2026                                     |

## Subward No: 19867-652006

| 15,396.00<br>1/2023<br>30 BOWERS ST |
|-------------------------------------|
|                                     |
| 30 BOWERS ST                        |
|                                     |
|                                     |
|                                     |
| ilmington                           |
| 3                                   |
| 802                                 |
| Ξ                                   |

| Place of Performance Zip+4  |                            |
|-----------------------------|----------------------------|
| Description                 | Preapprenticeship services |
| Subrecipient                | Nerdit Now LLC             |
| Period of Performance Start | 6/1/2023                   |
| Period of Performance End   | 12/31/2026                 |

#### Subward No: 19867-9539000040

| Subaward Type                  | Contract: Purchase Order   |
|--------------------------------|----------------------------|
| Subaward Obligation            | \$160,880.00               |
| Subaward Date                  | 6/1/2023                   |
| Place of Performance Address 1 | PO BOX 102                 |
| Place of Performance Address 2 |                            |
| Place of Performance Address 3 |                            |
| Place of Performance City      | WOODSIDE                   |
| Place of Performance State     | DE                         |
| Place of Performance Zip       | 19980                      |
| Place of Performance Zip+4     |                            |
| Description                    | preapprenticeship services |
| Subrecipient                   | POLYTECH ADULT EDUCATION   |
| Period of Performance Start    | 6/1/2023                   |
| Period of Performance End      | 12/31/2026                 |

#### Subward No: 19867-9538000080

| Subaward Type                  | Contract: Purchase Order   |
|--------------------------------|----------------------------|
| Subaward Obligation            | \$298,390.00               |
| Subaward Date                  | 6/1/2023                   |
| Place of Performance Address 1 | 500 SHIPS LANDING WAY      |
| Place of Performance Address 2 |                            |
| Place of Performance Address 3 |                            |
| Place of Performance City      | NEW CASTLE                 |
| Place of Performance State     | DE                         |
| Place of Performance Zip       | 19720                      |
| Place of Performance Zip+4     |                            |
| Description                    | Pre-apprenticeship program |
| Subrecipient                   | Delaware Skills Center     |
| Period of Performance Start    | 6/1/2023                   |
| Period of Performance End      | 12/31/2026                 |

Τ

## Subward No: 19186-30078

| Subaward Type                  | Contract: Purchase Order       |  |
|--------------------------------|--------------------------------|--|
| Subaward Obligation            | \$200,000.00                   |  |
| Subaward Date                  | 5/16/2023                      |  |
| Place of Performance Address 1 | 1 Park Avenue                  |  |
| Place of Performance Address 2 |                                |  |
| Place of Performance Address 3 |                                |  |
| Place of Performance City      | Milford                        |  |
| Place of Performance State     | DE                             |  |
| Place of Performance Zip       | 19963                          |  |
| Place of Performance Zip+4     |                                |  |
| Description                    | Construction/Building Services |  |
| Subrecipient                   | Davis Bowen & Friedel Inc      |  |
| Period of Performance Start    | 5/16/2023                      |  |
| Period of Performance End      | 12/31/2026                     |  |

#### Subward No: 19865

| Contract: Purchase Order   |
|--|
| \$650,000.00   |
| 9/12/2022  |
| 669 South Union Street   |
|  |
|  |
| Wilmington   |
| DE   |
| 19805  |
|  |
| Boys & Girls Clubs of Delaware seeks to build staff capacity<br>in the area of trauma informed care and support our ongoing<br>paradigm shift into becoming a trauma-informed<br>organization at all 40 locations across Delaware's three<br>counties. |
| BOYS & GIRLS CLUB OF DELAWARE  |
| 9/12/2022  |
| 12/31/2022   |
|  |

### Subward No: 19462-17797

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$3,000,000.00           |
| Subaward Date                  | 6/10/2022                |
| Place of Performance Address 1 | 3901 Philadelphia Pike   |
| Place of Performance Address 2 |                          |

| Place of Performance Address 3 |  |
|--------------------------------|--|
| Place of Performance City      | Claymont   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19703  |
| Place of Performance Zip+4     |  |
| Description                    | Creation and operation of a residential treatment campus for pregnant and parenting women (PPW)with SUD/ COD and their dependent children. |
| Subrecipient                   | GAUDENZIA INC  |
| Period of Performance Start    | 7/1/2023   |
| Period of Performance End      | 12/31/2026   |

## Subward No: 19954-11

| Subaward Type                  | Contract: Purchase Order        |
|--------------------------------|---------------------------------|
| Subaward Obligation            | \$171,949.00                    |
| Subaward Date                  | 9/8/2022                        |
| Place of Performance Address 1 | 403 N. Van Buren ST.            |
| Place of Performance Address 2 |                                 |
| Place of Performance Address 3 |                                 |
| Place of Performance City      | Wilmington                      |
| Place of Performance State     | DE                              |
| Place of Performance Zip       | 19805                           |
| Place of Performance Zip+4     |                                 |
| Description                    | Mental Health services award    |
| Subrecipient                   | Latin American Community Center |
| Period of Performance Start    | 9/8/2022                        |
| Period of Performance End      | 12/31/2026                      |

#### Subward No: 19851-14930

| Subaward Type                  | Grant: Lump Sum Payment(s) |
|--------------------------------|----------------------------|
| Subaward Obligation            | \$208,110.00               |
| Subaward Date                  | 7/1/2022                   |
| Place of Performance Address 1 | 2400 W. 4th Street         |
| Place of Performance Address 2 |                            |
| Place of Performance Address 3 |                            |
| Place of Performance City      | Wilmington                 |
| Place of Performance State     | DE                         |
| Place of Performance Zip       | 19805                      |
| Place of Performance Zip+4     |                            |
|                                |                            |

| Description                 | The National Alliance on Mental Illness in Delaware (NAMI<br>Delaware) is expanding its capacity through the hiring and<br>training of one full-time Peer Services Manager,<br>Independent Contractors and allocating two existing staff<br>members to provide a variety of evidence-based peer<br>services programs. |
|-----------------------------|---|
| Subrecipient                | National Alliance on Mental Illness Delaware Foundation   |
| Period of Performance Start | 7/1/2022  |
| Period of Performance End   | 9/30/2022   |

#### Subward No: 19878-24330

| Subaward Type                  | Grant: Lump Sum Payment(s)  |
|--------------------------------|---|
| Subaward Obligation            | \$2,500,000.00  |
| Subaward Date                  | 9/18/2022   |
| Place of Performance Address 1 | 701 North Clayton Street  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Wilmington  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19805   |
| Place of Performance Zip+4     |   |
| Description                    | This specific project or purchase description is Improving<br>Population Health Through Enhanced Behavioral<br>Health Services, Programing, and Safety. |
| Subrecipient                   | St. Francis Hospital, Inc   |
| Period of Performance Start    | 9/18/2022   |
| Period of Performance End      | 12/31/2024  |

## Subward No: 19950-558592

| Subaward Type                  | Grant: Lump Sum Payment(s)   |
|--------------------------------|--|
| Subaward Obligation            | \$250,000.00   |
| Subaward Date                  | 9/14/2022  |
| Place of Performance Address 1 | 30668 Sussex Hwy   |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Laurel   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19956  |
| Place of Performance Zip+4     |  |
| Description                    | This specific project or purchase description is the Integrated<br>Community Mental Health Initiative that is a program for<br>preparation and implementation of a community mental and<br>primary health care integrated program in the migrant |

|                             | communities in Delaware. The funds will primarily be used<br>to fund infrastructure including equipment, staff training and<br>supplies. |
|-----------------------------|--|
| Subrecipient                | Tabitha Medical Care- Dorcas Salvation Foundation  |
| Period of Performance Start | 9/14/2022  |
| Period of Performance End   | 12/31/2026   |

## Subward No: 19949-599820

| Subaward Type                  | Grant: Lump Sum Payment(s)                              |
|--------------------------------|---|
| Subaward Obligation            | \$400,000.00  |
| Subaward Date                  | 9/20/2022   |
| Place of Performance Address 1 | 2500 W. 4th Street, Suite 2                             |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Wilmington  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19805   |
| Place of Performance Zip+4     |   |
| Description                    | Tele-Healthcare Platform and Capital Support Materials. |
| Subrecipient                   | TeleHelp 24/7   |
| Period of Performance Start    | 9/20/2022   |
| Period of Performance End      | 12/31/2026  |

## Subward No: 19939

| Subaward Type                  | Grant: Lump Sum Payment(s)   |
|--------------------------------|--|
| Subaward Obligation            | \$250,000.00   |
| Subaward Date                  | 9/15/2022  |
| Place of Performance Address 1 | 55 Huntley Circle  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Dover  |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19901  |
| Place of Performance Zip+4     |  |
| Description                    | Trauma Matters Delaware (TMD). Receiving these funds<br>will allow TMD to add value to the Delaware<br>trauma-informed care landscape by serving as the<br>knowledge and resource hub for individuals and<br>organizations across<br>the state. In addition to educating the public through<br>webinars, events, and other resources, TMD will use these<br>funds to provide technical assistance to organizations<br>seeking to implement a trauma-informed approach. TMD |

|                             | was created in response to the state's research where 50% of<br>people have experienced at least one adverse<br>childhood experience and now have experienced additional<br>public health impacts since the COVID pandemic. |
|-----------------------------|---|
| Subrecipient                | Trauma Matters Delaware   |
| Period of Performance Start | 9/15/2022   |
| Period of Performance End   | 12/31/2026  |

### Subward No: 19881-592959

| Subaward Type                  | Grant: Lump Sum Payment(s)   |
|--------------------------------|--|
| Subaward Obligation            | \$75,000.00  |
| Subaward Date                  | 9/12/2022  |
| Place of Performance Address 1 | 34011 Wescoats Road  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Lewes  |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19958  |
| Place of Performance Zip+4     |  |
| Description                    | To provide trauma therapy to the healthcare community in<br>Delaware. To provide trauma training to the clinical<br>community. To provide trauma education to the DE<br>community. |
| Subrecipient                   | Trauma Specialists of Delaware   |
| Period of Performance Start    | 9/12/2022  |
| Period of Performance End      | 12/31/2026   |

#### Subward No: 19461

| Contract: Purchase Order   |
|--|
| \$350,000.00   |
| 9/1/2022   |
| 920 South DuPont Pkwy  |
|  |
|  |
| Townsend   |
| DE   |
| 19734  |
|  |
| The program is designed to support the treatment and<br>prevention of obesity and mental health disease in kids and<br>adolescents who have experiences adverse childhood events<br>that include but are not limited to the covid 19 pandemic. |
|  |

| Subrecipient                | Delaware Pediatrics |
|-----------------------------|---------------------|
| Period of Performance Start | 9/1/2022            |
| Period of Performance End   | 12/31/2026          |

### Subward No: 19734

| Subaward Type                  | Grant: Reimbursable              |
|--------------------------------|----------------------------------|
| Subaward Obligation            | \$0.00                           |
| Subaward Date                  | 7/21/2022                        |
| Place of Performance Address 1 | 3920 South DuPont Pkwy           |
| Place of Performance Address 2 |                                  |
| Place of Performance Address 3 |                                  |
| Place of Performance City      | Townsend                         |
| Place of Performance State     | DE                               |
| Place of Performance Zip       | 19734                            |
| Place of Performance Zip+4     |                                  |
| Description                    | Pediatric mental health services |
| Subrecipient                   | Delaware Pediatrics              |
| Period of Performance Start    | 7/21/2022                        |
| Period of Performance End      | 12/31/2024                       |

## Subward No: 19521-23357

| Subaward Type                  | Grant: Lump Sum Payment(s)  |
|--------------------------------|---|
| Subaward Obligation            | \$5,000,000.00  |
| Subaward Date                  | 8/2/2022  |
| Place of Performance Address 1 | 684 Forest Street   |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Dover   |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19904   |
| Place of Performance Zip+4     |   |
| Description                    | The first component is the acquisition and renovation of the<br>property at 1156 Walker Road in Dover for use as a shelter<br>for women and children experiencing homelessness. The<br>second component is the purchase and renovation of 640 W.<br>Division Street in Dover for use as long-term supportive<br>housing for individuals and families moving from<br>homelessness to personal stability. Program services will be<br>provided in both buildings. As funds permit, additional<br>properties will be developed to house those who are<br>homeless or moving on from homelessness in Kent County. |
| Subrecipient                   | Dover Interfaith Mission for Housing, Inc.  |

| Period of Performance Start | 8/2/2022   |
|-----------------------------|------------|
| Period of Performance End   | 12/31/2026 |

#### Subward No: 19840-133149

| Subaward Type                  | Contract: Purchase Order                             |
|--------------------------------|--|
| Subaward Obligation            | \$4,756,633.32                                       |
| Subaward Date                  | 9/1/2022   |
| Place of Performance Address 1 | 11493 Sunset Hills Road                              |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Reston   |
| Place of Performance State     | VA   |
| Place of Performance Zip       | 20190  |
| Place of Performance Zip+4     |  |
| Description                    | OCM contractual support and IT Professional Services |
| Subrecipient                   | CARAHSOFT TECHNOLOGY CORPORATION                     |
| Period of Performance Start    | 9/1/2022   |
| Period of Performance End      | 12/31/2026   |

#### Subward No: 19840-630238

| Subaward Type                  | Contract: Purchase Order             |
|--------------------------------|--------------------------------------|
| Subaward Obligation            | \$95,760.00                          |
| Subaward Date                  | 10/1/2023                            |
| Place of Performance Address 1 | 9800 CROSSPOINT BLVD                 |
| Place of Performance Address 2 |                                      |
| Place of Performance Address 3 |                                      |
| Place of Performance City      | INDIANAPOLIS                         |
| Place of Performance State     | ID                                   |
| Place of Performance Zip       | 46256                                |
| Place of Performance Zip+4     |                                      |
| Description                    | IT professional services             |
| Subrecipient                   | GUIDESOFT INC DBA KNOWLEDGE SERVICES |
| Period of Performance Start    | 10/1/2023                            |
| Period of Performance End      | 12/31/2026                           |

## Subward No: 19704-630238

| Subaward Type       | Contract: Purchase Order |
|---------------------|--------------------------|
| Subaward Obligation | \$109,050.00             |
| Subaward Date       | 4/1/2023                 |
|                     |                          |

| Place of Performance Address 1 | 9800 CROSSPOINT BOULEVARD            |
|--------------------------------|--------------------------------------|
| Place of Performance Address 2 |                                      |
| Place of Performance Address 3 |                                      |
| Place of Performance City      | INDIANAPOLIS                         |
| Place of Performance State     | ID                                   |
| Place of Performance Zip       | 46256                                |
| Place of Performance Zip+4     |                                      |
| Description                    | Computer services                    |
| Subrecipient                   | GUIDESOFT INC DBA KNOWLEDGE SERVICES |
| Period of Performance Start    | 4/1/2023                             |
| Period of Performance End      | 6/30/2023                            |

## Subward No: 19704-49758

| Subaward Type                  | Contract: Purchase Order |  |
|--------------------------------|--------------------------|--|
| Subaward Obligation            | \$408,345.25             |  |
| Subaward Date                  | 7/1/2023                 |  |
| Place of Performance Address 1 | 920 JUSTISON STREET      |  |
| Place of Performance Address 2 |                          |  |
| Place of Performance Address 3 |                          |  |
| Place of Performance City      | WILMINGTON               |  |
| Place of Performance State     | DE                       |  |
| Place of Performance Zip       | 19801                    |  |
| Place of Performance Zip+4     |                          |  |
| Description                    | IT Hardware Maintenance  |  |
| Subrecipient                   | Info Solutions LLC       |  |
| Period of Performance Start    | 7/1/2023                 |  |
| Period of Performance End      | 9/30/2023                |  |

## Subward No: 19704-35850

| Subaward Type                  | Contract: Purchase Order |  |
|--------------------------------|--------------------------|--|
| Subaward Obligation            | \$2,321,941.00           |  |
| Subaward Date                  | 7/1/2023                 |  |
| Place of Performance Address 1 | 555 E NORTH LN STE 5045  |  |
| Place of Performance Address 2 |                          |  |
| Place of Performance Address 3 |                          |  |
| Place of Performance City      | CONSHOHOCKEN             |  |
| Place of Performance State     | РА                       |  |
| Place of Performance Zip       | 19428                    |  |
| Place of Performance Zip+4     |                          |  |

| Description                 | Computer Services                       |
|-----------------------------|---|
| Subrecipient                | PRESIDIO NETWORKED SOLUTIONS GROUP, LLC |
| Period of Performance Start | 7/1/2023                                |
| Period of Performance End   | 9/30/2023                               |

## Subward No: 19704-16884

| Subaward Type                  | Contract: Purchase Order |
|--------------------------------|--------------------------|
| Subaward Obligation            | \$214,185.36             |
| Subaward Date                  | 7/1/2022                 |
| Place of Performance Address 1 | 290 Davidson Avenue      |
| Place of Performance Address 2 |                          |
| Place of Performance Address 3 |                          |
| Place of Performance City      | Somerset                 |
| Place of Performance State     | NJ                       |
| Place of Performance Zip       | 08873                    |
| Place of Performance Zip+4     |                          |
| Description                    | Network Modernization    |
| Subrecipient                   | SHI INTERNATIONAL CORP   |
| Period of Performance Start    | 7/1/2022                 |
| Period of Performance End      | 12/31/2026               |

## Subward No: 19736

| Subaward Type                  | Contract: Purchase Order   |
|--------------------------------|--|
| Subaward Obligation            | \$2,900,000.00   |
| Subaward Date                  | 8/15/2022  |
| Place of Performance Address 1 | 363 Saulsbury RD   |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Dover  |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19904  |
| Place of Performance Zip+4     |  |
| Description                    | ARPA funding in the total amount of \$3 Million to leverage<br>\$5 million from USDA Rural Development's farm labor<br>housing loan and grant program (the maximum loan and<br>grant amount USDA Rural Development (RD) will allocate<br>a farm labor housing complex) to develop 40 units of rental<br>housing for poultry processing workers. This seed<br>investment of \$3 million from ARPA will also leverage 40<br>units of rental assistance through RD so that no tenant will<br>pay more than 30% of their income for rent and utilities.<br>NCALL will purchase a 10 acre building site with access to<br>public water/sewer, and near to services and transportation |

|                             | on which to build multi-family apartments, with land costs of \$1 Million and Other Development Costs of \$2 million. |
|-----------------------------|---|
| Subrecipient                | NeighborGood Partners (NCALL)   |
| Period of Performance Start | 8/15/2022   |
| Period of Performance End   | 12/31/2026  |

## Subward No: 19739

| Subaward Type                  | Grant: Lump Sum Payment(s)  |
|--------------------------------|---|
| Subaward Obligation            | \$4,000,000.00  |
| Subaward Date                  | 8/1/2022  |
| Place of Performance Address 1 | 363 Saulsbury Road  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Dover   |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19904   |
| Place of Performance Zip+4     |   |
| Description                    | In response to the current affordable housing crisis in Kent<br>and Sussex Counties, NCALL wishes to purchase parcels of<br>land for furture development of single- or multi-family<br>housing for low- and moderate-income households before<br>prices escalate further. |
| Subrecipient                   | NeighborGood Partners (NCALL)   |
| Period of Performance Start    | 8/1/2022  |
| Period of Performance End      | 9/30/2022   |

## Subward No: 19924-29171

| Subaward Type                  | Contract: Purchase Order   |
|--------------------------------|--|
| Subaward Obligation            | \$1,000,000.00   |
| Subaward Date                  | 9/21/2022  |
| Place of Performance Address 1 | 414 N COX ST   |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | MIDDLETOWN   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19709  |
| Place of Performance Zip+4     |  |
| Description                    | Southbridge Community Beautification and Housing<br>Revitalization Project |
| Subrecipient                   | NEIGHBORHOOD HOUSE COMMUNITY<br>DEVELOPMENT CORPORATION                    |
| Period of Performance Start    | 9/21/2022  |

| Period of Performance End | 12/31/2026 |
|---------------------------|------------|
|---------------------------|------------|

#### Subward No: 19522

| Subaward Type                  | Grant: Lump Sum Payment(s)  |
|--------------------------------|---|
| Subaward Obligation            | \$3,000,000.00  |
| Subaward Date                  | 7/1/2022  |
| Place of Performance Address 1 | 206 Academy Street  |
| Place of Performance Address 2 |   |
| Place of Performance Address 3 |   |
| Place of Performance City      | Georgetown  |
| Place of Performance State     | DE  |
| Place of Performance Zip       | 19947   |
| Place of Performance Zip+4     |   |
| Description                    | This specific project or purchase description includes four<br>projects: Kimmeytown Revitalization, ReStore Expansion,<br>Affordable Home Construction, and Home Repairs. The four<br>projects will increase fundraising and volunteer capacity,<br>build 35 affordable homes, repair approximately 275 homes,<br>and expand the Sussex County Habitat for Humanity<br>ReStore. |
| Subrecipient                   | Sussex Habitat for Humanity   |
| Period of Performance Start    | 7/1/2022  |
| Period of Performance End      | 12/31/2026  |

## Subward No: 19783

| Subaward Type                  | Grant: Lump Sum Payment(s)   |
|--------------------------------|--|
| Subaward Obligation            | \$1,500,000.00   |
| Subaward Date                  | 7/19/2022  |
| Place of Performance Address 1 | 400 N Walnut Street  |
| Place of Performance Address 2 |  |
| Place of Performance Address 3 |  |
| Place of Performance City      | Wilmington   |
| Place of Performance State     | DE   |
| Place of Performance Zip       | 19801  |
| Place of Performance Zip+4     |  |
| Description                    | Increase the number of affordable housing units in<br>Wilmington and throughout Delaware for low-income<br>families. |
| Subrecipient                   | Wilmington Housing Authority   |
| Period of Performance Start    | 7/19/2022  |
| Period of Performance End      | 12/31/2026   |

# Expenditures

#### Expenditures for Awards more than \$50,000

## Expenditure: EN-00799440

| Project Name       | DHSS Emer Housing Adams St. |
|--------------------|-----------------------------|
| Subaward ID        | SUB-0520551                 |
| Subaward No        | 20366-0014                  |
| Subaward Amount    | \$148,295.00                |
| Subaward Type      | Contract: Purchase Order    |
| Subrecipient Name  | FAIRFIELD INN & SUITES      |
| Expenditure Start  | 12/7/2022                   |
| Expenditure End    | 12/31/2022                  |
| Expenditure Amount | \$89,730.00                 |

## Expenditure: EN-01181274

| Project Name       | DHSS Emer Housing Adams St. |
|--------------------|-----------------------------|
| Subaward ID        | SUB-0520551                 |
| Subaward No        | 20366-0014                  |
| Subaward Amount    | \$148,295.00                |
| Subaward Type      | Contract: Purchase Order    |
| Subrecipient Name  | FAIRFIELD INN & SUITES      |
| Expenditure Start  | 1/1/2023                    |
| Expenditure End    | 3/31/2023                   |
| Expenditure Amount | \$58,565.00                 |

| OGOV MH DE Psychological           |
|------------------------------------|
| SUB-0545298                        |
| 19953                              |
| \$350,000.00                       |
| Contract: Purchase Order           |
| Delaware Psychological Association |
| 10/24/2022                         |
| 12/31/2022                         |
| \$6,146.66                         |
|                                    |

| Project Name       | OGOV MH DE Psychological           |
|--------------------|------------------------------------|
| Subaward ID        | SUB-0545298                        |
| Subaward No        | 19953                              |
| Subaward Amount    | \$350,000.00                       |
| Subaward Type      | Contract: Purchase Order           |
| Subrecipient Name  | Delaware Psychological Association |
| Expenditure Start  | 1/1/2023                           |
| Expenditure End    | 3/31/2023                          |
| Expenditure Amount | \$110,520.34                       |

## Expenditure: EN-01916714

| Project Name       | OGOV MH DE Psychological           |
|--------------------|------------------------------------|
| Subaward ID        | SUB-0545298                        |
| Subaward No        | 19953                              |
| Subaward Amount    | \$350,000.00                       |
| Subaward Type      | Contract: Purchase Order           |
| Subrecipient Name  | Delaware Psychological Association |
| Expenditure Start  | 10/1/2023                          |
| Expenditure End    | 12/31/2023                         |
| Expenditure Amount | \$116,667.00                       |

## Expenditure: EN-00842952

| Project Name       | OGOV Todmorden Foundation |
|--------------------|---------------------------|
| Subaward ID        | SUB-0545738               |
| Subaward No        | 20462                     |
| Subaward Amount    | \$2,500,000.00            |
| Subaward Type      | Grant: Reimbursable       |
| Subrecipient Name  | Todmorden Foundation      |
| Expenditure Start  | 12/1/2022                 |
| Expenditure End    | 12/31/2022                |
| Expenditure Amount | \$132,744.48              |

| Project Name | OGOV Todmorden Foundation |
|--------------|---------------------------|
| Subaward ID  | SUB-0545738               |
|              |                           |

| Subaward No        | 20462                |
|--------------------|----------------------|
| Subaward Amount    | \$2,500,000.00       |
| Subaward Type      | Grant: Reimbursable  |
| Subrecipient Name  | Todmorden Foundation |
| Expenditure Start  | 1/1/2023             |
| Expenditure End    | 3/31/2023            |
| Expenditure Amount | \$717,255.52         |

| Project Name       | OGOV MH Limen Recovery     |
|--------------------|----------------------------|
| Subaward ID        | SUB-0545806                |
| Subaward No        | 20145                      |
| Subaward Amount    | \$1,200,000.00             |
| Subaward Type      | Grant: Lump Sum Payment(s) |
| Subrecipient Name  | Limen Recovery + Wellness  |
| Expenditure Start  | 1/1/2023                   |
| Expenditure End    | 3/31/2023                  |
| Expenditure Amount | \$1,200,000.00             |

## Expenditure: EN-00843314

| Project Name       | OGOV MH BEEBE MOBILE HEALTH |
|--------------------|-----------------------------|
| Subaward ID        | SUB-0545822                 |
| Subaward No        | 19952                       |
| Subaward Amount    | \$3,500,000.00              |
| Subaward Type      | Grant: Reimbursable         |
| Subrecipient Name  | Beebe Medical Center Inc    |
| Expenditure Start  | 10/1/2022                   |
| Expenditure End    | 12/31/2022                  |
| Expenditure Amount | \$58,586.02                 |

| Project Name      | OGOV MH BEEBE MOBILE HEALTH |
|-------------------|-----------------------------|
| Subaward ID       | SUB-0545822                 |
| Subaward No       | 19952                       |
| Subaward Amount   | \$3,500,000.00              |
| Subaward Type     | Grant: Reimbursable         |
| Subrecipient Name | Beebe Medical Center Inc    |
|                   |                             |

| Expenditure Start  | 1/1/2023     |
|--------------------|--------------|
| Expenditure End    | 3/31/2023    |
| Expenditure Amount | \$999,259.98 |

| Project Name       | OGOV MH Supporting Kidds |
|--------------------|--------------------------|
| Subaward ID        | SUB-0545834              |
| Subaward No        | 20178                    |
| Subaward Amount    | \$150,000.00             |
| Subaward Type      | Grant: Reimbursable      |
| Subrecipient Name  | Supporting Kidds         |
| Expenditure Start  | 11/1/2022                |
| Expenditure End    | 12/31/2022               |
| Expenditure Amount | \$9,950.00               |

#### Expenditure: EN-01614212

| Project Name       | OGOV MH Supporting Kidds |
|--------------------|--------------------------|
| Subaward ID        | SUB-0545834              |
| Subaward No        | 20178                    |
| Subaward Amount    | \$150,000.00             |
| Subaward Type      | Grant: Reimbursable      |
| Subrecipient Name  | Supporting Kidds         |
| Expenditure Start  | 4/1/2023                 |
| Expenditure End    | 6/30/2023                |
| Expenditure Amount | \$69,150.00              |

## Expenditure: EN-01916715

| Project Name       | OGOV MH Supporting Kidds |
|--------------------|--------------------------|
| Subaward ID        | SUB-0545834              |
| Subaward No        | 20178                    |
| Subaward Amount    | \$150,000.00             |
| Subaward Type      | Grant: Reimbursable      |
| Subrecipient Name  | Supporting Kidds         |
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$70,900.00              |

| Project Name       | OGOV MH Hope Commission    |
|--------------------|----------------------------|
| Subaward ID        | SUB-0548127                |
| Subaward No        | 20460                      |
| Subaward Amount    | \$1,000,000.00             |
| Subaward Type      | Contract: Purchase Order   |
| Subrecipient Name  | Wilmington Hope Commission |
| Expenditure Start  | 1/1/2023                   |
| Expenditure End    | 3/31/2023                  |
| Expenditure Amount | \$918,700.00               |

| Project Name       | OGOV MH Love & Hope Rescue   |
|--------------------|------------------------------|
| Subaward ID        | SUB-0548132                  |
| Subaward No        | 20490                        |
| Subaward Amount    | \$500,000.00                 |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | Love and Hope Rescue Mission |
| Expenditure Start  | 1/1/2023                     |
| Expenditure End    | 3/31/2023                    |
| Expenditure Amount | \$125,000.00                 |

## Expenditure: EN-01780627

| Project Name       | OGOV MH Love & Hope Rescue   |
|--------------------|------------------------------|
| Subaward ID        | SUB-0548132                  |
| Subaward No        | 20490                        |
| Subaward Amount    | \$500,000.00                 |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | Love and Hope Rescue Mission |
| Expenditure Start  | 7/1/2023                     |
| Expenditure End    | 9/30/2023                    |
| Expenditure Amount | \$125,000.00                 |

| Project Name | OGOV MH Gamma Theta Lambda |
|--------------|----------------------------|
| Subaward ID  | SUB-0548140                |
| Subaward No  | 19951                      |
|              |                            |

| Subaward Amount    | \$200,000.00                                |
|--------------------|---|
| Subaward Type      | Contract: Purchase Order                    |
| Subrecipient Name  | Gamma Theta Lambda Education Foundation Inc |
| Expenditure Start  | 1/1/2023                                    |
| Expenditure End    | 3/31/2023                                   |
| Expenditure Amount | \$100,000.00                                |

| Project Name       | OGOV Wilmington Land Bank                     |
|--------------------|---|
| Subaward ID        | SUB-0548296                                   |
| Subaward No        | 19942   |
| Subaward Amount    | \$4,500,000.00                                |
| Subaward Type      | Contract: Purchase Order                      |
| Subrecipient Name  | Wilmington Neighborhood Conservancy Land Bank |
| Expenditure Start  | 10/19/2022                                    |
| Expenditure End    | 12/31/2022                                    |
| Expenditure Amount | \$129,903.00                                  |

## Expenditure: EN-01174074

| Project Name       | OGOV Wilmington Land Bank                     |
|--------------------|---|
| Subaward ID        | SUB-0548296                                   |
| Subaward No        | 19942   |
| Subaward Amount    | \$4,500,000.00                                |
| Subaward Type      | Contract: Purchase Order                      |
| Subrecipient Name  | Wilmington Neighborhood Conservancy Land Bank |
| Expenditure Start  | 1/1/2023                                      |
| Expenditure End    | 3/31/2023                                     |
| Expenditure Amount | \$1,370,097.00                                |

| Project Name      | OGOV Wilmington Land Bank                     |
|-------------------|---|
| Subaward ID       | SUB-0548296                                   |
| Subaward No       | 19942   |
| Subaward Amount   | \$4,500,000.00                                |
| Subaward Type     | Contract: Purchase Order                      |
| Subrecipient Name | Wilmington Neighborhood Conservancy Land Bank |
| Expenditure Start | 7/1/2023                                      |
|                   |   |

| Expenditure End    | 9/30/2023      |
|--------------------|----------------|
| Expenditure Amount | \$1,500,000.00 |

| Project Name       | DSHA Catalyst Fund               |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0548820                      |
| Subaward No        | 20172                            |
| Subaward Amount    | \$225,000.00                     |
| Subaward Type      | Grant: Reimbursable              |
| Subrecipient Name  | DELAWARE STATE HOUSING AUTHORITY |
| Expenditure Start  | 1/1/2023                         |
| Expenditure End    | 3/31/2023                        |
| Expenditure Amount | \$225,000.00                     |

## Expenditure: EN-01188360

| Project Name       | DSHA Market Pressure Relief      |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0548834                      |
| Subaward No        | 20263                            |
| Subaward Amount    | \$9,900,000.00                   |
| Subaward Type      | Grant: Reimbursable              |
| Subrecipient Name  | DELAWARE STATE HOUSING AUTHORITY |
| Expenditure Start  | 1/1/2023                         |
| Expenditure End    | 3/31/2023                        |
| Expenditure Amount | \$9,900,000.00                   |

## Expenditure: EN-01188358

| Project Name       | DSHA Rent Reporting              |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0548829                      |
| Subaward No        | 20158                            |
| Subaward Amount    | \$220,000.00                     |
| Subaward Type      | Grant: Reimbursable              |
| Subrecipient Name  | DELAWARE STATE HOUSING AUTHORITY |
| Expenditure Start  | 1/1/2023                         |
| Expenditure End    | 3/31/2023                        |
| Expenditure Amount | \$220,000.00                     |

| Project Name       | DOL Marketing & Communications      |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0605994                         |
| Subaward No        | 20802-599807                        |
| Subaward Amount    | \$737,000.00                        |
| Subaward Type      | Contract: Purchase Order            |
| Subrecipient Name  | OVP MANAGEMENT CONSULTING GROUP INC |
| Expenditure Start  | 4/1/2023                            |
| Expenditure End    | 6/30/2023                           |
| Expenditure Amount | \$95,445.00                         |

| Project Name       | DOL Marketing & Communications      |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0605994                         |
| Subaward No        | 20802-599807                        |
| Subaward Amount    | \$737,000.00                        |
| Subaward Type      | Contract: Purchase Order            |
| Subrecipient Name  | OVP MANAGEMENT CONSULTING GROUP INC |
| Expenditure Start  | 7/1/2023                            |
| Expenditure End    | 9/30/2023                           |
| Expenditure Amount | \$93,285.00                         |

# Expenditure: EN-01912948

| Project Name       | DOL Marketing & Communications |
|--------------------|--------------------------------|
| Subaward ID        | SUB-0796714                    |
| Subaward No        | 20802-483167                   |
| Subaward Amount    | \$52,200.00                    |
| Subaward Type      | Contract: Purchase Order       |
| Subrecipient Name  | FOREVER MEDIA OF DE LLC        |
| Expenditure Start  | 10/1/2023                      |
| Expenditure End    | 12/31/2023                     |
| Expenditure Amount | \$18,381.00                    |

| Project Name    | DOL Marketing & Communications |
|-----------------|--------------------------------|
| Subaward ID     | SUB-0605994                    |
| Subaward No     | 20802-599807                   |
| Subaward Amount | \$737,000.00                   |
|                 |                                |

| Subaward Type      | Contract: Purchase Order            |
|--------------------|-------------------------------------|
| Subrecipient Name  | OVP MANAGEMENT CONSULTING GROUP INC |
| Expenditure Start  | 10/1/2023                           |
| Expenditure End    | 12/31/2023                          |
| Expenditure Amount | \$121,905.00                        |

| Project Name       | DEMA Comprehensive School Safety Plan |
|--------------------|---------------------------------------|
| Subaward ID        | SUB-0606265                           |
| Subaward No        | 20650_442388                          |
| Subaward Amount    | \$478,700.00                          |
| Subaward Type      | Contract: Purchase Order              |
| Subrecipient Name  | INSPIRIT GROUP LLC DBA STOPIT         |
| Expenditure Start  | 2/1/2023                              |
| Expenditure End    | 2/1/2023                              |
| Expenditure Amount | \$133,000.00                          |

# Expenditure: EN-01946362

| Project Name       | DHSS Gun Violence Safer Delaware |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0842683                      |
| Subaward No        | 20129-707363                     |
| Subaward Amount    | \$64,750.00                      |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | GOODEN AVENUE LLC                |
| Expenditure Start  | 10/1/2023                        |
| Expenditure End    | 12/31/2023                       |
| Expenditure Amount | \$18,500.00                      |

| Project Name      | DTI Email Phishing Tools         |
|-------------------|----------------------------------|
| Subaward ID       | SUB-0722837                      |
| Subaward No       | 20647-133149                     |
| Subaward Amount   | \$316,154.50                     |
| Subaward Type     | Direct Payment                   |
| Subrecipient Name | CARAHSOFT TECHNOLOGY CORPORATION |
| Expenditure Start | 4/1/2023                         |
| Expenditure End   | 6/30/2023                        |
|                   |                                  |

| Project Name       | OGOV MH SUN Behavioral   |
|--------------------|--------------------------|
| Subaward ID        | SUB-0627536              |
| Subaward No        | 20493                    |
| Subaward Amount    | \$3,500,000.00           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | SUN Behavioral Delaware  |
| Expenditure Start  | 1/1/2023                 |
| Expenditure End    | 3/31/2023                |
| Expenditure Amount | \$1,500,000.00           |

## Expenditure: EN-01916716

| Project Name       | OGOV MH SUN Behavioral   |
|--------------------|--------------------------|
| Subaward ID        | SUB-0627536              |
| Subaward No        | 20493                    |
| Subaward Amount    | \$3,500,000.00           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | SUN Behavioral Delaware  |
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$2,000,000.00           |

## Expenditure: EN-01233705

| Project Name       | OGOV MH University of Delaware MSW |
|--------------------|------------------------------------|
| Subaward ID        | SUB-0627872                        |
| Subaward No        | 20495-33                           |
| Subaward Amount    | \$700,000.00                       |
| Subaward Type      | Contract: Purchase Order           |
| Subrecipient Name  | University of Delaware             |
| Expenditure Start  | 1/1/2023                           |
| Expenditure End    | 3/31/2023                          |
| Expenditure Amount | \$145,620.00                       |

| Project Name | OGOV MH SOAR |
|--------------|--------------|
|              | r i          |

| Subaward ID        | SUB-0627964                          |
|--------------------|--------------------------------------|
| Subaward No        | 20753-27371                          |
| Subaward Amount    | \$50,000.00                          |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | SURVIVORS OF ABUSE IN RECOVERY, INC. |
| Expenditure Start  | 4/1/2023                             |
| Expenditure End    | 6/30/2023                            |
| Expenditure Amount | \$12,500.00                          |

| Project Name       | OGOV MH SOAR                         |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0627964                          |
| Subaward No        | 20753-27371                          |
| Subaward Amount    | \$50,000.00                          |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | SURVIVORS OF ABUSE IN RECOVERY, INC. |
| Expenditure Start  | 7/1/2023                             |
| Expenditure End    | 9/30/2023                            |
| Expenditure Amount | \$12,500.00                          |

## Expenditure: EN-01916718

| Project Name       | OGOV MH SOAR                         |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0627964                          |
| Subaward No        | 20753-27371                          |
| Subaward Amount    | \$50,000.00                          |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | SURVIVORS OF ABUSE IN RECOVERY, INC. |
| Expenditure Start  | 10/1/2023                            |
| Expenditure End    | 12/31/2023                           |
| Expenditure Amount | \$12,500.00                          |

| Project Name    | OGOV Delaware Technology Park |
|-----------------|-------------------------------|
| Subaward ID     | SUB-0628228                   |
| Subaward No     | 20921-27350                   |
| Subaward Amount | \$250,000.00                  |
| Subaward Type   | Contract: Purchase Order      |
|                 |                               |

| Subrecipient Name  | DELAWARE TECHNOLOGY PARK, INC. |
|--------------------|--------------------------------|
| Expenditure Start  | 4/1/2023                       |
| Expenditure End    | 6/30/2023                      |
| Expenditure Amount | \$31,500.00                    |

| Project Name       | OGOV Delaware Technology Park  |
|--------------------|--------------------------------|
| Subaward ID        | SUB-0628228                    |
| Subaward No        | 20921-27350                    |
| Subaward Amount    | \$250,000.00                   |
| Subaward Type      | Contract: Purchase Order       |
| Subrecipient Name  | DELAWARE TECHNOLOGY PARK, INC. |
| Expenditure Start  | 10/1/2023                      |
| Expenditure End    | 12/31/2023                     |
| Expenditure Amount | \$80,000.00                    |

## Expenditure: EN-01614204

| Project Name       | OGOV Code Differently    |
|--------------------|--------------------------|
| Subaward ID        | SUB-0628302              |
| Subaward No        | 20984-466164             |
| Subaward Amount    | \$750,000.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | CODE DIFFERENTLY, LLC    |
| Expenditure Start  | 4/1/2023                 |
| Expenditure End    | 6/30/2023                |
| Expenditure Amount | \$200,000.00             |

| Project Name       | OGOV Code Differently    |
|--------------------|--------------------------|
| Subaward ID        | SUB-0628302              |
| Subaward No        | 20984-466164             |
| Subaward Amount    | \$750,000.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | CODE DIFFERENTLY, LLC    |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$225,000.00             |

| Project Name       | OGOV Code Differently    |
|--------------------|--------------------------|
| Subaward ID        | SUB-0628302              |
| Subaward No        | 20984-466164             |
| Subaward Amount    | \$750,000.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | CODE DIFFERENTLY, LLC    |
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$325,000.00             |

## Expenditure: EN-01651538

| Project Name       | OGOV Faithful Friends           |
|--------------------|---------------------------------|
| Subaward ID        | SUB-0749004                     |
| Subaward No        | 20983-29043                     |
| Subaward Amount    | \$250,000.00                    |
| Subaward Type      | Contract: Purchase Order        |
| Subrecipient Name  | Faithful Friends Animal Society |
| Expenditure Start  | 5/31/2023                       |
| Expenditure End    | 6/30/2023                       |
| Expenditure Amount | \$85,000.00                     |

#### Expenditure: EN-01651586

| Project Name       | OGOV Food Bank Assistance |
|--------------------|---------------------------|
| Subaward ID        | SUB-0749009               |
| Subaward No        | 21031-58                  |
| Subaward Amount    | \$3,247,890.00            |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | Food Bank of Delaware Inc |
| Expenditure Start  | 4/18/2023                 |
| Expenditure End    | 6/30/2023                 |
| Expenditure Amount | \$3,247,890.00            |

| Project Name | OGOV Newark Senior Center |
|--------------|---------------------------|
| Subaward ID  | SUB-0790218               |
|              |                           |

| Subaward No        | 21100-24687              |
|--------------------|--------------------------|
| Subaward Amount    | \$250,000.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | Newark Senior Center     |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$125,000.00             |

| Project Name       | OGOV Newark Senior Center |
|--------------------|---------------------------|
| Subaward ID        | SUB-0790218               |
| Subaward No        | 21100-24687               |
| Subaward Amount    | \$250,000.00              |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | Newark Senior Center      |
| Expenditure Start  | 10/1/2023                 |
| Expenditure End    | 12/31/2023                |
| Expenditure Amount | \$125,000.00              |

# Expenditure: EN-01799677

| Project Name       | OGOV LTG Vision to Learn |
|--------------------|--------------------------|
| Subaward ID        | SUB-0790660              |
| Subaward No        | 21159-431452             |
| Subaward Amount    | \$50,000.00              |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | VISION TO LEARN          |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$25,000.00              |

| Project Name      | LTG Community Housing & Empower - BreathLife |
|-------------------|--|
| Subaward ID       | SUB-0790664                                  |
| Subaward No       | 21252-84933                                  |
| Subaward Amount   | \$60,000.00                                  |
| Subaward Type     | Contract: Purchase Order                     |
| Subrecipient Name | COMMUNITY HOUSING & EMPOWERMENT<br>CONNECT   |

| Expenditure Start  | 7/1/2023    |
|--------------------|-------------|
| Expenditure End    | 9/30/2023   |
| Expenditure Amount | \$30,000.00 |

| Project Name       | OGOV LTG DHEC                        |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0790666                          |
| Subaward No        | 21255-690878                         |
| Subaward Amount    | \$490,000.00                         |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | DELAWARE HEALTH EQUITY COALITION INC |
| Expenditure Start  | 7/1/2023                             |
| Expenditure End    | 9/30/2023                            |
| Expenditure Amount | \$70,000.00                          |

## Expenditure: EN-01651546

| Project Name       | OGOV DRA Workforce 2.0          |
|--------------------|---------------------------------|
| Subaward ID        | SUB-0748962                     |
| Subaward No        | 20994-25552                     |
| Subaward Amount    | \$550,000.00                    |
| Subaward Type      | Contract: Purchase Order        |
| Subrecipient Name  | Delaware Restaurant Association |
| Expenditure Start  | 6/18/2023                       |
| Expenditure End    | 6/30/2023                       |
| Expenditure Amount | \$185,000.00                    |

#### Expenditure: EN-01651857

| Project Name       | OGOV GVI Wilmington PD       |
|--------------------|------------------------------|
| Subaward ID        | SUB-0750419                  |
| Subaward No        | 20993-25                     |
| Subaward Amount    | \$853,168.00                 |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | Wilmington Police Department |
| Expenditure Start  | 5/1/2023                     |
| Expenditure End    | 6/30/2023                    |
| Expenditure Amount | \$300,000.00                 |

| _                  |                          |
|--------------------|--------------------------|
| Project Name       | OGOV GVI Dover PD        |
| Subaward ID        | SUB-0750420              |
| Subaward No        | 20998-1                  |
| Subaward Amount    | \$1,038,576.00           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | Dover Police Department  |
| Expenditure Start  | 5/1/2023                 |
| Expenditure End    | 6/30/2023                |
| Expenditure Amount | \$968,602.00             |
|                    |                          |

| Project Name       | OMB DNG 12 Penns Way Land Purc |
|--------------------|--------------------------------|
| Subaward ID        | SUB-0805122                    |
| Subaward No        | 18822-17626                    |
| Subaward Amount    | \$5,701,750.00                 |
| Subaward Type      | Contract: Purchase Order       |
| Subrecipient Name  | FOX ROTHSCHILD LLP             |
| Expenditure Start  | 8/4/2023                       |
| Expenditure End    | 9/30/2023                      |
| Expenditure Amount | \$200,000.00                   |

# Expenditure: EN-01780751

| Project Name       | OGOV LTG DCRAC                                 |
|--------------------|--|
| Subaward ID        | SUB-0786207                                    |
| Subaward No        | 21395-27000                                    |
| Subaward Amount    | \$100,000.00                                   |
| Subaward Type      | Contract: Purchase Order                       |
| Subrecipient Name  | Delaware Community Reinvestment Action Council |
| Expenditure Start  | 7/1/2023                                       |
| Expenditure End    | 9/30/2023                                      |
| Expenditure Amount | \$50,000.00                                    |

| Project Name | OGOV LTG Choir School of DE |
|--------------|-----------------------------|
| Subaward ID  | SUB-0790363                 |
| Subaward No  | 21397-07391                 |
|              |                             |

| Subaward Amount    | \$75,000.00              |
|--------------------|--------------------------|
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | Choir School of DE       |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$37,500.00              |

| Project Name       | OGOV LTG Choir School of DE |
|--------------------|-----------------------------|
| Subaward ID        | SUB-0790363                 |
| Subaward No        | 21397-07391                 |
| Subaward Amount    | \$75,000.00                 |
| Subaward Type      | Contract: Purchase Order    |
| Subrecipient Name  | Choir School of DE          |
| Expenditure Start  | 10/1/2023                   |
| Expenditure End    | 12/31/2023                  |
| Expenditure Amount | \$37,500.00                 |

#### Expenditure: EN-01784375

| Project Name       | OGOV LTG Delaware Art Museum |
|--------------------|------------------------------|
| Subaward ID        | SUB-0790369                  |
| Subaward No        | 21398-24350                  |
| Subaward Amount    | \$125,000.00                 |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | Delaware Art Museum          |
| Expenditure Start  | 7/1/2023                     |
| Expenditure End    | 9/30/2023                    |
| Expenditure Amount | \$62,500.00                  |

| Project Name      | OGOV LTG Tech Impact     |
|-------------------|--------------------------|
| Subaward ID       | SUB-0799206              |
| Subaward No       | 21401-114478             |
| Subaward Amount   | \$60,000.00              |
| Subaward Type     | Contract: Purchase Order |
| Subrecipient Name | Tech Impact              |
| Expenditure Start | 7/17/2023                |
|                   |                          |

| Expenditure End    | 9/30/2023   |
|--------------------|-------------|
| Expenditure Amount | \$60,000.00 |

| Project Name       | OGOV LTG DETV            |
|--------------------|--------------------------|
| Subaward ID        | SUB-0790484              |
| Subaward No        | 21403-500820             |
| Subaward Amount    | \$150,000.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | DETV Foundation          |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$75,000.00              |

#### Expenditure: EN-01791506

| Project Name       | OGOV LTG Wilmington Senior Center |
|--------------------|-----------------------------------|
| Subaward ID        | SUB-0790485                       |
| Subaward No        | 21404-00019                       |
| Subaward Amount    | \$50,000.00                       |
| Subaward Type      | Contract: Purchase Order          |
| Subrecipient Name  | Wilmington Senior Center          |
| Expenditure Start  | 7/1/2023                          |
| Expenditure End    | 9/30/2023                         |
| Expenditure Amount | \$50,000.00                       |

#### Expenditure: EN-01916724

| Project Name       | OGOV LTG Purpose PR               |
|--------------------|-----------------------------------|
| Subaward ID        | SUB-0790486                       |
| Subaward No        | 21405-590409                      |
| Subaward Amount    | \$50,000.00                       |
| Subaward Type      | Contract: Purchase Order          |
| Subrecipient Name  | PORSHA HARGROVE PR AND CONSULTING |
| Expenditure Start  | 10/1/2023                         |
| Expenditure End    | 12/31/2023                        |
| Expenditure Amount | \$50,000.00                       |

| Project Name       | OGOV LTG Safe United S.U.N. |
|--------------------|-----------------------------|
| Subaward ID        | SUB-0790487                 |
| Subaward No        | 21560-701764                |
| Subaward Amount    | \$60,000.00                 |
| Subaward Type      | Contract: Purchase Order    |
| Subrecipient Name  | SAFE UNITED NEIGHBORHOODS   |
| Expenditure Start  | 7/1/2023                    |
| Expenditure End    | 9/30/2023                   |
| Expenditure Amount | \$38,000.00                 |

| Project Name       | OGOV LTG Network Connect |
|--------------------|--------------------------|
| Subaward ID        | SUB-0790488              |
| Subaward No        | 21562-607202             |
| Subaward Amount    | \$100,000.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | NETWORK CONNECT INC      |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$50,000.00              |

# Expenditure: EN-01791523

| Project Name       | OGOV United Way SBM      |
|--------------------|--------------------------|
| Subaward ID        | SUB-0790504              |
| Subaward No        | 21588-24423              |
| Subaward Amount    | \$1,300,000.00           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | United Way of Delaware   |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$434,000.00             |

| Project Name    | OGOV United Way SBM |
|-----------------|---------------------|
| Subaward ID     | SUB-0790504         |
| Subaward No     | 21588-24423         |
| Subaward Amount | \$1,300,000.00      |
|                 |                     |

| Subaward Type      | Contract: Purchase Order |
|--------------------|--------------------------|
| Subrecipient Name  | United Way of Delaware   |
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$433,000.00             |

| Project Name       | OGOV LTG Women of Exception |
|--------------------|-----------------------------|
| Subaward ID        | SUB-0790489                 |
| Subaward No        | 21589-658470                |
| Subaward Amount    | \$80,000.00                 |
| Subaward Type      | Contract: Purchase Order    |
| Subrecipient Name  | WOMEN OF EXCEPTION          |
| Expenditure Start  | 7/1/2023                    |
| Expenditure End    | 9/30/2023                   |
| Expenditure Amount | \$60,000.00                 |

# Expenditure: EN-01799684

| Project Name       | OGOV Milford Housing             |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0790490                      |
| Subaward No        | 21590-25743                      |
| Subaward Amount    | \$1,900,000.00                   |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | MILFORD HOUSING DEVELOPMENT CORP |
| Expenditure Start  | 9/1/2023                         |
| Expenditure End    | 9/30/2023                        |
| Expenditure Amount | \$650,000.00                     |

| Project Name      | OGOV DANA Healthcare                           |
|-------------------|--|
| Subaward ID       | SUB-0790491                                    |
| Subaward No       | 21636-16716                                    |
| Subaward Amount   | \$1,101,150.00                                 |
| Subaward Type     | Contract: Purchase Order                       |
| Subrecipient Name | DELAWARE ALLIANCE FOR NONPROFIT<br>ADVANCEMENT |
| Expenditure Start | 7/1/2023                                       |
| Expenditure End   | 9/30/2023                                      |

| Expenditure Amount | \$1,101,150.00 |
|--------------------|----------------|
|                    |                |

| Project Name       | OGOV Perinatal Prana Extension |
|--------------------|--------------------------------|
| Subaward ID        | SUB-0790212                    |
| Subaward No        | 21685-645838                   |
| Subaward Amount    | \$751,367.00                   |
| Subaward Type      | Contract: Purchase Order       |
| Subrecipient Name  | Perinatal Prana                |
| Expenditure Start  | 7/1/2023                       |
| Expenditure End    | 9/30/2023                      |
| Expenditure Amount | \$205,000.00                   |

#### Expenditure: EN-01784359

| Project Name       | OGOV Ministry of Caring  |
|--------------------|--------------------------|
| Subaward ID        | SUB-0790493              |
| Subaward No        | 21686-00027              |
| Subaward Amount    | \$500,000.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | MINISTRY OF CARING INC   |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$125,000.00             |

# Expenditure: EN-01791533

| Project Name       | OGOV LTG The HOPE Commission |
|--------------------|------------------------------|
| Subaward ID        | SUB-0790508                  |
| Subaward No        | 21690-46066                  |
| Subaward Amount    | \$100,000.00                 |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | Wilmington Hope Commission   |
| Expenditure Start  | 7/1/2023                     |
| Expenditure End    | 9/30/2023                    |
| Expenditure Amount | \$27,500.00                  |

#### Expenditure: EN-01791536

Project Name

| Subaward ID        | SUB-0790499                              |
|--------------------|--|
| Subaward No        | 21691-138447                             |
| Subaward Amount    | \$96,525.00                              |
| Subaward Type      | Contract: Purchase Order                 |
| Subrecipient Name  | FAMILY COUNSELING CENTER OF ST PAULS INC |
| Expenditure Start  | 7/1/2023                                 |
| Expenditure End    | 9/30/2023                                |
| Expenditure Amount | \$18,810.00                              |

| Project Name       | OGOV LTG Shepherd Place  |
|--------------------|--------------------------|
| Subaward ID        | SUB-0790494              |
| Subaward No        | 21790-00059              |
| Subaward Amount    | \$100,000.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | SHEPHERD PLACE INC       |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$25,000.00              |

## Expenditure: EN-01916729

| Project Name       | OGOV LTG New Life Recovery       |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0790495                      |
| Subaward No        | 21807-702169                     |
| Subaward Amount    | \$100,000.00                     |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | NEW LIFE FOUNDATION RECOVERY INC |
| Expenditure Start  | 10/1/2023                        |
| Expenditure End    | 12/31/2023                       |
| Expenditure Amount | \$58,760.00                      |

| Project Name    | OGOV MH JFS Extension    |
|-----------------|--------------------------|
| Subaward ID     | SUB-0790498              |
| Subaward No     | 21841-24576              |
| Subaward Amount | \$340,000.00             |
| Subaward Type   | Contract: Purchase Order |
|                 |                          |

| Subrecipient Name  | Jewish Family Services |
|--------------------|------------------------|
| Expenditure Start  | 10/1/2023              |
| Expenditure End    | 12/31/2023             |
| Expenditure Amount | \$170,000.00           |

| Project Name       | OGOV LTG West End Neighborhood |
|--------------------|--------------------------------|
| Subaward ID        | SUB-0790496                    |
| Subaward No        | 21858-45108                    |
| Subaward Amount    | \$75,000.00                    |
| Subaward Type      | Contract: Purchase Order       |
| Subrecipient Name  | WEST END NEIGHBORHOOD HOUSE    |
| Expenditure Start  | 10/1/2023                      |
| Expenditure End    | 12/31/2023                     |
| Expenditure Amount | \$50,000.00                    |

## Expenditure: EN-01791541

| Project Name       | OGOV LTG Brandywine Counseling              |
|--------------------|---|
| Subaward ID        | SUB-0790497                                 |
| Subaward No        | 21402-26041                                 |
| Subaward Amount    | \$65,000.00                                 |
| Subaward Type      | Contract: Purchase Order                    |
| Subrecipient Name  | Brandywine Counseling and Community Service |
| Expenditure Start  | 7/1/2023                                    |
| Expenditure End    | 9/30/2023                                   |
| Expenditure Amount | \$65,000.00                                 |

| Project Name       | OGOV MH Unlocke The Light |
|--------------------|---------------------------|
| Subaward ID        | SUB-0838669               |
| Subaward No        | 21945-691496              |
| Subaward Amount    | \$100,000.00              |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | SEAN LOCKE 24 FOUNDATION  |
| Expenditure Start  | 10/1/2023                 |
| Expenditure End    | 12/31/2023                |
| Expenditure Amount | \$50,000.00               |

| Project Name       | OGOV MH Nemours          |
|--------------------|--------------------------|
| Subaward ID        | SUB-0838665              |
| Subaward No        | 22048-32777              |
| Subaward Amount    | \$2,563,182.83           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | The Nemours Foundation   |
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$2,563,182.83           |

## Expenditure: EN-01929930

| Project Name       | OGOV MH Christiana Care             |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0838664                         |
| Subaward No        | 22054-24672                         |
| Subaward Amount    | \$535,000.00                        |
| Subaward Type      | Contract: Purchase Order            |
| Subrecipient Name  | Christiana Care Health Services Inc |
| Expenditure Start  | 10/1/2023                           |
| Expenditure End    | 12/31/2023                          |
| Expenditure Amount | \$267,500.00                        |

#### Expenditure: EN-01929920

| Project Name       | OGOV Central Baptist CDC                    |
|--------------------|---|
| Subaward ID        | SUB-0838663                                 |
| Subaward No        | 22091-207967                                |
| Subaward Amount    | \$625,000.00                                |
| Subaward Type      | Contract: Purchase Order                    |
| Subrecipient Name  | CENTRAL BAPTIST COMMUNITY DEVELOPMENT<br>CO |
| Expenditure Start  | 10/1/2023                                   |
| Expenditure End    | 12/31/2023                                  |
| Expenditure Amount | \$375,000.00                                |

| Project Name | OGOV LTG La Central |
|--------------|---------------------|
| Subaward ID  | SUB-0838655         |

| Subaward No        | 22229-661123             |
|--------------------|--------------------------|
| Subaward Amount    | \$50,000.00              |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | LATINA MARKETING LLC     |
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$50,000.00              |

| Project Name       | OGOV LTG CORAS                         |
|--------------------|--|
| Subaward ID        | SUB-0838650                            |
| Subaward No        | 22272-602015                           |
| Subaward Amount    | \$100,000.00                           |
| Subaward Type      | Contract: Purchase Order               |
| Subrecipient Name  | CORAS WELLNESS AND BEHAVIOR HEALTH LLC |
| Expenditure Start  | 10/1/2023                              |
| Expenditure End    | 12/31/2023                             |
| Expenditure Amount | \$50,000.00                            |

# Expenditure: EN-01929896

| Project Name       | OGOV Help Initiative Ext |
|--------------------|--------------------------|
| Subaward ID        | SUB-0838646              |
| Subaward No        | 22282-494103             |
| Subaward Amount    | \$2,000,000.00           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | HELP Initiative, Inc.    |
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$675,000.00             |

| OGOV Tech Impact           |
|----------------------------|
| SUB-0221360                |
| 18841                      |
| \$3,000,000.00             |
| Grant: Lump Sum Payment(s) |
| Tech Impact                |
|                            |

| Expenditure Start  | 10/1/2022    |
|--------------------|--------------|
| Expenditure End    | 12/31/2022   |
| Expenditure Amount | \$168,673.84 |

| Project Name       | OGOV Tech Impact           |
|--------------------|----------------------------|
| Subaward ID        | SUB-0221360                |
| Subaward No        | 18841                      |
| Subaward Amount    | \$3,000,000.00             |
| Subaward Type      | Grant: Lump Sum Payment(s) |
| Subrecipient Name  | Tech Impact                |
| Expenditure Start  | 1/1/2023                   |
| Expenditure End    | 3/31/2023                  |
| Expenditure Amount | \$500,227.75               |

#### Expenditure: EN-01780609

| Project Name       | OGOV Tech Impact           |
|--------------------|----------------------------|
| Subaward ID        | SUB-0221360                |
| Subaward No        | 18841                      |
| Subaward Amount    | \$3,000,000.00             |
| Subaward Type      | Grant: Lump Sum Payment(s) |
| Subrecipient Name  | Tech Impact                |
| Expenditure Start  | 7/1/2023                   |
| Expenditure End    | 9/30/2023                  |
| Expenditure Amount | \$1,000,000.00             |

## Expenditure: EN-00613055

| Project Name       | OGOV Tech Impact           |
|--------------------|----------------------------|
| Subaward ID        | SUB-0221360                |
| Subaward No        | 18841                      |
| Subaward Amount    | \$3,000,000.00             |
| Subaward Type      | Grant: Lump Sum Payment(s) |
| Subrecipient Name  | Tech Impact                |
| Expenditure Start  | 7/1/2022                   |
| Expenditure End    | 9/30/2022                  |
| Expenditure Amount | \$194,965.70               |

| Project Name       | OGOV Tech Impact           |
|--------------------|----------------------------|
| Subaward ID        | SUB-0221360                |
| Subaward No        | 18841                      |
| Subaward Amount    | \$3,000,000.00             |
| Subaward Type      | Grant: Lump Sum Payment(s) |
| Subrecipient Name  | Tech Impact                |
| Expenditure Start  | 2/24/2022                  |
| Expenditure End    | 2/24/2022                  |
| Expenditure Amount | \$51,827.25                |

| Project Name       | OGOV Tech Impact           |
|--------------------|----------------------------|
| Subaward ID        | SUB-0221360                |
| Subaward No        | 18841                      |
| Subaward Amount    | \$3,000,000.00             |
| Subaward Type      | Grant: Lump Sum Payment(s) |
| Subrecipient Name  | Tech Impact                |
| Expenditure Start  | 4/1/2022                   |
| Expenditure End    | 6/30/2022                  |
| Expenditure Amount | \$84,305.46                |

## Expenditure: EN-00278341

| Project Name       | OGOV First State Squash    |
|--------------------|----------------------------|
| Subaward ID        | SUB-0184016                |
| Subaward No        | 18597                      |
| Subaward Amount    | \$1,250,000.00             |
| Subaward Type      | Grant: Lump Sum Payment(s) |
| Subrecipient Name  | First State Squash         |
| Expenditure Start  | 1/5/2022                   |
| Expenditure End    | 1/5/2022                   |
| Expenditure Amount | \$1,250,000.00             |

| Project Name | OGOV Dover Interfaith Mission for Housing |
|--------------|---|
| Subaward ID  | SUB-0187967                               |
| Subaward No  | 18636                                     |
|              |   |

| Subaward Amount    | \$589,990.00                               |
|--------------------|--|
| Subaward Type      | Grant: Lump Sum Payment(s)                 |
| Subrecipient Name  | Dover Interfaith Mission for Housing, Inc. |
| Expenditure Start  | 1/10/2022                                  |
| Expenditure End    | 1/10/2022                                  |
| Expenditure Amount | \$581,990.00                               |

| Project Name       | OGOV Dover Interfaith Mission for Housing  |
|--------------------|--|
| Subaward ID        | SUB-0187967                                |
| Subaward No        | 18636                                      |
| Subaward Amount    | \$589,990.00                               |
| Subaward Type      | Grant: Lump Sum Payment(s)                 |
| Subrecipient Name  | Dover Interfaith Mission for Housing, Inc. |
| Expenditure Start  | 1/10/2022                                  |
| Expenditure End    | 1/10/2022                                  |
| Expenditure Amount | \$8,000.00                                 |

## Expenditure: EN-00797479

| Project Name       | OMB HVAC Upgrades CSOB 7th Floor |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0349943                      |
| Subaward No        | 18804-26169                      |
| Subaward Amount    | \$1,863,147.65                   |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | DelDeo Builders                  |
| Expenditure Start  | 10/1/2022                        |
| Expenditure End    | 12/31/2022                       |
| Expenditure Amount | \$181,900.01                     |

| Project Name      | OMB HVAC Upgrades CSOB 7th Floor |
|-------------------|----------------------------------|
| Subaward ID       | SUB-0349946                      |
| Subaward No       | 18804-29660                      |
| Subaward Amount   | \$164,942.92                     |
| Subaward Type     | Contract: Purchase Order         |
| Subrecipient Name | Johnson, Mirmiran & Thomspson    |
| Expenditure Start | 10/1/2022                        |
|                   |                                  |

| Expenditure End    | 12/31/2022  |
|--------------------|-------------|
| Expenditure Amount | \$27,082.02 |

| Project Name       | OMB HVAC Upgrades CSOB 7th Floor |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0349943                      |
| Subaward No        | 18804-26169                      |
| Subaward Amount    | \$1,863,147.65                   |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | DelDeo Builders                  |
| Expenditure Start  | 1/1/2023                         |
| Expenditure End    | 3/31/2023                        |
| Expenditure Amount | \$541,828.23                     |

#### Expenditure: EN-01231266

| Project Name       | OMB HVAC Upgrades CSOB 7th Floor |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0349946                      |
| Subaward No        | 18804-29660                      |
| Subaward Amount    | \$164,942.92                     |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | Johnson, Mirmiran & Thomspson    |
| Expenditure Start  | 1/1/2023                         |
| Expenditure End    | 3/31/2023                        |
| Expenditure Amount | \$6,212.85                       |

#### Expenditure: EN-01646741

| Project Name       | OMB HVAC Upgrades CSOB 7th Floor |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0349943                      |
| Subaward No        | 18804-26169                      |
| Subaward Amount    | \$1,863,147.65                   |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | DelDeo Builders                  |
| Expenditure Start  | 4/1/2023                         |
| Expenditure End    | 6/30/2023                        |
| Expenditure Amount | \$387,061.20                     |

| Project Name       | OMB HVAC Upgrades CSOB 7th Floor |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0349946                      |
| Subaward No        | 18804-29660                      |
| Subaward Amount    | \$164,942.92                     |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | Johnson, Mirmiran & Thomspson    |
| Expenditure Start  | 4/1/2023                         |
| Expenditure End    | 6/30/2023                        |
| Expenditure Amount | \$8,129.29                       |

| Project Name       | OMB HVAC Upgrades CSOB 7th Floor |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0349943                      |
| Subaward No        | 18804-26169                      |
| Subaward Amount    | \$1,863,147.65                   |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | DelDeo Builders                  |
| Expenditure Start  | 7/1/2023                         |
| Expenditure End    | 9/30/2023                        |
| Expenditure Amount | \$567,702.51                     |

## Expenditure: EN-01803765

| Project Name       | OMB HVAC Upgrades CSOB 7th Floor |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0349946                      |
| Subaward No        | 18804-29660                      |
| Subaward Amount    | \$164,942.92                     |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | Johnson, Mirmiran & Thomspson    |
| Expenditure Start  | 7/1/2023                         |
| Expenditure End    | 9/30/2023                        |
| Expenditure Amount | \$12,591.97                      |

| Project Name    | OMB HVAC Upgrades CSOB 7th Floor |
|-----------------|----------------------------------|
| Subaward ID     | SUB-0349946                      |
| Subaward No     | 18804-29660                      |
| Subaward Amount | \$164,942.92                     |
|                 |                                  |

| Subaward Type      | Contract: Purchase Order      |
|--------------------|-------------------------------|
| Subrecipient Name  | Johnson, Mirmiran & Thomspson |
| Expenditure Start  | 10/1/2023                     |
| Expenditure End    | 12/31/2023                    |
| Expenditure Amount | \$3,358.35                    |

| Project Name       | OMB HVAC Upgrades CSOB 7th Floor |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0349943                      |
| Subaward No        | 18804-26169                      |
| Subaward Amount    | \$1,863,147.65                   |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | DelDeo Builders                  |
| Expenditure Start  | 10/1/2023                        |
| Expenditure End    | 12/31/2023                       |
| Expenditure Amount | \$27,429.50                      |

# Expenditure: EN-00629211

| roject Name  | OMB HVAC Upgrades CSOB 7th Floor                                     |
|--|--|
| abaward ID   | SUB-0349946  |
| ibaward No   | 18804-29660  |
| abaward Amount   | \$164,942.92   |
| abaward Type   | Contract: Purchase Order   |
| ibrecipient Name                                       | Johnson, Mirmiran & Thomspson  |
| xpenditure Start                                       | 7/1/2022   |
| xpenditure End   | 9/30/2022  |
| xpenditure Amount                                      | \$6,443.84   |
| ubrecipient Name<br>xpenditure Start<br>xpenditure End | Johnson, Mirmiran & Thomspson           7/1/2022           9/30/2022 |

| Project Name      | OMB HVAC Upgrades CSOB 8th Floor |
|-------------------|----------------------------------|
| Subaward ID       | SUB-0194131                      |
| Subaward No       | 18805-25525                      |
| Subaward Amount   | \$1,501,822.14                   |
| Subaward Type     | Contract: Purchase Order         |
| Subrecipient Name | Bancroft Construction Co.        |
| Expenditure Start | 1/1/2023                         |
| Expenditure End   | 3/31/2023                        |
|                   |                                  |

| Project Name       | OMB HVAC Upgrades CSOB 8th Floor |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0194132                      |
| Subaward No        | 18805-29660                      |
| Subaward Amount    | \$145,485.56                     |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | Johnson, Mirmiran & Thomspson    |
| Expenditure Start  | 1/1/2023                         |
| Expenditure End    | 3/31/2023                        |
| Expenditure Amount | \$41,719.81                      |

#### Expenditure: EN-01646746

| Project Name       | OMB HVAC Upgrades CSOB 8th Floor |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0194131                      |
| Subaward No        | 18805-25525                      |
| Subaward Amount    | \$1,501,822.14                   |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | Bancroft Construction Co.        |
| Expenditure Start  | 4/1/2023                         |
| Expenditure End    | 6/30/2023                        |
| Expenditure Amount | \$284,476.05                     |

#### Expenditure: EN-01646750

| Project Name       | OMB HVAC Upgrades CSOB 8th Floor |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0194132                      |
| Subaward No        | 18805-29660                      |
| Subaward Amount    | \$145,485.56                     |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | Johnson, Mirmiran & Thomspson    |
| Expenditure Start  | 4/1/2023                         |
| Expenditure End    | 6/30/2023                        |
| Expenditure Amount | \$13,785.83                      |

| Project Name | OMB HVAC Upgrades CSOB 8th Floor |
|--------------|----------------------------------|
|--------------|----------------------------------|

| Subaward ID        | SUB-0194131               |
|--------------------|---------------------------|
| Subaward No        | 18805-25525               |
| Subaward Amount    | \$1,501,822.14            |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | Bancroft Construction Co. |
| Expenditure Start  | 7/1/2023                  |
| Expenditure End    | 9/30/2023                 |
| Expenditure Amount | \$226,900.33              |

| Project Name       | OMB HVAC Upgrades CSOB 8th Floor |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0194132                      |
| Subaward No        | 18805-29660                      |
| Subaward Amount    | \$145,485.56                     |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | Johnson, Mirmiran & Thomspson    |
| Expenditure Start  | 7/1/2023                         |
| Expenditure End    | 9/30/2023                        |
| Expenditure Amount | \$14,780.40                      |

## Expenditure: EN-01920558

| Project Name       | OMB HVAC Upgrades CSOB 8th Floor |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0194132                      |
| Subaward No        | 18805-29660                      |
| Subaward Amount    | \$145,485.56                     |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | Johnson, Mirmiran & Thomspson    |
| Expenditure Start  | 10/1/2023                        |
| Expenditure End    | 12/31/2023                       |
| Expenditure Amount | \$15,822.12                      |

| Project Name    | OMB HVAC Upgrades CSOB 8th Floor |
|-----------------|----------------------------------|
| Subaward ID     | SUB-0194131                      |
| Subaward No     | 18805-25525                      |
| Subaward Amount | \$1,501,822.14                   |
| Subaward Type   | Contract: Purchase Order         |
|                 |                                  |

| Subrecipient Name  | Bancroft Construction Co. |
|--------------------|---------------------------|
| Expenditure Start  | 10/1/2023                 |
| Expenditure End    | 12/31/2023                |
| Expenditure Amount | \$212,700.05              |

| Project Name       | OMB HVAC Upgrades CSOB 8th Floor |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0194131                      |
| Subaward No        | 18805-25525                      |
| Subaward Amount    | \$1,501,822.14                   |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | Bancroft Construction Co.        |
| Expenditure Start  | 7/1/2022                         |
| Expenditure End    | 9/30/2022                        |
| Expenditure Amount | \$66,999.63                      |

## Expenditure: EN-00300891

| Project Name       | OMB HVAC Upgrades CSOB 8th Floor |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0194131                      |
| Subaward No        | 18805-25525                      |
| Subaward Amount    | \$1,501,822.14                   |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | Bancroft Construction Co.        |
| Expenditure Start  | 3/15/2022                        |
| Expenditure End    | 3/15/2022                        |
| Expenditure Amount | \$35,268.75                      |

| Project Name       | OMB HVAC Upgrades CSOB 8th Floor |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0194132                      |
| Subaward No        | 18805-29660                      |
| Subaward Amount    | \$145,485.56                     |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | Johnson, Mirmiran & Thomspson    |
| Expenditure Start  | 4/1/2022                         |
| Expenditure End    | 6/30/2022                        |
| Expenditure Amount | \$12,128.67                      |

| Project Name       | OMB HVAC Upgrades CSOB 11th Floor |
|--------------------|-----------------------------------|
| Subaward ID        | SUB-0447753                       |
| Subaward No        | 18806-29660                       |
| Subaward Amount    | \$77,227.82                       |
| Subaward Type      | Contract: Purchase Order          |
| Subrecipient Name  | Johnson, Mirmiran & Thomspson     |
| Expenditure Start  | 10/1/2022                         |
| Expenditure End    | 12/31/2022                        |
| Expenditure Amount | \$1,544.56                        |

## Expenditure: EN-01231273

| Project Name       | OMB HVAC Upgrades CSOB 11th Floor |
|--------------------|-----------------------------------|
| Subaward ID        | SUB-0447753                       |
| Subaward No        | 18806-29660                       |
| Subaward Amount    | \$77,227.82                       |
| Subaward Type      | Contract: Purchase Order          |
| Subrecipient Name  | Johnson, Mirmiran & Thomspson     |
| Expenditure Start  | 1/1/2023                          |
| Expenditure End    | 3/31/2023                         |
| Expenditure Amount | \$772.27                          |

#### Expenditure: EN-01646754

| Project Name       | OMB HVAC Upgrades CSOB 11th Floor |
|--------------------|-----------------------------------|
| Subaward ID        | SUB-0447752                       |
| Subaward No        | 18806-26169                       |
| Subaward Amount    | \$2,122,772.18                    |
| Subaward Type      | Contract: Purchase Order          |
| Subrecipient Name  | DelDeo Builders                   |
| Expenditure Start  | 4/1/2023                          |
| Expenditure End    | 6/30/2023                         |
| Expenditure Amount | \$245,037.99                      |

| Project Name | OMB HVAC Upgrades CSOB 11th Floor |
|--------------|-----------------------------------|
| Subaward ID  | SUB-0447753                       |
|              |                                   |

| Subaward No        | 18806-29660                   |
|--------------------|-------------------------------|
| Subaward Amount    | \$77,227.82                   |
| Subaward Type      | Contract: Purchase Order      |
| Subrecipient Name  | Johnson, Mirmiran & Thomspson |
| Expenditure Start  | 7/1/2023                      |
| Expenditure End    | 9/30/2023                     |
| Expenditure Amount | \$1,544.56                    |

| Project Name       | OMB HVAC Upgrades CSOB 11th Floor |
|--------------------|-----------------------------------|
| Subaward ID        | SUB-0447753                       |
| Subaward No        | 18806-29660                       |
| Subaward Amount    | \$77,227.82                       |
| Subaward Type      | Contract: Purchase Order          |
| Subrecipient Name  | Johnson, Mirmiran & Thomspson     |
| Expenditure Start  | 10/1/2023                         |
| Expenditure End    | 12/31/2023                        |
| Expenditure Amount | \$3,861.39                        |

# Expenditure: EN-01920567

| Project Name       | OMB HVAC Upgrades CSOB 11th Floor |
|--------------------|-----------------------------------|
| Subaward ID        | SUB-0447752                       |
| Subaward No        | 18806-26169                       |
| Subaward Amount    | \$2,122,772.18                    |
| Subaward Type      | Contract: Purchase Order          |
| Subrecipient Name  | DelDeo Builders                   |
| Expenditure Start  | 10/1/2023                         |
| Expenditure End    | 12/31/2023                        |
| Expenditure Amount | \$283,447.47                      |

| Project Name      | OMB HVAC Upgrades Jesse Cooper Building |
|-------------------|---|
| Subaward ID       | SUB-0193500                             |
| Subaward No       | 18807-151568                            |
| Subaward Amount   | \$243,000.00                            |
| Subaward Type     | Contract: Purchase Order                |
| Subrecipient Name | DEDC LLC                                |
|                   |   |

| Expenditure Start  | 10/1/2022   |
|--------------------|-------------|
| Expenditure End    | 12/31/2022  |
| Expenditure Amount | \$78,385.79 |

| Project Name       | OMB HVAC Upgrades Jesse Cooper Building |
|--------------------|---|
| Subaward ID        | SUB-0193500                             |
| Subaward No        | 18807-151568                            |
| Subaward Amount    | \$243,000.00                            |
| Subaward Type      | Contract: Purchase Order                |
| Subrecipient Name  | DEDC LLC                                |
| Expenditure Start  | 1/1/2023                                |
| Expenditure End    | 3/31/2023                               |
| Expenditure Amount | \$14,882.64                             |

#### Expenditure: EN-01646848

| Project Name       | OMB HVAC Upgrades Jesse Cooper Building |
|--------------------|---|
| Subaward ID        | SUB-0193500                             |
| Subaward No        | 18807-151568                            |
| Subaward Amount    | \$243,000.00                            |
| Subaward Type      | Contract: Purchase Order                |
| Subrecipient Name  | DEDC LLC                                |
| Expenditure Start  | 4/1/2023                                |
| Expenditure End    | 6/30/2023                               |
| Expenditure Amount | \$50,827.50                             |

## Expenditure: EN-00629191

| Project Name       | OMB HVAC Upgrades Jesse Cooper Building |
|--------------------|---|
| Subaward ID        | SUB-0193500                             |
| Subaward No        | 18807-151568                            |
| Subaward Amount    | \$243,000.00                            |
| Subaward Type      | Contract: Purchase Order                |
| Subrecipient Name  | DEDC LLC                                |
| Expenditure Start  | 7/1/2022                                |
| Expenditure End    | 9/30/2022                               |
| Expenditure Amount | \$37,163.62                             |

| Project Name       | OMB HVAC Upgrades Jesse Cooper Building |
|--------------------|---|
| Subaward ID        | SUB-0193500                             |
| Subaward No        | 18807-151568                            |
| Subaward Amount    | \$243,000.00                            |
| Subaward Type      | Contract: Purchase Order                |
| Subrecipient Name  | DEDC LLC                                |
| Expenditure Start  | 4/1/2022                                |
| Expenditure End    | 6/30/2022                               |
| Expenditure Amount | \$12,993.14                             |

| Project Name       | DOC Ventilation Chillers Northern Region |
|--------------------|--|
| Subaward ID        | SUB-0221359                              |
| Subaward No        | 18808-25395                              |
| Subaward Amount    | \$114,278.00                             |
| Subaward Type      | Contract: Purchase Order                 |
| Subrecipient Name  | Jaed Corp                                |
| Expenditure Start  | 10/1/2022                                |
| Expenditure End    | 12/31/2022                               |
| Expenditure Amount | \$5,713.90                               |

## Expenditure: EN-01783588

| Project Name       | DOC Ventilation Chillers Northern Region |
|--------------------|--|
| Subaward ID        | SUB-0221359                              |
| Subaward No        | 18808-25395                              |
| Subaward Amount    | \$114,278.00                             |
| Subaward Type      | Contract: Purchase Order                 |
| Subrecipient Name  | Jaed Corp                                |
| Expenditure Start  | 7/1/2023                                 |
| Expenditure End    | 9/30/2023                                |
| Expenditure Amount | \$5,713.90                               |

| Project Name | DOC Ventilation Chillers Northern Region |
|--------------|--|
| Subaward ID  | SUB-0743534                              |
| Subaward No  | 18808-24493                              |
|              |  |

| Subaward Amount    | \$993,722.00             |
|--------------------|--------------------------|
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | SCHLOSSER & ASSOCIATES   |
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$685,121.28             |

| Project Name       | DOC Ventilation Chillers Northern Region |
|--------------------|--|
| Subaward ID        | SUB-0221359                              |
| Subaward No        | 18808-25395                              |
| Subaward Amount    | \$114,278.00                             |
| Subaward Type      | Contract: Purchase Order                 |
| Subrecipient Name  | Jaed Corp                                |
| Expenditure Start  | 7/26/2022                                |
| Expenditure End    | 8/11/2022                                |
| Expenditure Amount | \$41,140.08                              |

#### Expenditure: EN-00332076

| Project Name       | DOC Ventilation Chillers Northern Region |
|--------------------|--|
| Subaward ID        | SUB-0221359                              |
| Subaward No        | 18808-25395                              |
| Subaward Amount    | \$114,278.00                             |
| Subaward Type      | Contract: Purchase Order                 |
| Subrecipient Name  | Jaed Corp                                |
| Expenditure Start  | 3/10/2022                                |
| Expenditure End    | 3/10/2022                                |
| Expenditure Amount | \$857.09                                 |

| Project Name      | DOC Ventilation Chillers Northern Region |
|-------------------|--|
| Subaward ID       | SUB-0221359                              |
| Subaward No       | 18808-25395                              |
| Subaward Amount   | \$114,278.00                             |
| Subaward Type     | Contract: Purchase Order                 |
| Subrecipient Name | Jaed Corp                                |
| Expenditure Start | 4/1/2022                                 |
|                   |  |

| Expenditure End    | 6/30/2022   |
|--------------------|-------------|
| Expenditure Amount | \$43,711.33 |

| Project Name       | DOC Ventilation Chillers Central Region |
|--------------------|---|
| Subaward ID        | SUB-0193496                             |
| Subaward No        | 18809-35559                             |
| Subaward Amount    | \$149,844.00                            |
| Subaward Type      | Contract: Purchase Order                |
| Subrecipient Name  | Tetra Tech Inc                          |
| Expenditure Start  | 10/1/2022                               |
| Expenditure End    | 12/31/2022                              |
| Expenditure Amount | \$7,137.20                              |

#### Expenditure: EN-01602689

| Project Name       | DOC Ventilation Chillers Central Region |
|--------------------|---|
| Subaward ID        | SUB-0193496                             |
| Subaward No        | 18809-35559                             |
| Subaward Amount    | \$149,844.00                            |
| Subaward Type      | Contract: Purchase Order                |
| Subrecipient Name  | Tetra Tech Inc                          |
| Expenditure Start  | 4/1/2023                                |
| Expenditure End    | 6/30/2023                               |
| Expenditure Amount | \$5,932.79                              |

#### Expenditure: EN-01783591

| Project Name       | DOC Ventilation Chillers Central Region |
|--------------------|---|
| Subaward ID        | SUB-0193496                             |
| Subaward No        | 18809-35559                             |
| Subaward Amount    | \$149,844.00                            |
| Subaward Type      | Contract: Purchase Order                |
| Subrecipient Name  | Tetra Tech Inc                          |
| Expenditure Start  | 7/1/2023                                |
| Expenditure End    | 9/30/2023                               |
| Expenditure Amount | \$13,379.60                             |

| Project Name       | DOC Ventilation Chillers Central Region |
|--------------------|---|
| Subaward ID        | SUB-0193496                             |
| Subaward No        | 18809-35559                             |
| Subaward Amount    | \$149,844.00                            |
| Subaward Type      | Contract: Purchase Order                |
| Subrecipient Name  | Tetra Tech Inc                          |
| Expenditure Start  | 7/11/2022                               |
| Expenditure End    | 8/4/2022                                |
| Expenditure Amount | \$21,417.18                             |

| Project Name       | DOC Ventilation Chillers Central Region |
|--------------------|---|
| Subaward ID        | SUB-0193496                             |
| Subaward No        | 18809-35559                             |
| Subaward Amount    | \$149,844.00                            |
| Subaward Type      | Contract: Purchase Order                |
| Subrecipient Name  | Tetra Tech Inc                          |
| Expenditure Start  | 3/8/2022                                |
| Expenditure End    | 3/8/2022                                |
| Expenditure Amount | \$21,411.60                             |

# Expenditure: EN-00449492

| Project Name       | DOC Ventilation Chillers Central Region |
|--------------------|---|
| Subaward ID        | SUB-0193496                             |
| Subaward No        | 18809-35559                             |
| Subaward Amount    | \$149,844.00                            |
| Subaward Type      | Contract: Purchase Order                |
| Subrecipient Name  | Tetra Tech Inc                          |
| Expenditure Start  | 4/1/2022                                |
| Expenditure End    | 6/3/2022                                |
| Expenditure Amount | \$57,585.08                             |

| Project Name    | DOC Ventilation Chillers Southern Region |
|-----------------|--|
| Subaward ID     | SUB-0193497                              |
| Subaward No     | 18810-20765                              |
| Subaward Amount | \$114,278.00                             |
|                 |  |

| Subaward Type      | Contract: Purchase Order |
|--------------------|--------------------------|
| Subrecipient Name  | Fayda Engineering        |
| Expenditure Start  | 10/1/2022                |
| Expenditure End    | 12/31/2022               |
| Expenditure Amount | \$3,771.18               |

| Project Name       | DOC Ventilation Chillers Southern Region |
|--------------------|--|
| Subaward ID        | SUB-0193497                              |
| Subaward No        | 18810-20765                              |
| Subaward Amount    | \$114,278.00                             |
| Subaward Type      | Contract: Purchase Order                 |
| Subrecipient Name  | Fayda Engineering                        |
| Expenditure Start  | 1/1/2023                                 |
| Expenditure End    | 3/31/2023                                |
| Expenditure Amount | \$7,246.50                               |

## Expenditure: EN-01783599

| Project Name       | DOC Ventilation Chillers Southern Region |
|--------------------|--|
| Subaward ID        | SUB-0193497                              |
| Subaward No        | 18810-20765                              |
| Subaward Amount    | \$114,278.00                             |
| Subaward Type      | Contract: Purchase Order                 |
| Subrecipient Name  | Fayda Engineering                        |
| Expenditure Start  | 7/1/2023                                 |
| Expenditure End    | 9/30/2023                                |
| Expenditure Amount | \$17,551.81                              |

| Project Name      | DOC Ventilation Chillers Southern Region |
|-------------------|--|
| Subaward ID       | SUB-0720323                              |
| Subaward No       | 1810-31036                               |
| Subaward Amount   | \$993,722.00                             |
| Subaward Type     | Contract: Purchase Order                 |
| Subrecipient Name | JOSEPH T RICHARDSON INC                  |
| Expenditure Start | 7/1/2023                                 |
| Expenditure End   | 9/30/2023                                |
|                   |  |

| Project Name       | DOC Ventilation Chillers Southern Region |
|--------------------|--|
| Subaward ID        | SUB-0720323                              |
| Subaward No        | 1810-31036                               |
| Subaward Amount    | \$993,722.00                             |
| Subaward Type      | Contract: Purchase Order                 |
| Subrecipient Name  | JOSEPH T RICHARDSON INC                  |
| Expenditure Start  | 10/1/2023                                |
| Expenditure End    | 12/31/2023                               |
| Expenditure Amount | \$345,325.00                             |

#### Expenditure: EN-00630229

| Project Name       | DOC Ventilation Chillers Southern Region |
|--------------------|--|
| Subaward ID        | SUB-0193497                              |
| Subaward No        | 18810-20765                              |
| Subaward Amount    | \$114,278.00                             |
| Subaward Type      | Contract: Purchase Order                 |
| Subrecipient Name  | Fayda Engineering                        |
| Expenditure Start  | 7/6/2022                                 |
| Expenditure End    | 8/29/2022                                |
| Expenditure Amount | \$26,798.20                              |

#### Expenditure: EN-00322710

| Project Name       | DOC Ventilation Chillers Southern Region |
|--------------------|--|
| Subaward ID        | SUB-0193497                              |
| Subaward No        | 18810-20765                              |
| Subaward Amount    | \$114,278.00                             |
| Subaward Type      | Contract: Purchase Order                 |
| Subrecipient Name  | Fayda Engineering                        |
| Expenditure Start  | 3/1/2022                                 |
| Expenditure End    | 3/1/2022                                 |
| Expenditure Amount | \$11,427.80                              |

| Project Name | DOC Ventilation Chillers Southern Region |
|--------------|--|
| 5            | 6  |

| Subaward ID        | SUB-0193497              |
|--------------------|--------------------------|
| Subaward No        | 18810-20765              |
| Subaward Amount    | \$114,278.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | Fayda Engineering        |
| Expenditure Start  | 4/1/2022                 |
| Expenditure End    | 6/30/2022                |
| Expenditure Amount | \$47,482.51              |

| Project Name       | DTCC Child Care Center                |
|--------------------|---------------------------------------|
| Subaward ID        | SUB-0366528                           |
| Subaward No        | 18656-25833                           |
| Subaward Amount    | \$394,748.64                          |
| Subaward Type      | Contract: Purchase Order              |
| Subrecipient Name  | BUCK SIMPERS ARCHITECT AND ASSOCIATES |
| Expenditure Start  | 10/1/2022                             |
| Expenditure End    | 12/31/2022                            |
| Expenditure Amount | \$42,800.00                           |

## Expenditure: EN-00793100

| Project Name       | DTCC Child Care Center   |
|--------------------|--------------------------|
| Subaward ID        | SUB-0366530              |
| Subaward No        | 18656-26428              |
| Subaward Amount    | \$177,215.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | LANDMARK ENGINEERING INC |
| Expenditure Start  | 10/1/2022                |
| Expenditure End    | 12/31/2022               |
| Expenditure Amount | \$23,916.50              |

| Project Name    | DTCC Child Care Center   |
|-----------------|--------------------------|
| Subaward ID     | SUB-0366528              |
| Subaward No     | 18656-25833              |
| Subaward Amount | \$394,748.64             |
| Subaward Type   | Contract: Purchase Order |
|                 |                          |

| Subrecipient Name  | BUCK SIMPERS ARCHITECT AND ASSOCIATES |
|--------------------|---------------------------------------|
| Expenditure Start  | 1/1/2023                              |
| Expenditure End    | 3/31/2023                             |
| Expenditure Amount | \$98,589.00                           |

| Project Name       | DTCC Child Care Center   |
|--------------------|--------------------------|
| Subaward ID        | SUB-0366530              |
| Subaward No        | 18656-26428              |
| Subaward Amount    | \$177,215.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | LANDMARK ENGINEERING INC |
| Expenditure Start  | 1/1/2023                 |
| Expenditure End    | 3/31/2023                |
| Expenditure Amount | \$2,052.01               |

## Expenditure: EN-01637264

| Project Name       | DTCC Child Care Center                |
|--------------------|---------------------------------------|
| Subaward ID        | SUB-0366528                           |
| Subaward No        | 18656-25833                           |
| Subaward Amount    | \$394,748.64                          |
| Subaward Type      | Contract: Purchase Order              |
| Subrecipient Name  | BUCK SIMPERS ARCHITECT AND ASSOCIATES |
| Expenditure Start  | 4/1/2023                              |
| Expenditure End    | 6/30/2023                             |
| Expenditure Amount | \$72,937.11                           |

| Project Name       | DTCC Child Care Center   |
|--------------------|--------------------------|
| Subaward ID        | SUB-0366530              |
| Subaward No        | 18656-26428              |
| Subaward Amount    | \$177,215.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | LANDMARK ENGINEERING INC |
| Expenditure Start  | 4/1/2023                 |
| Expenditure End    | 6/30/2023                |
| Expenditure Amount | \$2,790.00               |

| Project Name       | DTCC Child Care Center   |
|--------------------|--------------------------|
| Subaward ID        | SUB-0366530              |
| Subaward No        | 18656-26428              |
| Subaward Amount    | \$177,215.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | LANDMARK ENGINEERING INC |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$3,956.00               |

## Expenditure: EN-01776673

| Project Name       | DTCC Child Care Center                |
|--------------------|---------------------------------------|
| Subaward ID        | SUB-0366528                           |
| Subaward No        | 18656-25833                           |
| Subaward Amount    | \$394,748.64                          |
| Subaward Type      | Contract: Purchase Order              |
| Subrecipient Name  | BUCK SIMPERS ARCHITECT AND ASSOCIATES |
| Expenditure Start  | 7/1/2023                              |
| Expenditure End    | 9/30/2023                             |
| Expenditure Amount | \$11,837.89                           |

#### Expenditure: EN-01776677

| Project Name       | DTCC Child Care Center   |
|--------------------|--------------------------|
| Subaward ID        | SUB-0734315              |
| Subaward No        | 18656-24635              |
| Subaward Amount    | \$5,409,840.85           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | VENTRESCA BROS INC       |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$173,858.55             |

| Project Name | DTCC Child Care Center |
|--------------|------------------------|
| Subaward ID  | SUB-0366530            |
|              |                        |

| Subaward No        | 18656-26428              |
|--------------------|--------------------------|
| Subaward Amount    | \$177,215.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | LANDMARK ENGINEERING INC |
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$11,447.39              |

| Project Name       | DTCC Child Care Center                |
|--------------------|---------------------------------------|
| Subaward ID        | SUB-0366528                           |
| Subaward No        | 18656-25833                           |
| Subaward Amount    | \$394,748.64                          |
| Subaward Type      | Contract: Purchase Order              |
| Subrecipient Name  | BUCK SIMPERS ARCHITECT AND ASSOCIATES |
| Expenditure Start  | 10/1/2023                             |
| Expenditure End    | 12/31/2023                            |
| Expenditure Amount | \$16,200.00                           |

## Expenditure: EN-01920746

| Project Name       | DTCC Child Care Center   |
|--------------------|--------------------------|
| Subaward ID        | SUB-0734315              |
| Subaward No        | 18656-24635              |
| Subaward Amount    | \$5,409,840.85           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | VENTRESCA BROS INC       |
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$175,432.70             |

| Project Name      | DTCC Child Care Center                |
|-------------------|---------------------------------------|
| Subaward ID       | SUB-0366528                           |
| Subaward No       | 18656-25833                           |
| Subaward Amount   | \$394,748.64                          |
| Subaward Type     | Contract: Purchase Order              |
| Subrecipient Name | BUCK SIMPERS ARCHITECT AND ASSOCIATES |
|                   |                                       |

| Expenditure Start  | 7/6/2022    |
|--------------------|-------------|
| Expenditure End    | 9/11/2022   |
| Expenditure Amount | \$97,905.00 |

| Project Name       | DTCC Child Care Center   |
|--------------------|--------------------------|
| Subaward ID        | SUB-0366530              |
| Subaward No        | 18656-26428              |
| Subaward Amount    | \$177,215.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | LANDMARK ENGINEERING INC |
| Expenditure Start  | 7/19/2022                |
| Expenditure End    | 9/11/2022                |
| Expenditure Amount | \$25,811.75              |

#### Expenditure: EN-00461005

| Project Name       | DTCC Child Care Center   |
|--------------------|--------------------------|
| Subaward ID        | SUB-0366530              |
| Subaward No        | 18656-26428              |
| Subaward Amount    | \$177,215.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | LANDMARK ENGINEERING INC |
| Expenditure Start  | 4/1/2022                 |
| Expenditure End    | 6/30/2022                |
| Expenditure Amount | \$4,269.75               |

## Expenditure: EN-00447167

| Project Name       | DTCC CNAs                     |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0345863                   |
| Subaward No        | 18658-9004040000              |
| Subaward Amount    | \$75,255.00                   |
| Subaward Type      | Transfer: Lump Sum Payment(s) |
| Subrecipient Name  | DTCC WILMINGTON CAMPUS        |
| Expenditure Start  | 4/1/2022                      |
| Expenditure End    | 6/30/2022                     |
| Expenditure Amount | \$75,255.00                   |

| Project Name       | DTCC CNAs                     |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0345866                   |
| Subaward No        | 18658-9004050000              |
| Subaward Amount    | \$62,280.00                   |
| Subaward Type      | Transfer: Lump Sum Payment(s) |
| Subrecipient Name  | DTCC STANTON CAMPUS           |
| Expenditure Start  | 3/1/2022                      |
| Expenditure End    | 6/30/2022                     |
| Expenditure Amount | \$62,280.00                   |

| Project Name       | DTCC CNAs                     |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0345871                   |
| Subaward No        | 18658-9004060000              |
| Subaward Amount    | \$57,090.00                   |
| Subaward Type      | Transfer: Lump Sum Payment(s) |
| Subrecipient Name  | DTCC TERRY CAMPUS             |
| Expenditure Start  | 3/1/2022                      |
| Expenditure End    | 6/30/2022                     |
| Expenditure Amount | \$57,090.00                   |

## Expenditure: EN-00793136

| Project Name       | DTCC Allied Health Center |
|--------------------|---------------------------|
| Subaward ID        | SUB-0454407               |
| Subaward No        | 18659-25644               |
| Subaward Amount    | \$1,956,922.00            |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | EDIS COMPANY              |
| Expenditure Start  | 10/1/2022                 |
| Expenditure End    | 12/31/2022                |
| Expenditure Amount | \$63,411.24               |

| Project Name | DTCC Allied Health Center |
|--------------|---------------------------|
| Subaward ID  | SUB-0448992               |
| Subaward No  | 18659-26461               |
|              |                           |

| Subaward Amount    | \$1,209,643.50           |
|--------------------|--------------------------|
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | TEVEBAUGH ASSO           |
| Expenditure Start  | 10/1/2022                |
| Expenditure End    | 12/31/2022               |
| Expenditure Amount | \$349,569.76             |

| Project Name       | DTCC Allied Health Center |
|--------------------|---------------------------|
| Subaward ID        | SUB-0454407               |
| Subaward No        | 18659-25644               |
| Subaward Amount    | \$1,956,922.00            |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | EDIS COMPANY              |
| Expenditure Start  | 1/1/2023                  |
| Expenditure End    | 3/31/2023                 |
| Expenditure Amount | \$44,548.63               |

### Expenditure: EN-01171534

| Project Name       | DTCC Allied Health Center |
|--------------------|---------------------------|
| Subaward ID        | SUB-0448992               |
| Subaward No        | 18659-26461               |
| Subaward Amount    | \$1,209,643.50            |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | TEVEBAUGH ASSO            |
| Expenditure Start  | 1/1/2023                  |
| Expenditure End    | 3/31/2023                 |
| Expenditure Amount | \$474,714.94              |

| Project Name      | DTCC Allied Health Center |
|-------------------|---------------------------|
| Subaward ID       | SUB-0454407               |
| Subaward No       | 18659-25644               |
| Subaward Amount   | \$1,956,922.00            |
| Subaward Type     | Contract: Purchase Order  |
| Subrecipient Name | EDIS COMPANY              |
| Expenditure Start | 4/1/2023                  |
|                   |                           |

| Expenditure End    | 6/30/2023    |
|--------------------|--------------|
| Expenditure Amount | \$259,833.10 |

| Project Name       | DTCC Allied Health Center |
|--------------------|---------------------------|
| Subaward ID        | SUB-0448992               |
| Subaward No        | 18659-26461               |
| Subaward Amount    | \$1,209,643.50            |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | TEVEBAUGH ASSO            |
| Expenditure Start  | 4/1/2023                  |
| Expenditure End    | 6/30/2023                 |
| Expenditure Amount | \$40,763.24               |

### Expenditure: EN-01645989

| Project Name       | DTCC Allied Health Center   |
|--------------------|-----------------------------|
| Subaward ID        | SUB-0740933                 |
| Subaward No        | 18659-28401                 |
| Subaward Amount    | \$813,353.00                |
| Subaward Type      | Contract: Purchase Order    |
| Subrecipient Name  | BRANDYWINE CONTRACTORS INC. |
| Expenditure Start  | 4/1/2023                    |
| Expenditure End    | 6/30/2023                   |
| Expenditure Amount | \$34,200.00                 |

### Expenditure: EN-01645991

| Project Name       | DTCC Allied Health Center |
|--------------------|---------------------------|
| Subaward ID        | SUB-0740936               |
| Subaward No        | 18659-24878               |
| Subaward Amount    | \$1,368,500.00            |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | P&C Roofing               |
| Expenditure Start  | 4/1/2023                  |
| Expenditure End    | 6/30/2023                 |
| Expenditure Amount | \$57,000.00               |

| Project Name       | DTCC Allied Health Center |
|--------------------|---------------------------|
| Subaward ID        | SUB-0740931               |
| Subaward No        | 18659-26820               |
| Subaward Amount    | \$297,300.00              |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | MODERN CONTROLS           |
| Expenditure Start  | 7/1/2023                  |
| Expenditure End    | 9/30/2023                 |
| Expenditure Amount | \$5,186.52                |

| Project Name       | DTCC Allied Health Center    |
|--------------------|------------------------------|
| Subaward ID        | SUB-0740928                  |
| Subaward No        | 18659-563560                 |
| Subaward Amount    | \$536,300.00                 |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | STEEL SUPPLIERS ERECTORS INC |
| Expenditure Start  | 7/1/2023                     |
| Expenditure End    | 9/30/2023                    |
| Expenditure Amount | \$9,880.00                   |

## Expenditure: EN-01776928

| Project Name       | DTCC Allied Health Center              |
|--------------------|--|
| Subaward ID        | SUB-0785246                            |
| Subaward No        | 18659/28556                            |
| Subaward Amount    | \$782,867.00                           |
| Subaward Type      | Contract: Purchase Order               |
| Subrecipient Name  | MID-ATLANTIC DISMANTLEMENT CORPORATION |
| Expenditure Start  | 7/1/2023                               |
| Expenditure End    | 9/30/2023                              |
| Expenditure Amount | \$505,428.50                           |

| Project Name    | DTCC Allied Health Center |
|-----------------|---------------------------|
| Subaward ID     | SUB-0740924               |
| Subaward No     | 18659-28982               |
| Subaward Amount | \$972,146.80              |
|                 |                           |

| Subaward Type      | Contract: Purchase Order   |
|--------------------|----------------------------|
| Subrecipient Name  | NORTH EAST CONTRACTORS INC |
| Expenditure Start  | 7/1/2023                   |
| Expenditure End    | 9/30/2023                  |
| Expenditure Amount | \$72,295.00                |

| Project Name       | DTCC Allied Health Center   |
|--------------------|-----------------------------|
| Subaward ID        | SUB-0740933                 |
| Subaward No        | 18659-28401                 |
| Subaward Amount    | \$813,353.00                |
| Subaward Type      | Contract: Purchase Order    |
| Subrecipient Name  | BRANDYWINE CONTRACTORS INC. |
| Expenditure Start  | 7/1/2023                    |
| Expenditure End    | 9/30/2023                   |
| Expenditure Amount | \$8,766.60                  |

## Expenditure: EN-01776944

| Project Name       | DTCC Allied Health Center |
|--------------------|---------------------------|
| Subaward ID        | SUB-0740938               |
| Subaward No        | 18659-26146               |
| Subaward Amount    | \$1,402,222.00            |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | SUPERIOR ELECTRIC SVC CO  |
| Expenditure Start  | 7/1/2023                  |
| Expenditure End    | 9/30/2023                 |
| Expenditure Amount | \$404,646.56              |

| Project Name      | DTCC Allied Health Center |
|-------------------|---------------------------|
| Subaward ID       | SUB-0448992               |
| Subaward No       | 18659-26461               |
| Subaward Amount   | \$1,209,643.50            |
| Subaward Type     | Contract: Purchase Order  |
| Subrecipient Name | TEVEBAUGH ASSO            |
| Expenditure Start | 7/1/2023                  |
| Expenditure End   | 9/30/2023                 |
| <br>I             |                           |

| Project Name       | DTCC Allied Health Center |
|--------------------|---------------------------|
| Subaward ID        | SUB-0454407               |
| Subaward No        | 18659-25644               |
| Subaward Amount    | \$1,956,922.00            |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | EDIS COMPANY              |
| Expenditure Start  | 7/1/2023                  |
| Expenditure End    | 9/30/2023                 |
| Expenditure Amount | \$85,221.78               |

### Expenditure: EN-01776970

| Project Name       | DTCC Allied Health Center |
|--------------------|---------------------------|
| Subaward ID        | SUB-0740930               |
| Subaward No        | 18659-13740               |
| Subaward Amount    | \$4,040,000.00            |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | GAUDELLI BROTHERS INC     |
| Expenditure Start  | 7/1/2023                  |
| Expenditure End    | 9/30/2023                 |
| Expenditure Amount | \$204,535.00              |

### Expenditure: EN-01776972

| Project Name       | DTCC Allied Health Center |
|--------------------|---------------------------|
| Subaward ID        | SUB-0785240               |
| Subaward No        | 18659-26475               |
| Subaward Amount    | \$53,941.71               |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | SYNERFAC INC              |
| Expenditure Start  | 7/1/2023                  |
| Expenditure End    | 9/1/2023                  |
| Expenditure Amount | \$42,219.16               |

| Project Name | DTCC Allied Health Center |
|--------------|---------------------------|
|              |                           |

| Subaward ID        | SUB-0785243                    |
|--------------------|--------------------------------|
| Subaward No        | 18659-456                      |
| Subaward Amount    | \$176,924.91                   |
| Subaward Type      | Contract: Purchase Order       |
| Subrecipient Name  | ARUGIE ENTERPRISES CORPORATION |
| Expenditure Start  | 7/1/2023                       |
| Expenditure End    | 9/30/2023                      |
| Expenditure Amount | \$4,926.30                     |

| Project Name       | DTCC Allied Health Center   |
|--------------------|-----------------------------|
| Subaward ID        | SUB-0740933                 |
| Subaward No        | 18659-28401                 |
| Subaward Amount    | \$813,353.00                |
| Subaward Type      | Contract: Purchase Order    |
| Subrecipient Name  | BRANDYWINE CONTRACTORS INC. |
| Expenditure Start  | 10/1/2023                   |
| Expenditure End    | 12/31/2023                  |
| Expenditure Amount | \$78,474.75                 |

## Expenditure: EN-01920756

| Project Name       | DTCC Allied Health Center |
|--------------------|---------------------------|
| Subaward ID        | SUB-0740916               |
| Subaward No        | 18659-28899               |
| Subaward Amount    | \$339,439.00              |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | FLOORING SOLUTIONS INC    |
| Expenditure Start  | 10/1/2023                 |
| Expenditure End    | 12/31/2023                |
| Expenditure Amount | \$123,490.50              |

| Project Name    | DTCC Allied Health Center |
|-----------------|---------------------------|
| Subaward ID     | SUB-0740930               |
| Subaward No     | 18659-13740               |
| Subaward Amount | \$4,040,000.00            |
| Subaward Type   | Contract: Purchase Order  |
|                 |                           |

| Subrecipient Name  | GAUDELLI BROTHERS INC |
|--------------------|-----------------------|
| Expenditure Start  | 10/1/2023             |
| Expenditure End    | 12/31/2023            |
| Expenditure Amount | \$505,333.50          |

| Project Name       | DTCC Allied Health Center |
|--------------------|---------------------------|
| Subaward ID        | SUB-0740931               |
| Subaward No        | 18659-26820               |
| Subaward Amount    | \$297,300.00              |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | MODERN CONTROLS           |
| Expenditure Start  | 10/1/2023                 |
| Expenditure End    | 12/31/2023                |
| Expenditure Amount | \$38,210.90               |

## Expenditure: EN-01920763

| Project Name       | DTCC Allied Health Center  |
|--------------------|----------------------------|
| Subaward ID        | SUB-0740924                |
| Subaward No        | 18659-28982                |
| Subaward Amount    | \$972,146.80               |
| Subaward Type      | Contract: Purchase Order   |
| Subrecipient Name  | NORTH EAST CONTRACTORS INC |
| Expenditure Start  | 10/1/2023                  |
| Expenditure End    | 12/31/2023                 |
| Expenditure Amount | \$159,600.00               |

| Project Name       | DTCC Allied Health Center |
|--------------------|---------------------------|
| Subaward ID        | SUB-0740926               |
| Subaward No        | 18659-310845              |
| Subaward Amount    | \$252,000.00              |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | OLD WORLD TILEWORKS INC   |
| Expenditure Start  | 10/1/2023                 |
| Expenditure End    | 12/31/2023                |
| Expenditure Amount | \$98,735.40               |

| Project Name       | DTCC Allied Health Center |
|--------------------|---------------------------|
| Subaward ID        | SUB-0740938               |
| Subaward No        | 18659-26146               |
| Subaward Amount    | \$1,402,222.00            |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | SUPERIOR ELECTRIC SVC CO  |
| Expenditure Start  | 10/1/2023                 |
| Expenditure End    | 12/31/2023                |
| Expenditure Amount | \$220,826.91              |

## Expenditure: EN-01920772

| Project Name       | DTCC Allied Health Center      |
|--------------------|--------------------------------|
| Subaward ID        | SUB-0785243                    |
| Subaward No        | 18659-456                      |
| Subaward Amount    | \$176,924.91                   |
| Subaward Type      | Contract: Purchase Order       |
| Subrecipient Name  | ARUGIE ENTERPRISES CORPORATION |
| Expenditure Start  | 10/1/2023                      |
| Expenditure End    | 12/31/2023                     |
| Expenditure Amount | \$103,199.17                   |

### Expenditure: EN-01920774

| Project Name       | DTCC Allied Health Center |
|--------------------|---------------------------|
| Subaward ID        | SUB-0454407               |
| Subaward No        | 18659-25644               |
| Subaward Amount    | \$1,956,922.00            |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | EDIS COMPANY              |
| Expenditure Start  | 10/1/2023                 |
| Expenditure End    | 12/31/2023                |
| Expenditure Amount | \$344,044.71              |

| Project Name | DTCC Allied Health Center |
|--------------|---------------------------|
| Subaward ID  | SUB-0785240               |
|              |                           |

| Subaward No        | 18659-26475              |
|--------------------|--------------------------|
| Subaward Amount    | \$53,941.71              |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | SYNERFAC INC             |
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$3,212.88               |

| Project Name       | DTCC Allied Health Center |
|--------------------|---------------------------|
| Subaward ID        | SUB-0448992               |
| Subaward No        | 18659-26461               |
| Subaward Amount    | \$1,209,643.50            |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | TEVEBAUGH ASSO            |
| Expenditure Start  | 10/1/2023                 |
| Expenditure End    | 12/31/2023                |
| Expenditure Amount | \$23,812.50               |

# Expenditure: EN-00648762

| Project Name       | DTCC Allied Health Center |
|--------------------|---------------------------|
| Subaward ID        | SUB-0448992               |
| Subaward No        | 18659-26461               |
| Subaward Amount    | \$1,209,643.50            |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | TEVEBAUGH ASSO            |
| Expenditure Start  | 8/22/2022                 |
| Expenditure End    | 9/30/2022                 |
| Expenditure Amount | \$135,012.30              |

| Project Name      | DTCC HVAC Upgrades       |
|-------------------|--------------------------|
| Subaward ID       | SUB-0366707              |
| Subaward No       | 18660-29838              |
| Subaward Amount   | \$564,560.00             |
| Subaward Type     | Contract: Purchase Order |
| Subrecipient Name | GIPE ASSOC INC           |
|                   |                          |

| Expenditure Start  | 10/1/2022    |
|--------------------|--------------|
| Expenditure End    | 12/31/2022   |
| Expenditure Amount | \$274,218.75 |

| Project Name       | DTCC HVAC Upgrades       |
|--------------------|--------------------------|
| Subaward ID        | SUB-0448879              |
| Subaward No        | 18660-26461              |
| Subaward Amount    | \$0.00                   |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | TEVEBAUGH ASSO           |
| Expenditure Start  | 10/1/2022                |
| Expenditure End    | 12/31/2022               |
| Expenditure Amount | (\$30,844.00)            |

#### Expenditure: EN-01171635

| Project Name       | DTCC HVAC Upgrades       |
|--------------------|--------------------------|
| Subaward ID        | SUB-0366707              |
| Subaward No        | 18660-29838              |
| Subaward Amount    | \$564,560.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | GIPE ASSOC INC           |
| Expenditure Start  | 1/1/2023                 |
| Expenditure End    | 3/31/2023                |
| Expenditure Amount | \$72,471.25              |

## Expenditure: EN-01646052

| Project Name       | DTCC HVAC Upgrades       |
|--------------------|--------------------------|
| Subaward ID        | SUB-0366707              |
| Subaward No        | 18660-29838              |
| Subaward Amount    | \$564,560.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | GIPE ASSOC INC           |
| Expenditure Start  | 4/1/2023                 |
| Expenditure End    | 6/30/2023                |
| Expenditure Amount | \$10,968.75              |

| Project Name       | DTCC HVAC Upgrades       |
|--------------------|--------------------------|
| Subaward ID        | SUB-0366707              |
| Subaward No        | 18660-29838              |
| Subaward Amount    | \$564,560.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | GIPE ASSOC INC           |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$10,968.75              |

| Project Name       | DTCC HVAC Upgrades       |
|--------------------|--------------------------|
| Subaward ID        | SUB-0604013              |
| Subaward No        | 18660-13740              |
| Subaward Amount    | \$4,713,944.22           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | GAUDELLI BROTHERS INC    |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/1/2023                 |
| Expenditure Amount | \$368,362.50             |

## Expenditure: EN-01920781

| Project Name       | DTCC HVAC Upgrades       |
|--------------------|--------------------------|
| Subaward ID        | SUB-0366707              |
| Subaward No        | 18660-29838              |
| Subaward Amount    | \$564,560.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | GIPE ASSOC INC           |
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$29,250.00              |

| Project Name | DTCC HVAC Upgrades |
|--------------|--------------------|
| Subaward ID  | SUB-0604013        |
| Subaward No  | 18660-13740        |
|              |                    |

| Subaward Amount    | \$4,713,944.22           |
|--------------------|--------------------------|
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | GAUDELLI BROTHERS INC    |
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$1,365,387.50           |

| Project Name       | DTCC HVAC Upgrades       |
|--------------------|--------------------------|
| Subaward ID        | SUB-0366707              |
| Subaward No        | 18660-29838              |
| Subaward Amount    | \$564,560.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | GIPE ASSOC INC           |
| Expenditure Start  | 7/12/2022                |
| Expenditure End    | 8/8/2022                 |
| Expenditure Amount | \$142,685.00             |

## Expenditure: EN-00634100

| Project Name       | DTCC HVAC Upgrades       |
|--------------------|--------------------------|
| Subaward ID        | SUB-0448879              |
| Subaward No        | 18660-26461              |
| Subaward Amount    | \$0.00                   |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | TEVEBAUGH ASSO           |
| Expenditure Start  | 8/22/2022                |
| Expenditure End    | 8/22/2022                |
| Expenditure Amount | \$30,844.00              |

| Project Name      | DTCC Culinary Program                 |
|-------------------|---------------------------------------|
| Subaward ID       | SUB-0448869                           |
| Subaward No       | 18657-25833                           |
| Subaward Amount   | \$675,531.77                          |
| Subaward Type     | Contract: Purchase Order              |
| Subrecipient Name | BUCK SIMPERS ARCHITECT AND ASSOCIATES |
| Expenditure Start | 10/1/2022                             |
|                   |                                       |

| Expenditure End    | 12/31/2022  |
|--------------------|-------------|
| Expenditure Amount | \$95,345.00 |

| Project Name       | DTCC Culinary Program    |
|--------------------|--------------------------|
| Subaward ID        | SUB-0366538              |
| Subaward No        | 18657-26428              |
| Subaward Amount    | \$82,629.58              |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | LANDMARK ENGINEERING INC |
| Expenditure Start  | 10/1/2022                |
| Expenditure End    | 12/31/2022               |
| Expenditure Amount | \$11,310.67              |

### Expenditure: EN-01171366

| Project Name       | DTCC Culinary Program                 |
|--------------------|---------------------------------------|
| Subaward ID        | SUB-0448869                           |
| Subaward No        | 18657-25833                           |
| Subaward Amount    | \$675,531.77                          |
| Subaward Type      | Contract: Purchase Order              |
| Subrecipient Name  | BUCK SIMPERS ARCHITECT AND ASSOCIATES |
| Expenditure Start  | 1/1/2023                              |
| Expenditure End    | 3/31/2023                             |
| Expenditure Amount | \$52,640.00                           |

## Expenditure: EN-01171367

| Project Name       | DTCC Culinary Program    |
|--------------------|--------------------------|
| Subaward ID        | SUB-0366538              |
| Subaward No        | 18657-26428              |
| Subaward Amount    | \$82,629.58              |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | LANDMARK ENGINEERING INC |
| Expenditure Start  | 1/1/2023                 |
| Expenditure End    | 3/31/2023                |
| Expenditure Amount | \$35,593.60              |

| Project Name       | DTCC Culinary Program    |
|--------------------|--------------------------|
| Subaward ID        | SUB-0366538              |
| Subaward No        | 18657-26428              |
| Subaward Amount    | \$82,629.58              |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | LANDMARK ENGINEERING INC |
| Expenditure Start  | 4/1/2023                 |
| Expenditure End    | 6/30/2023                |
| Expenditure Amount | \$1,975.00               |

| Project Name       | DTCC Culinary Program                 |
|--------------------|---------------------------------------|
| Subaward ID        | SUB-0448869                           |
| Subaward No        | 18657-25833                           |
| Subaward Amount    | \$675,531.77                          |
| Subaward Type      | Contract: Purchase Order              |
| Subrecipient Name  | BUCK SIMPERS ARCHITECT AND ASSOCIATES |
| Expenditure Start  | 4/1/2023                              |
| Expenditure End    | 6/30/2023                             |
| Expenditure Amount | \$210,524.05                          |

## Expenditure: EN-01776700

| Project Name       | DTCC Culinary Program        |
|--------------------|------------------------------|
| Subaward ID        | SUB-0516658                  |
| Subaward No        | 18657-17673                  |
| Subaward Amount    | \$52,500.00                  |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | WOHLSEN CONSTRUCTION COMPANY |
| Expenditure Start  | 7/1/2023                     |
| Expenditure End    | 9/30/2023                    |
| Expenditure Amount | \$52,500.00                  |

| Project Name    | DTCC Culinary Program |
|-----------------|-----------------------|
| Subaward ID     | SUB-0366538           |
| Subaward No     | 18657-26428           |
| Subaward Amount | \$82,629.58           |
|                 |                       |

| Subaward Type      | Contract: Purchase Order |
|--------------------|--------------------------|
| Subrecipient Name  | LANDMARK ENGINEERING INC |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$8,265.50               |

| Project Name       | DTCC Culinary Program                 |
|--------------------|---------------------------------------|
| Subaward ID        | SUB-0448869                           |
| Subaward No        | 18657-25833                           |
| Subaward Amount    | \$675,531.77                          |
| Subaward Type      | Contract: Purchase Order              |
| Subrecipient Name  | BUCK SIMPERS ARCHITECT AND ASSOCIATES |
| Expenditure Start  | 7/1/2023                              |
| Expenditure End    | 9/30/2023                             |
| Expenditure Amount | \$85,988.93                           |

## Expenditure: EN-01920748

| Project Name       | DTCC Culinary Program    |
|--------------------|--------------------------|
| Subaward ID        | SUB-0366538              |
| Subaward No        | 18657-26428              |
| Subaward Amount    | \$82,629.58              |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | LANDMARK ENGINEERING INC |
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$191.50                 |

| Project Name      | DTCC Culinary Program                 |
|-------------------|---------------------------------------|
| Subaward ID       | SUB-0448869                           |
| Subaward No       | 18657-25833                           |
| Subaward Amount   | \$675,531.77                          |
| Subaward Type     | Contract: Purchase Order              |
| Subrecipient Name | BUCK SIMPERS ARCHITECT AND ASSOCIATES |
| Expenditure Start | 10/1/2023                             |
| Expenditure End   | 12/31/2023                            |
|                   |                                       |

| Project Name       | DTCC Culinary Program                 |
|--------------------|---------------------------------------|
| Subaward ID        | SUB-0448869                           |
| Subaward No        | 18657-25833                           |
| Subaward Amount    | \$675,531.77                          |
| Subaward Type      | Contract: Purchase Order              |
| Subrecipient Name  | BUCK SIMPERS ARCHITECT AND ASSOCIATES |
| Expenditure Start  | 8/12/2022                             |
| Expenditure End    | 8/12/2022                             |
| Expenditure Amount | \$104,210.00                          |

### Expenditure: EN-00634120

| Project Name       | DTCC Culinary Program    |
|--------------------|--------------------------|
| Subaward ID        | SUB-0366538              |
| Subaward No        | 18657-26428              |
| Subaward Amount    | \$82,629.58              |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | LANDMARK ENGINEERING INC |
| Expenditure Start  | 8/9/2022                 |
| Expenditure End    | 9/11/2022                |
| Expenditure Amount | \$19,660.38              |

#### Expenditure: EN-00461123

| Project Name       | DTCC Culinary Program    |
|--------------------|--------------------------|
| Subaward ID        | SUB-0366538              |
| Subaward No        | 18657-26428              |
| Subaward Amount    | \$82,629.58              |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | LANDMARK ENGINEERING INC |
| Expenditure Start  | 6/26/2022                |
| Expenditure End    | 6/30/2022                |
| Expenditure Amount | \$5,632.93               |

| Project Name DSU Early Childhood Innovation |
|---|
|---|

| Subaward ID        | SUB-0509233              |
|--------------------|--------------------------|
| Subaward No        | 18395-25395              |
| Subaward Amount    | \$562,500.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | Jaed Corp                |
| Expenditure Start  | 11/17/2022               |
| Expenditure End    | 12/31/2022               |
| Expenditure Amount | \$56,250.00              |

| Project Name       | DSU Early Childhood Innovation |
|--------------------|--------------------------------|
| Subaward ID        | SUB-0509233                    |
| Subaward No        | 18395-25395                    |
| Subaward Amount    | \$562,500.00                   |
| Subaward Type      | Contract: Purchase Order       |
| Subrecipient Name  | Jaed Corp                      |
| Expenditure Start  | 1/1/2023                       |
| Expenditure End    | 3/31/2023                      |
| Expenditure Amount | \$84,375.00                    |

## Expenditure: EN-01601472

| Project Name       | DSU Early Childhood Innovation |
|--------------------|--------------------------------|
| Subaward ID        | SUB-0509233                    |
| Subaward No        | 18395-25395                    |
| Subaward Amount    | \$562,500.00                   |
| Subaward Type      | Contract: Purchase Order       |
| Subrecipient Name  | Jaed Corp                      |
| Expenditure Start  | 4/1/2023                       |
| Expenditure End    | 6/30/2023                      |
| Expenditure Amount | \$61,875.00                    |

| Project Name    | DSU Early Childhood Innovation |
|-----------------|--------------------------------|
| Subaward ID     | SUB-0837500                    |
| Subaward No     | 18395-644508                   |
| Subaward Amount | \$85,400.00                    |
| Subaward Type   | Contract: Purchase Order       |
|                 |                                |

| Subrecipient Name  | VERDANTAS LLC NATIONAL EC SERVICES INC DBA |
|--------------------|--|
| Expenditure Start  | 10/1/2023                                  |
| Expenditure End    | 12/31/2023                                 |
| Expenditure Amount | \$13,900.00                                |

| Project Name       | DSU Early Childhood Innovation |
|--------------------|--------------------------------|
| Subaward ID        | SUB-0509233                    |
| Subaward No        | 18395-25395                    |
| Subaward Amount    | \$562,500.00                   |
| Subaward Type      | Contract: Purchase Order       |
| Subrecipient Name  | Jaed Corp                      |
| Expenditure Start  | 10/1/2023                      |
| Expenditure End    | 12/31/2023                     |
| Expenditure Amount | \$247,500.00                   |

## Expenditure: EN-00783088

| Project Name       | DSU HVAC Upgrades        |
|--------------------|--------------------------|
| Subaward ID        | SUB-0454470              |
| Subaward No        | 18781-278591             |
| Subaward Amount    | \$397,703.63             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | A A DUCKETT              |
| Expenditure Start  | 10/1/2022                |
| Expenditure End    | 12/31/2022               |
| Expenditure Amount | \$39,649.21              |

| Project Name       | DSU HVAC Upgrades        |
|--------------------|--------------------------|
| Subaward ID        | SUB-0454475              |
| Subaward No        | 18781-26820              |
| Subaward Amount    | \$2,042,234.69           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | MODERN CONTROLS          |
| Expenditure Start  | 10/1/2022                |
| Expenditure End    | 12/31/2022               |
| Expenditure Amount | \$84,304.98              |

| Project Name       | DSU HVAC Upgrades        |
|--------------------|--------------------------|
| Subaward ID        | SUB-0516656              |
| Subaward No        | 18781-31036              |
| Subaward Amount    | \$2,198,000.00           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | JOSEPH T RICHARDSON INC  |
| Expenditure Start  | 10/17/2022               |
| Expenditure End    | 12/31/2022               |
| Expenditure Amount | \$209,950.00             |

## Expenditure: EN-01231319

| Project Name       | DSU HVAC Upgrades        |
|--------------------|--------------------------|
| Subaward ID        | SUB-0454472              |
| Subaward No        | 18781-2124               |
| Subaward Amount    | \$56,680.00              |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | SID HARVEY INDUSTRIES    |
| Expenditure Start  | 1/1/2023                 |
| Expenditure End    | 3/31/2023                |
| Expenditure Amount | \$56,680.00              |

### Expenditure: EN-01231317

| Project Name       | DSU HVAC Upgrades        |
|--------------------|--------------------------|
| Subaward ID        | SUB-0454470              |
| Subaward No        | 18781-278591             |
| Subaward Amount    | \$397,703.63             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | A A DUCKETT              |
| Expenditure Start  | 1/1/2023                 |
| Expenditure End    | 3/31/2023                |
| Expenditure Amount | \$45,177.90              |

| Project Name | DSU HVAC Upgrades |
|--------------|-------------------|
| Subaward ID  | SUB-0454475       |
|              |                   |

| Subaward No        | 18781-26820              |
|--------------------|--------------------------|
| Subaward Amount    | \$2,042,234.69           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | MODERN CONTROLS          |
| Expenditure Start  | 1/1/2023                 |
| Expenditure End    | 3/31/2023                |
| Expenditure Amount | \$529,295.83             |

| Project Name       | DSU HVAC Upgrades        |
|--------------------|--------------------------|
| Subaward ID        | SUB-0516656              |
| Subaward No        | 18781-31036              |
| Subaward Amount    | \$2,198,000.00           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | JOSEPH T RICHARDSON INC  |
| Expenditure Start  | 1/1/2023                 |
| Expenditure End    | 3/31/2023                |
| Expenditure Amount | \$1,041,200.00           |

## Expenditure: EN-01601831

| Project Name       | DSU HVAC Upgrades        |
|--------------------|--------------------------|
| Subaward ID        | SUB-0454470              |
| Subaward No        | 18781-278591             |
| Subaward Amount    | \$397,703.63             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | A A DUCKETT              |
| Expenditure Start  | 4/30/2023                |
| Expenditure End    | 6/30/2023                |
| Expenditure Amount | \$75,923.31              |

| Project Name      | DSU HVAC Upgrades        |
|-------------------|--------------------------|
| Subaward ID       | SUB-0454475              |
| Subaward No       | 18781-26820              |
| Subaward Amount   | \$2,042,234.69           |
| Subaward Type     | Contract: Purchase Order |
| Subrecipient Name | MODERN CONTROLS          |
|                   |                          |

| Expenditure Start  | 4/1/2023     |
|--------------------|--------------|
| Expenditure End    | 6/30/2023    |
| Expenditure Amount | \$138,002.10 |

| Project Name       | DSU HVAC Upgrades        |
|--------------------|--------------------------|
| Subaward ID        | SUB-0516656              |
| Subaward No        | 18781-31036              |
| Subaward Amount    | \$2,198,000.00           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | JOSEPH T RICHARDSON INC  |
| Expenditure Start  | 4/1/2023                 |
| Expenditure End    | 6/30/2023                |
| Expenditure Amount | \$765,700.00             |

### Expenditure: EN-01776497

| Project Name       | DSU HVAC Upgrades        |
|--------------------|--------------------------|
| Subaward ID        | SUB-0454470              |
| Subaward No        | 18781-278591             |
| Subaward Amount    | \$397,703.63             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | A A DUCKETT              |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$3,250.00               |

## Expenditure: EN-01776500

| Project Name       | DSU HVAC Upgrades        |
|--------------------|--------------------------|
| Subaward ID        | SUB-0454475              |
| Subaward No        | 18781-26820              |
| Subaward Amount    | \$2,042,234.69           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | MODERN CONTROLS          |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$117,267.84             |

| Project Name       | DSU HVAC Upgrades        |
|--------------------|--------------------------|
| Subaward ID        | SUB-0516656              |
| Subaward No        | 18781-31036              |
| Subaward Amount    | \$2,198,000.00           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | JOSEPH T RICHARDSON INC  |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$41,800.00              |

| Project Name       | DSU HVAC Upgrades          |
|--------------------|----------------------------|
| Subaward ID        | SUB-0785208                |
| Subaward No        | 18781-25612                |
| Subaward Amount    | \$57,852.57                |
| Subaward Type      | Contract: Purchase Order   |
| Subrecipient Name  | ADVANCED POWER CONTROL INC |
| Expenditure Start  | 7/1/2023                   |
| Expenditure End    | 9/30/2023                  |
| Expenditure Amount | \$23,808.57                |

## Expenditure: EN-01776503

| Project Name       | DSU HVAC Upgrades        |
|--------------------|--------------------------|
| Subaward ID        | SUB-0785209              |
| Subaward No        | 18781-22859              |
| Subaward Amount    | \$439,293.54             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | JOHNSON CONTROLS INC     |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$43,026.96              |

| Project Name | DSU HVAC Upgrades |
|--------------|-------------------|
| Subaward ID  | SUB-0454470       |
| Subaward No  | 18781-278591      |
|              |                   |

| Subaward Amount    | \$397,703.63             |
|--------------------|--------------------------|
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | A A DUCKETT              |
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$168,422.50             |

| Project Name       | DSU HVAC Upgrades        |
|--------------------|--------------------------|
| Subaward ID        | SUB-0454475              |
| Subaward No        | 18781-26820              |
| Subaward Amount    | \$2,042,234.69           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | MODERN CONTROLS          |
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$224,989.70             |

## Expenditure: EN-01922049

| Project Name       | DSU HVAC Upgrades        |
|--------------------|--------------------------|
| Subaward ID        | SUB-0785209              |
| Subaward No        | 18781-22859              |
| Subaward Amount    | \$439,293.54             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | JOHNSON CONTROLS INC     |
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$135,096.32             |

| Project Name      | DSU HVAC Upgrades        |
|-------------------|--------------------------|
| Subaward ID       | SUB-0454470              |
| Subaward No       | 18781-278591             |
| Subaward Amount   | \$397,703.63             |
| Subaward Type     | Contract: Purchase Order |
| Subrecipient Name | A A DUCKETT              |
| Expenditure Start | 9/1/2022                 |
|                   |                          |

| Expenditure End    | 9/30/2022   |
|--------------------|-------------|
| Expenditure Amount | \$59,204.21 |

| Project Name       | DSU HVAC Upgrades        |
|--------------------|--------------------------|
| Subaward ID        | SUB-0454475              |
| Subaward No        | 18781-26820              |
| Subaward Amount    | \$2,042,234.69           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | MODERN CONTROLS          |
| Expenditure Start  | 9/1/2022                 |
| Expenditure End    | 9/30/2022                |
| Expenditure Amount | \$41,995.65              |

### Expenditure: EN-01231505

| Project Name       | DSU Technology Upgrades  |
|--------------------|--------------------------|
| Subaward ID        | SUB-0454478              |
| Subaward No        | 18783-33778              |
| Subaward Amount    | \$408,558.10             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | DELL MARKETING LP        |
| Expenditure Start  | 1/1/2023                 |
| Expenditure End    | 3/31/2023                |
| Expenditure Amount | \$123,558.10             |

### Expenditure: EN-01231506

| Project Name       | DSU Technology Upgrades  |
|--------------------|--------------------------|
| Subaward ID        | SUB-0516653              |
| Subaward No        | 18783-20739              |
| Subaward Amount    | \$2,500,000.00           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | ASSURANCE MEDIA LLC      |
| Expenditure Start  | 1/1/2023                 |
| Expenditure End    | 3/31/2023                |
| Expenditure Amount | \$24,252.68              |

| Project Name       | DSU Technology Upgrades  |
|--------------------|--------------------------|
| Subaward ID        | SUB-0516652              |
| Subaward No        | 18783-358193             |
| Subaward Amount    | \$3,135,264.30           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | NETSTREAM TECHNOLOGY INC |
| Expenditure Start  | 1/1/2023                 |
| Expenditure End    | 3/31/2023                |
| Expenditure Amount | \$9,203.00               |

| Project Name       | DSU Technology Upgrades  |
|--------------------|--------------------------|
| Subaward ID        | SUB-0516653              |
| Subaward No        | 18783-20739              |
| Subaward Amount    | \$2,500,000.00           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | ASSURANCE MEDIA LLC      |
| Expenditure Start  | 4/1/2023                 |
| Expenditure End    | 6/30/2023                |
| Expenditure Amount | \$360,772.75             |

## Expenditure: EN-01601860

| Project Name       | DSU Technology Upgrades  |
|--------------------|--------------------------|
| Subaward ID        | SUB-0516652              |
| Subaward No        | 18783-358193             |
| Subaward Amount    | \$3,135,264.30           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | NETSTREAM TECHNOLOGY INC |
| Expenditure Start  | 4/1/2023                 |
| Expenditure End    | 6/30/2023                |
| Expenditure Amount | \$1,253,191.50           |

| Project Name    | DSU Technology Upgrades |
|-----------------|-------------------------|
| Subaward ID     | SUB-0621452             |
| Subaward No     | 18783-32833             |
| Subaward Amount | \$744,586.45            |
|                 |                         |

| Subaward Type      | Contract: Purchase Order |
|--------------------|--------------------------|
| Subrecipient Name  | AVI-SPL LLC              |
| Expenditure Start  | 4/1/2023                 |
| Expenditure End    | 6/30/2023                |
| Expenditure Amount | \$40,308.50              |

| Project Name       | DSU Technology Upgrades  |
|--------------------|--------------------------|
| Subaward ID        | SUB-0621465              |
| Subaward No        | 18783-22347              |
| Subaward Amount    | \$199,101.08             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | CDW GOVERNMENT LLC       |
| Expenditure Start  | 4/1/2023                 |
| Expenditure End    | 6/30/2023                |
| Expenditure Amount | \$199,101.08             |

# Expenditure: EN-01776614

| Project Name       | DSU Technology Upgrades  |
|--------------------|--------------------------|
| Subaward ID        | SUB-0743601              |
| Subaward No        | 18783-32193              |
| Subaward Amount    | \$150,000.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | R & R ELECTRIC INC       |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$13,088.00              |

| Project Name      | DSU Technology Upgrades  |
|-------------------|--------------------------|
| Subaward ID       | SUB-0743606              |
| Subaward No       | 18783-544518             |
| Subaward Amount   | \$149,975.00             |
| Subaward Type     | Contract: Purchase Order |
| Subrecipient Name | THE RESTORATION GUYS LLC |
| Expenditure Start | 7/1/2023                 |
| Expenditure End   | 9/30/2023                |
|                   |                          |

| Project Name       | DSU Technology Upgrades  |
|--------------------|--------------------------|
| Subaward ID        | SUB-0621452              |
| Subaward No        | 18783-32833              |
| Subaward Amount    | \$744,586.45             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | AVI-SPL LLC              |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$227,733.40             |

### Expenditure: EN-01776616

| Project Name       | DSU Technology Upgrades  |
|--------------------|--------------------------|
| Subaward ID        | SUB-0516653              |
| Subaward No        | 18783-20739              |
| Subaward Amount    | \$2,500,000.00           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | ASSURANCE MEDIA LLC      |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$108,371.59             |

#### Expenditure: EN-01922057

| Project Name       | DSU Technology Upgrades  |
|--------------------|--------------------------|
| Subaward ID        | SUB-0516653              |
| Subaward No        | 18783-20739              |
| Subaward Amount    | \$2,500,000.00           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | ASSURANCE MEDIA LLC      |
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$537,058.00             |

|  | Project Name | DSU Technology Upgrades |
|--|--------------|-------------------------|
|--|--------------|-------------------------|

| Subaward ID        | SUB-0743606              |
|--------------------|--------------------------|
| Subaward No        | 18783-544518             |
| Subaward Amount    | \$149,975.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | THE RESTORATION GUYS LLC |
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$38,423.95              |

| Project Name       | DSU Technology Upgrades  |
|--------------------|--------------------------|
| Subaward ID        | SUB-0743601              |
| Subaward No        | 18783-32193              |
| Subaward Amount    | \$150,000.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | R & R ELECTRIC INC       |
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$49,926.00              |

## Expenditure: EN-01922055

| Project Name       | DSU Technology Upgrades  |
|--------------------|--------------------------|
| Subaward ID        | SUB-0621452              |
| Subaward No        | 18783-32833              |
| Subaward Amount    | \$744,586.45             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | AVI-SPL LLC              |
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$79,915.86              |

| Project Name    | DSU Technology Upgrades  |
|-----------------|--------------------------|
| Subaward ID     | SUB-0516652              |
| Subaward No     | 18783-358193             |
| Subaward Amount | \$3,135,264.30           |
| Subaward Type   | Contract: Purchase Order |
|                 |                          |

| Subrecipient Name  | NETSTREAM TECHNOLOGY INC |
|--------------------|--------------------------|
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$1,872,869.80           |

| Project Name       | DSU Technology Upgrades  |
|--------------------|--------------------------|
| Subaward ID        | SUB-0454478              |
| Subaward No        | 18783-33778              |
| Subaward Amount    | \$408,558.10             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | DELL MARKETING LP        |
| Expenditure Start  | 9/1/2022                 |
| Expenditure End    | 9/30/2022                |
| Expenditure Amount | \$264,353.00             |

## Expenditure: EN-01770504

| Project Name       | DVCC Family Justice Center      |
|--------------------|---------------------------------|
| Subaward ID        | SUB-0782564                     |
| Subaward No        | 18720-593461                    |
| Subaward Amount    | \$50,783.64                     |
| Subaward Type      | Direct Payment                  |
| Subrecipient Name  | ALLIANCE FOR HOPE INTERNATIONAL |
| Expenditure Start  | 7/1/2023                        |
| Expenditure End    | 9/30/2023                       |
| Expenditure Amount | \$50,783.64                     |

| Project Name       | DTI Digital Government GIS |
|--------------------|----------------------------|
| Subaward ID        | SUB-0213474                |
| Subaward No        | 18780-2867                 |
| Subaward Amount    | \$265,225.88               |
| Subaward Type      | Contract: Purchase Order   |
| Subrecipient Name  | Sandborn Map               |
| Expenditure Start  | 10/1/2022                  |
| Expenditure End    | 12/31/2022                 |
| Expenditure Amount | \$13,261.29                |

| Project Name       | DTI Digital Government GIS |
|--------------------|----------------------------|
| Subaward ID        | SUB-0213474                |
| Subaward No        | 18780-2867                 |
| Subaward Amount    | \$265,225.88               |
| Subaward Type      | Contract: Purchase Order   |
| Subrecipient Name  | Sandborn Map               |
| Expenditure Start  | 4/1/2023                   |
| Expenditure End    | 6/30/2023                  |
| Expenditure Amount | \$79,567.77                |

## Expenditure: EN-01770633

| Project Name       | DTI Digital Government GIS |
|--------------------|----------------------------|
| Subaward ID        | SUB-0722373                |
| Subaward No        | 18780-9001020000           |
| Subaward Amount    | \$210,000.00               |
| Subaward Type      | Contract: Purchase Order   |
| Subrecipient Name  | DELAWARE GEOLOGICAL SURVEY |
| Expenditure Start  | 7/1/2023                   |
| Expenditure End    | 9/30/2023                  |
| Expenditure Amount | \$73,500.12                |

### Expenditure: EN-01916521

| Project Name       | DTI Digital Government GIS |
|--------------------|----------------------------|
| Subaward ID        | SUB-0722373                |
| Subaward No        | 18780-9001020000           |
| Subaward Amount    | \$210,000.00               |
| Subaward Type      | Contract: Purchase Order   |
| Subrecipient Name  | DELAWARE GEOLOGICAL SURVEY |
| Expenditure Start  | 10/1/2023                  |
| Expenditure End    | 12/31/2023                 |
| Expenditure Amount | \$30,702.11                |

| Project Name | DTI Digital Government GIS |
|--------------|----------------------------|
| Subaward ID  | SUB-0213474                |
|              |                            |

| Subaward No        | 18780-2867               |
|--------------------|--------------------------|
| Subaward Amount    | \$265,225.88             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | Sandborn Map             |
| Expenditure Start  | 4/1/2022                 |
| Expenditure End    | 6/30/2022                |
| Expenditure Amount | \$132,612.95             |

| Project Name       | DTI Anchor Rooms Remote Work |
|--------------------|------------------------------|
| Subaward ID        | SUB-0213475                  |
| Subaward No        | 18813-343830                 |
| Subaward Amount    | \$0.00                       |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | STRATEGIC COMMUNICATIONS LLC |
| Expenditure Start  | 10/1/2022                    |
| Expenditure End    | 12/31/2022                   |
| Expenditure Amount | (\$22,200.00)                |

# Expenditure: EN-00781946

| Project Name       | DTI Anchor Rooms Remote Work |
|--------------------|------------------------------|
| Subaward ID        | SUB-0213473                  |
| Subaward No        | 18813-26171                  |
| Subaward Amount    | \$225,132.76                 |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | Versalign                    |
| Expenditure Start  | 10/1/2022                    |
| Expenditure End    | 12/31/2022                   |
| Expenditure Amount | \$125,467.25                 |

| Project Name      | DTI Anchor Rooms Remote Work |
|-------------------|------------------------------|
| Subaward ID       | SUB-0608064                  |
| Subaward No       | 18813-641089                 |
| Subaward Amount   | \$754,375.50                 |
| Subaward Type     | Contract: Purchase Order     |
| Subrecipient Name | NTT DATA INC                 |
|                   |                              |

| Expenditure Start  | 1/1/2023     |
|--------------------|--------------|
| Expenditure End    | 3/31/2023    |
| Expenditure Amount | \$135,160.50 |

| Project Name       | DTI Anchor Rooms Remote Work |
|--------------------|------------------------------|
| Subaward ID        | SUB-0213473                  |
| Subaward No        | 18813-26171                  |
| Subaward Amount    | \$225,132.76                 |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | Versalign                    |
| Expenditure Start  | 1/1/2023                     |
| Expenditure End    | 3/31/2023                    |
| Expenditure Amount | \$47,410.58                  |

### Expenditure: EN-01615703

| Project Name       | DTI Anchor Rooms Remote Work |
|--------------------|------------------------------|
| Subaward ID        | SUB-0442341                  |
| Subaward No        | 18813-20739                  |
| Subaward Amount    | \$66,371.88                  |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | ASSURANCE MEDIA LLC          |
| Expenditure Start  | 4/1/2023                     |
| Expenditure End    | 6/30/2023                    |
| Expenditure Amount | \$66,371.88                  |

## Expenditure: EN-01615704

| Project Name       | DTI Anchor Rooms Remote Work |
|--------------------|------------------------------|
| Subaward ID        | SUB-0213473                  |
| Subaward No        | 18813-26171                  |
| Subaward Amount    | \$225,132.76                 |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | Versalign                    |
| Expenditure Start  | 4/1/2023                     |
| Expenditure End    | 6/30/2023                    |
| Expenditure Amount | \$21,042.93                  |

| Project Name       | DTI Anchor Rooms Remote Work |
|--------------------|------------------------------|
| Subaward ID        | SUB-0608064                  |
| Subaward No        | 18813-641089                 |
| Subaward Amount    | \$754,375.50                 |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | NTT DATA INC                 |
| Expenditure Start  | 4/1/2023                     |
| Expenditure End    | 6/30/2023                    |
| Expenditure Amount | \$81,828.00                  |

| Project Name       | DTI Anchor Rooms Remote Work |
|--------------------|------------------------------|
| Subaward ID        | SUB-0608064                  |
| Subaward No        | 18813-641089                 |
| Subaward Amount    | \$754,375.50                 |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | NTT DATA INC                 |
| Expenditure Start  | 7/1/2023                     |
| Expenditure End    | 9/30/2023                    |
| Expenditure Amount | \$126,800.00                 |

## Expenditure: EN-01916522

| Project Name       | DTI Anchor Rooms Remote Work |
|--------------------|------------------------------|
| Subaward ID        | SUB-0608064                  |
| Subaward No        | 18813-641089                 |
| Subaward Amount    | \$754,375.50                 |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | NTT DATA INC                 |
| Expenditure Start  | 10/1/2023                    |
| Expenditure End    | 12/31/2023                   |
| Expenditure Amount | \$392,005.00                 |

| Project Name | DTI Anchor Rooms Remote Work |
|--------------|------------------------------|
| Subaward ID  | SUB-0213475                  |
| Subaward No  | 18813-343830                 |
|              |                              |

| Subaward Amount    | \$0.00                       |
|--------------------|------------------------------|
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | STRATEGIC COMMUNICATIONS LLC |
| Expenditure Start  | 7/1/2022                     |
| Expenditure End    | 9/30/2022                    |
| Expenditure Amount | \$22,200.00                  |

| Project Name       | DTI Digital Government Platform Foundation |
|--------------------|--|
| Subaward ID        | SUB-0442345                                |
| Subaward No        | 18897-630238                               |
| Subaward Amount    | \$1,939,443.74                             |
| Subaward Type      | Contract: Purchase Order                   |
| Subrecipient Name  | GUIDESOFT INC DBA KNOWLEDGE SERVICES       |
| Expenditure Start  | 10/1/2022                                  |
| Expenditure End    | 12/31/2022                                 |
| Expenditure Amount | \$79,355.60                                |

## Expenditure: EN-00781926

| Project Name       | DTI Digital Government Platform Foundation |
|--------------------|--|
| Subaward ID        | SUB-0334443                                |
| Subaward No        | 18897-18102                                |
| Subaward Amount    | \$535,623.02                               |
| Subaward Type      | Contract: Purchase Order                   |
| Subrecipient Name  | COMPUTER AID INC                           |
| Expenditure Start  | 10/1/2022                                  |
| Expenditure End    | 12/31/2022                                 |
| Expenditure Amount | \$91,152.66                                |

| Project Name      | DTI Digital Government Platform Foundation |
|-------------------|--|
| Subaward ID       | SUB-0608346                                |
| Subaward No       | 18897-483193                               |
| Subaward Amount   | \$3,215,720.00                             |
| Subaward Type     | Contract: Purchase Order                   |
| Subrecipient Name | BREAKLINE DIGITAL LLC                      |
| Expenditure Start | 1/1/2023                                   |
|                   |  |

| Expenditure End    | 3/31/2023    |
|--------------------|--------------|
| Expenditure Amount | \$100,000.00 |

| Project Name       | DTI Digital Government Platform Foundation |
|--------------------|--|
| Subaward ID        | SUB-0334447                                |
| Subaward No        | 18897-133149                               |
| Subaward Amount    | \$2,201,726.30                             |
| Subaward Type      | Contract: Purchase Order                   |
| Subrecipient Name  | CARAHSOFT TECHNOLOGY CORPORATION           |
| Expenditure Start  | 1/1/2023                                   |
| Expenditure End    | 3/31/2023                                  |
| Expenditure Amount | \$712,785.11                               |

#### Expenditure: EN-01186078

| Project Name       | DTI Digital Government Platform Foundation |
|--------------------|--|
| Subaward ID        | SUB-0334443                                |
| Subaward No        | 18897-18102                                |
| Subaward Amount    | \$535,623.02                               |
| Subaward Type      | Contract: Purchase Order                   |
| Subrecipient Name  | COMPUTER AID INC                           |
| Expenditure Start  | 1/1/2023                                   |
| Expenditure End    | 3/31/2023                                  |
| Expenditure Amount | \$165,946.71                               |

#### Expenditure: EN-01186079

| Project Name       | DTI Digital Government Platform Foundation |
|--------------------|--|
| Subaward ID        | SUB-0442345                                |
| Subaward No        | 18897-630238                               |
| Subaward Amount    | \$1,939,443.74                             |
| Subaward Type      | Contract: Purchase Order                   |
| Subrecipient Name  | GUIDESOFT INC DBA KNOWLEDGE SERVICES       |
| Expenditure Start  | 1/1/2023                                   |
| Expenditure End    | 3/31/2023                                  |
| Expenditure Amount | \$133,332.71                               |

| Project Name       | DTI Digital Government Platform Foundation |
|--------------------|--|
| Subaward ID        | SUB-0722629                                |
| Subaward No        | 18897-16884                                |
| Subaward Amount    | \$119,366.72                               |
| Subaward Type      | Contract: Purchase Order                   |
| Subrecipient Name  | SHI INTERNATIONAL CORP                     |
| Expenditure Start  | 4/1/2023                                   |
| Expenditure End    | 6/30/2023                                  |
| Expenditure Amount | \$118,404.32                               |

| Project Name       | DTI Digital Government Platform Foundation |
|--------------------|--|
| Subaward ID        | SUB-0608346                                |
| Subaward No        | 18897-483193                               |
| Subaward Amount    | \$3,215,720.00                             |
| Subaward Type      | Contract: Purchase Order                   |
| Subrecipient Name  | BREAKLINE DIGITAL LLC                      |
| Expenditure Start  | 4/1/2023                                   |
| Expenditure End    | 6/30/2023                                  |
| Expenditure Amount | \$200,000.00                               |

## Expenditure: EN-01616319

| Project Name       | DTI Digital Government Platform Foundation |
|--------------------|--|
| Subaward ID        | SUB-0334447                                |
| Subaward No        | 18897-133149                               |
| Subaward Amount    | \$2,201,726.30                             |
| Subaward Type      | Contract: Purchase Order                   |
| Subrecipient Name  | CARAHSOFT TECHNOLOGY CORPORATION           |
| Expenditure Start  | 4/1/2023                                   |
| Expenditure End    | 6/30/2023                                  |
| Expenditure Amount | \$591,136.51                               |

| Project Name    | DTI Digital Government Platform Foundation |
|-----------------|--|
| Subaward ID     | SUB-0334443                                |
| Subaward No     | 18897-18102                                |
| Subaward Amount | \$535,623.02                               |
|                 |  |

| Subaward Type      | Contract: Purchase Order |
|--------------------|--------------------------|
| Subrecipient Name  | COMPUTER AID INC         |
| Expenditure Start  | 4/1/2023                 |
| Expenditure End    | 6/30/2023                |
| Expenditure Amount | \$166,252.19             |

| Project Name       | DTI Digital Government Platform Foundation |
|--------------------|--|
| Subaward ID        | SUB-0442345                                |
| Subaward No        | 18897-630238                               |
| Subaward Amount    | \$1,939,443.74                             |
| Subaward Type      | Contract: Purchase Order                   |
| Subrecipient Name  | GUIDESOFT INC DBA KNOWLEDGE SERVICES       |
| Expenditure Start  | 4/1/2023                                   |
| Expenditure End    | 6/30/2023                                  |
| Expenditure Amount | \$132,935.75                               |

# Expenditure: EN-01770636

| Project Name       | DTI Digital Government Platform Foundation |
|--------------------|--|
| Subaward ID        | SUB-0608346                                |
| Subaward No        | 18897-483193                               |
| Subaward Amount    | \$3,215,720.00                             |
| Subaward Type      | Contract: Purchase Order                   |
| Subrecipient Name  | BREAKLINE DIGITAL LLC                      |
| Expenditure Start  | 7/1/2023                                   |
| Expenditure End    | 9/30/2023                                  |
| Expenditure Amount | \$150,000.00                               |

| Project Name      | DTI Digital Government Platform Foundation |
|-------------------|--|
| Subaward ID       | SUB-0334447                                |
| Subaward No       | 18897-133149                               |
| Subaward Amount   | \$2,201,726.30                             |
| Subaward Type     | Contract: Purchase Order                   |
| Subrecipient Name | CARAHSOFT TECHNOLOGY CORPORATION           |
| Expenditure Start | 7/1/2023                                   |
| Expenditure End   | 9/30/2023                                  |
|                   |  |

| Project Name       | DTI Digital Government Platform Foundation |
|--------------------|--|
| Subaward ID        | SUB-0334443                                |
| Subaward No        | 18897-18102                                |
| Subaward Amount    | \$535,623.02                               |
| Subaward Type      | Contract: Purchase Order                   |
| Subrecipient Name  | COMPUTER AID INC                           |
| Expenditure Start  | 7/1/2023                                   |
| Expenditure End    | 9/30/2023                                  |
| Expenditure Amount | \$42,243.60                                |

#### Expenditure: EN-01770640

| Project Name       | DTI Digital Government Platform Foundation |
|--------------------|--|
| Subaward ID        | SUB-0442345                                |
| Subaward No        | 18897-630238                               |
| Subaward Amount    | \$1,939,443.74                             |
| Subaward Type      | Contract: Purchase Order                   |
| Subrecipient Name  | GUIDESOFT INC DBA KNOWLEDGE SERVICES       |
| Expenditure Start  | 7/1/2023                                   |
| Expenditure End    | 9/30/2023                                  |
| Expenditure Amount | \$188,050.70                               |

#### Expenditure: EN-01916524

| Project Name       | DTI Digital Government Platform Foundation |
|--------------------|--|
| Subaward ID        | SUB-0334447                                |
| Subaward No        | 18897-133149                               |
| Subaward Amount    | \$2,201,726.30                             |
| Subaward Type      | Contract: Purchase Order                   |
| Subrecipient Name  | CARAHSOFT TECHNOLOGY CORPORATION           |
| Expenditure Start  | 10/1/2023                                  |
| Expenditure End    | 12/31/2023                                 |
| Expenditure Amount | \$217,125.53                               |

|  | Project Name | DTI Digital Government Platform Foundation |
|--|--------------|--|
|--|--------------|--|

| Subaward ID        | SUB-0608346              |
|--------------------|--------------------------|
| Subaward No        | 18897-483193             |
| Subaward Amount    | \$3,215,720.00           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | BREAKLINE DIGITAL LLC    |
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$330,000.00             |

| Project Name       | DTI Digital Government Platform Foundation |
|--------------------|--|
| Subaward ID        | SUB-0442345                                |
| Subaward No        | 18897-630238                               |
| Subaward Amount    | \$1,939,443.74                             |
| Subaward Type      | Contract: Purchase Order                   |
| Subrecipient Name  | GUIDESOFT INC DBA KNOWLEDGE SERVICES       |
| Expenditure Start  | 10/1/2023                                  |
| Expenditure End    | 12/31/2023                                 |
| Expenditure Amount | \$297,449.00                               |

## Expenditure: EN-00627752

| Project Name       | DTI Digital Government Platform Foundation |
|--------------------|--|
| Subaward ID        | SUB-0442345                                |
| Subaward No        | 18897-630238                               |
| Subaward Amount    | \$1,939,443.74                             |
| Subaward Type      | Contract: Purchase Order                   |
| Subrecipient Name  | GUIDESOFT INC DBA KNOWLEDGE SERVICES       |
| Expenditure Start  | 8/2/2022                                   |
| Expenditure End    | 9/30/2022                                  |
| Expenditure Amount | \$3,849.75                                 |

| Project Name    | DTI Digital Government Platform Foundation |
|-----------------|--|
| Subaward ID     | SUB-0334447                                |
| Subaward No     | 18897-133149                               |
| Subaward Amount | \$2,201,726.30                             |
| Subaward Type   | Contract: Purchase Order                   |
|                 |  |

| Subrecipient Name  | CARAHSOFT TECHNOLOGY CORPORATION |
|--------------------|----------------------------------|
| Expenditure Start  | 7/1/2022                         |
| Expenditure End    | 9/30/2022                        |
| Expenditure Amount | \$164,025.24                     |

| Project Name       | DTI Digital Government Platform Foundation |
|--------------------|--|
| Subaward ID        | SUB-0334438                                |
| Subaward No        | 18897-27226                                |
| Subaward Amount    | \$58,240.00                                |
| Subaward Type      | Contract: Purchase Order                   |
| Subrecipient Name  | PROGRESSIVE SOFTWARE COMP INC              |
| Expenditure Start  | 7/1/2022                                   |
| Expenditure End    | 9/30/2022                                  |
| Expenditure Amount | \$58,240.00                                |

## Expenditure: EN-00627757

| Project Name       | DTI Digital Government Platform Foundation |
|--------------------|--|
| Subaward ID        | SUB-0334443                                |
| Subaward No        | 18897-18102                                |
| Subaward Amount    | \$535,623.02                               |
| Subaward Type      | Contract: Purchase Order                   |
| Subrecipient Name  | COMPUTER AID INC                           |
| Expenditure Start  | 7/1/2022                                   |
| Expenditure End    | 9/30/2022                                  |
| Expenditure Amount | \$51,400.24                                |

| Project Name       | DHSS Emergency Housing |
|--------------------|------------------------|
| Subaward ID        | SUB-0344678            |
| Subaward No        | 18598-295926           |
| Subaward Amount    | \$120,498.57           |
| Subaward Type      | Direct Payment         |
| Subrecipient Name  | 300 GATEWAY LLC        |
| Expenditure Start  | 10/1/2022              |
| Expenditure End    | 12/31/2022             |
| Expenditure Amount | \$6,180.00             |

| Project Name       | DHSS Emergency Housing     |
|--------------------|----------------------------|
| Subaward ID        | SUB-0344675                |
| Subaward No        | 18598-44505                |
| Subaward Amount    | \$200,943.00               |
| Subaward Type      | Direct Payment             |
| Subrecipient Name  | AATMEEYA HOSPITALITIES LLC |
| Expenditure Start  | 10/1/2022                  |
| Expenditure End    | 12/31/2022                 |
| Expenditure Amount | \$7,885.00                 |

## Expenditure: EN-00799166

| Project Name       | DHSS Emergency Housing |
|--------------------|------------------------|
| Subaward ID        | SUB-0344679            |
| Subaward No        | 18598-34055            |
| Subaward Amount    | \$112,165.00           |
| Subaward Type      | Direct Payment         |
| Subrecipient Name  | AKSHAR LLC             |
| Expenditure Start  | 10/1/2022              |
| Expenditure End    | 12/31/2022             |
| Expenditure Amount | \$705.00               |

#### Expenditure: EN-00799168

| Project Name       | DHSS Emergency Housing |
|--------------------|------------------------|
| Subaward ID        | SUB-0441630            |
| Subaward No        | 18598-365392           |
| Subaward Amount    | \$56,023.41            |
| Subaward Type      | Direct Payment         |
| Subrecipient Name  | BEAR HOSPITALITY LLC   |
| Expenditure Start  | 10/1/2022              |
| Expenditure End    | 12/31/2022             |
| Expenditure Amount | \$1,979.70             |

| Project Name | DHSS Emergency Housing |
|--------------|------------------------|
| Subaward ID  | SUB-0344669            |
|              |                        |

| Subaward No        | 18598-214677            |
|--------------------|-------------------------|
| Subaward Amount    | \$439,414.74            |
| Subaward Type      | Direct Payment          |
| Subrecipient Name  | BHAVANI HOSPITALITY INC |
| Expenditure Start  | 10/1/2022               |
| Expenditure End    | 12/31/2022              |
| Expenditure Amount | (\$21,117.47)           |

| Project Name       | DHSS Emergency Housing |
|--------------------|------------------------|
| Subaward ID        | SUB-0344682            |
| Subaward No        | 18598-206023           |
| Subaward Amount    | \$108,821.00           |
| Subaward Type      | Direct Payment         |
| Subrecipient Name  | BHAVI MOTEL LLC        |
| Expenditure Start  | 10/1/2022              |
| Expenditure End    | 12/31/2022             |
| Expenditure Amount | \$10,245.00            |

# Expenditure: EN-00799171

| Project Name       | DHSS Emergency Housing   |
|--------------------|--------------------------|
| Subaward ID        | SUB-0344680              |
| Subaward No        | 18598-300258             |
| Subaward Amount    | \$127,581.05             |
| Subaward Type      | Direct Payment           |
| Subrecipient Name  | CHUDASAMA ENTERPRISE LLC |
| Expenditure Start  | 10/1/2022                |
| Expenditure End    | 12/31/2022               |
| Expenditure Amount | \$5,504.02               |

| Project Name      | DHSS Emergency Housing |
|-------------------|------------------------|
| Subaward ID       | SUB-0344685            |
| Subaward No       | 18598-302881           |
| Subaward Amount   | \$89,692.52            |
| Subaward Type     | Direct Payment         |
| Subrecipient Name | DIPNA INC              |
|                   |                        |

| Expenditure Start  | 10/1/2022  |
|--------------------|------------|
| Expenditure End    | 12/31/2022 |
| Expenditure Amount | \$3,000.32 |

| Project Name       | DHSS Emergency Housing |
|--------------------|------------------------|
| Subaward ID        | SUB-0344668            |
| Subaward No        | 18598-214883           |
| Subaward Amount    | \$574,035.00           |
| Subaward Type      | Direct Payment         |
| Subrecipient Name  | DOVER BUDGET INN INC   |
| Expenditure Start  | 10/1/2022              |
| Expenditure End    | 12/31/2022             |
| Expenditure Amount | \$32,620.00            |

#### Expenditure: EN-00799178

| Project Name       | DHSS Emergency Housing        |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0344666                   |
| Subaward No        | 18598-583623                  |
| Subaward Amount    | \$846,253.75                  |
| Subaward Type      | Direct Payment                |
| Subrecipient Name  | HERSHA HOSPITALITY MANAGEMENT |
| Expenditure Start  | 10/1/2022                     |
| Expenditure End    | 12/31/2022                    |
| Expenditure Amount | \$66,850.00                   |

## Expenditure: EN-00799183

| Project Name       | DHSS Emergency Housing |
|--------------------|------------------------|
| Subaward ID        | SUB-0441634            |
| Subaward No        | 18598-403278           |
| Subaward Amount    | \$74,091.00            |
| Subaward Type      | Direct Payment         |
| Subrecipient Name  | JAY GANESH LLC         |
| Expenditure Start  | 10/1/2022              |
| Expenditure End    | 12/31/2022             |
| Expenditure Amount | \$4,565.00             |

| Project Name       | DHSS Emergency Housing |
|--------------------|------------------------|
| Subaward ID        | SUB-0441635            |
| Subaward No        | 18598-381523           |
| Subaward Amount    | \$65,304.00            |
| Subaward Type      | Direct Payment         |
| Subrecipient Name  | JKSJ HOSPITALITY INC   |
| Expenditure Start  | 10/1/2022              |
| Expenditure End    | 12/31/2022             |
| Expenditure Amount | \$1,610.00             |

| Project Name       | DHSS Emergency Housing   |
|--------------------|--------------------------|
| Subaward ID        | SUB-0344670              |
| Subaward No        | 18598-411282             |
| Subaward Amount    | \$486,337.00             |
| Subaward Type      | Direct Payment           |
| Subrecipient Name  | LABURNUM HOSPITALITY LLC |
| Expenditure Start  | 10/1/2022                |
| Expenditure End    | 12/31/2022               |
| Expenditure Amount | \$29,462.00              |

## Expenditure: EN-00799191

| Project Name       | DHSS Emergency Housing |
|--------------------|------------------------|
| Subaward ID        | SUB-0344664            |
| Subaward No        | 18598-238174           |
| Subaward Amount    | \$976,671.00           |
| Subaward Type      | Direct Payment         |
| Subrecipient Name  | MALL AND SONS LLC      |
| Expenditure Start  | 10/1/2022              |
| Expenditure End    | 12/31/2022             |
| Expenditure Amount | \$16,690.00            |

| Project Name | DHSS Emergency Housing |
|--------------|------------------------|
| Subaward ID  | SUB-0344671            |
| Subaward No  | 18598-299798           |
|              |                        |

| Subaward Amount    | \$424,015.00        |
|--------------------|---------------------|
| Subaward Type      | Direct Payment      |
| Subrecipient Name  | MALL MANAGEMENT LLC |
| Expenditure Start  | 10/1/2022           |
| Expenditure End    | 12/31/2022          |
| Expenditure Amount | \$4,860.00          |

| Project Name       | DHSS Emergency Housing |
|--------------------|------------------------|
| Subaward ID        | SUB-0441636            |
| Subaward No        | 18598-214702           |
| Subaward Amount    | \$76,665.00            |
| Subaward Type      | Direct Payment         |
| Subrecipient Name  | RISHI HOSPITALITY LLC  |
| Expenditure Start  | 10/1/2022              |
| Expenditure End    | 12/31/2022             |
| Expenditure Amount | \$5,400.00             |

## Expenditure: EN-00799199

| Project Name       | DHSS Emergency Housing |
|--------------------|------------------------|
| Subaward ID        | SUB-0344673            |
| Subaward No        | 18598-319890           |
| Subaward Amount    | \$399,769.00           |
| Subaward Type      | Direct Payment         |
| Subrecipient Name  | RP HOSPITALITY LLC     |
| Expenditure Start  | 10/1/2022              |
| Expenditure End    | 12/31/2022             |
| Expenditure Amount | \$8,830.00             |

| Project Name      | DHSS Emergency Housing           |
|-------------------|----------------------------------|
| Subaward ID       | SUB-0344676                      |
| Subaward No       | 18598-215216                     |
| Subaward Amount   | \$163,530.00                     |
| Subaward Type     | Direct Payment                   |
| Subrecipient Name | SAHAJ NEW CASTLE HOSPITALITY LLC |
| Expenditure Start | 10/1/2022                        |
|                   |                                  |

| Expenditure End    | 12/31/2022 |
|--------------------|------------|
| Expenditure Amount | \$6,875.00 |

| Project Name       | DHSS Emergency Housing |
|--------------------|------------------------|
| Subaward ID        | SUB-0344674            |
| Subaward No        | 18598-238178           |
| Subaward Amount    | \$337,187.00           |
| Subaward Type      | Direct Payment         |
| Subrecipient Name  | SAS DE LLC             |
| Expenditure Start  | 10/1/2022              |
| Expenditure End    | 12/31/2022             |
| Expenditure Amount | \$8,814.00             |

## Expenditure: EN-00799215

| Project Name       | DHSS Emergency Housing |
|--------------------|------------------------|
| Subaward ID        | SUB-0344667            |
| Subaward No        | 18598-275196           |
| Subaward Amount    | \$583,955.95           |
| Subaward Type      | Direct Payment         |
| Subrecipient Name  | SHRI SWAMI NARAYAN LLC |
| Expenditure Start  | 10/1/2022              |
| Expenditure End    | 12/31/2022             |
| Expenditure Amount | \$32,594.00            |

#### Expenditure: EN-00799219

| Project Name       | DHSS Emergency Housing |
|--------------------|------------------------|
| Subaward ID        | SUB-0344683            |
| Subaward No        | 18598-309551           |
| Subaward Amount    | \$112,653.48           |
| Subaward Type      | Direct Payment         |
| Subrecipient Name  | SOUKOON INC            |
| Expenditure Start  | 10/1/2022              |
| Expenditure End    | 12/31/2022             |
| Expenditure Amount | \$1,985.00             |

| Project Name       | DHSS Emergency Housing |
|--------------------|------------------------|
| Subaward ID        | SUB-0344683            |
| Subaward No        | 18598-309551           |
| Subaward Amount    | \$112,653.48           |
| Subaward Type      | Direct Payment         |
| Subrecipient Name  | SOUKOON INC            |
| Expenditure Start  | 10/1/2022              |
| Expenditure End    | 12/31/2022             |
| Expenditure Amount | \$350.00               |

| Project Name       | DHSS Emergency Housing   |
|--------------------|--------------------------|
| Subaward ID        | SUB-0344670              |
| Subaward No        | 18598-411282             |
| Subaward Amount    | \$486,337.00             |
| Subaward Type      | Direct Payment           |
| Subrecipient Name  | LABURNUM HOSPITALITY LLC |
| Expenditure Start  | 1/1/2023                 |
| Expenditure End    | 3/31/2023                |
| Expenditure Amount | \$758.00                 |

## Expenditure: EN-01180369

| Project Name       | DHSS Emergency Housing |
|--------------------|------------------------|
| Subaward ID        | SUB-0344682            |
| Subaward No        | 18598-206023           |
| Subaward Amount    | \$108,821.00           |
| Subaward Type      | Direct Payment         |
| Subrecipient Name  | BHAVI MOTEL LLC        |
| Expenditure Start  | 1/1/2023               |
| Expenditure End    | 3/31/2023              |
| Expenditure Amount | \$2,701.00             |

| Project Name    | DHSS Emergency Housing |
|-----------------|------------------------|
| Subaward ID     | SUB-0344666            |
| Subaward No     | 18598-583623           |
| Subaward Amount | \$846,253.75           |
|                 |                        |

| Subaward Type      | Direct Payment                |
|--------------------|-------------------------------|
| Subrecipient Name  | HERSHA HOSPITALITY MANAGEMENT |
| Expenditure Start  | 1/1/2023                      |
| Expenditure End    | 3/31/2023                     |
| Expenditure Amount | \$2,100.00                    |

| Project Name       | DHSS Emergency Housing        |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0344666                   |
| Subaward No        | 18598-583623                  |
| Subaward Amount    | \$846,253.75                  |
| Subaward Type      | Direct Payment                |
| Subrecipient Name  | HERSHA HOSPITALITY MANAGEMENT |
| Expenditure Start  | 4/1/2023                      |
| Expenditure End    | 6/30/2023                     |
| Expenditure Amount | \$1,450.00                    |

## Expenditure: EN-01920720

| Project Name       | DHSS Emergency Housing |
|--------------------|------------------------|
| Subaward ID        | SUB-0344664            |
| Subaward No        | 18598-238174           |
| Subaward Amount    | \$976,671.00           |
| Subaward Type      | Direct Payment         |
| Subrecipient Name  | MALL AND SONS LLC      |
| Expenditure Start  | 10/1/2023              |
| Expenditure End    | 12/31/2023             |
| Expenditure Amount | (\$510.00)             |

| Project Name      | DHSS Emergency Housing |
|-------------------|------------------------|
| Subaward ID       | SUB-0441630            |
| Subaward No       | 18598-365392           |
| Subaward Amount   | \$56,023.41            |
| Subaward Type     | Direct Payment         |
| Subrecipient Name | BEAR HOSPITALITY LLC   |
| Expenditure Start | 7/1/2022               |
| Expenditure End   | 9/30/2022              |
|                   |                        |

| Project Name       | DHSS Emergency Housing |
|--------------------|------------------------|
| Subaward ID        | SUB-0441634            |
| Subaward No        | 18598-403278           |
| Subaward Amount    | \$74,091.00            |
| Subaward Type      | Direct Payment         |
| Subrecipient Name  | JAY GANESH LLC         |
| Expenditure Start  | 7/1/2022               |
| Expenditure End    | 9/30/2022              |
| Expenditure Amount | \$69,526.00            |

#### Expenditure: EN-00625876

| Project Name       | DHSS Emergency Housing |
|--------------------|------------------------|
| Subaward ID        | SUB-0441635            |
| Subaward No        | 18598-381523           |
| Subaward Amount    | \$65,304.00            |
| Subaward Type      | Direct Payment         |
| Subrecipient Name  | JKSJ HOSPITALITY INC   |
| Expenditure Start  | 7/1/2022               |
| Expenditure End    | 9/30/2022              |
| Expenditure Amount | \$63,694.00            |

#### Expenditure: EN-00625878

| Project Name       | DHSS Emergency Housing |
|--------------------|------------------------|
| Subaward ID        | SUB-0441636            |
| Subaward No        | 18598-214702           |
| Subaward Amount    | \$76,665.00            |
| Subaward Type      | Direct Payment         |
| Subrecipient Name  | RISHI HOSPITALITY LLC  |
| Expenditure Start  | 7/1/2022               |
| Expenditure End    | 9/30/2022              |
| Expenditure Amount | \$71,265.00            |

| Project Name | DHSS Emergency Housing                |
|--------------|---------------------------------------|
|              | I I I I I I I I I I I I I I I I I I I |

| Subaward ID        | SUB-0344678     |
|--------------------|-----------------|
| Subaward No        | 18598-295926    |
| Subaward Amount    | \$120,498.57    |
| Subaward Type      | Direct Payment  |
| Subrecipient Name  | 300 GATEWAY LLC |
| Expenditure Start  | 7/1/2022        |
| Expenditure End    | 9/30/2022       |
| Expenditure Amount | \$35,926.00     |

| Project Name       | DHSS Emergency Housing     |
|--------------------|----------------------------|
| Subaward ID        | SUB-0344675                |
| Subaward No        | 18598-44505                |
| Subaward Amount    | \$200,943.00               |
| Subaward Type      | Direct Payment             |
| Subrecipient Name  | AATMEEYA HOSPITALITIES LLC |
| Expenditure Start  | 7/1/2022                   |
| Expenditure End    | 9/30/2022                  |
| Expenditure Amount | \$70,140.00                |

## Expenditure: EN-00626045

| Project Name       | DHSS Emergency Housing |
|--------------------|------------------------|
| Subaward ID        | SUB-0344679            |
| Subaward No        | 18598-34055            |
| Subaward Amount    | \$112,165.00           |
| Subaward Type      | Direct Payment         |
| Subrecipient Name  | AKSHAR LLC             |
| Expenditure Start  | 7/1/2022               |
| Expenditure End    | 9/30/2022              |
| Expenditure Amount | \$39,410.00            |

| Project Name    | DHSS Emergency Housing |
|-----------------|------------------------|
| Subaward ID     | SUB-0344673            |
| Subaward No     | 18598-319890           |
| Subaward Amount | \$399,769.00           |
| Subaward Type   | Direct Payment         |
|                 |                        |

| Subrecipient Name  | RP HOSPITALITY LLC |
|--------------------|--------------------|
| Expenditure Start  | 7/1/2022           |
| Expenditure End    | 9/30/2022          |
| Expenditure Amount | \$128,294.00       |

| Project Name       | DHSS Emergency Housing  |
|--------------------|-------------------------|
| Subaward ID        | SUB-0344669             |
| Subaward No        | 18598-214677            |
| Subaward Amount    | \$439,414.74            |
| Subaward Type      | Direct Payment          |
| Subrecipient Name  | BHAVANI HOSPITALITY INC |
| Expenditure Start  | 7/1/2022                |
| Expenditure End    | 9/30/2022               |
| Expenditure Amount | \$150,709.21            |

## Expenditure: EN-00626183

| Project Name       | DHSS Emergency Housing |
|--------------------|------------------------|
| Subaward ID        | SUB-0344674            |
| Subaward No        | 18598-238178           |
| Subaward Amount    | \$337,187.00           |
| Subaward Type      | Direct Payment         |
| Subrecipient Name  | SAS DE LLC             |
| Expenditure Start  | 7/1/2022               |
| Expenditure End    | 9/30/2022              |
| Expenditure Amount | \$122,331.00           |

| Project Name       | DHSS Emergency Housing  |
|--------------------|-------------------------|
| Subaward ID        | SUB-0344669             |
| Subaward No        | 18598-214677            |
| Subaward Amount    | \$439,414.74            |
| Subaward Type      | Direct Payment          |
| Subrecipient Name  | BHAVANI HOSPITALITY INC |
| Expenditure Start  | 7/1/2022                |
| Expenditure End    | 9/30/2022               |
| Expenditure Amount | \$31,520.00             |

| Project Name       | DHSS Emergency Housing |
|--------------------|------------------------|
| Subaward ID        | SUB-0344682            |
| Subaward No        | 18598-206023           |
| Subaward Amount    | \$108,821.00           |
| Subaward Type      | Direct Payment         |
| Subrecipient Name  | BHAVI MOTEL LLC        |
| Expenditure Start  | 7/1/2022               |
| Expenditure End    | 9/30/2022              |
| Expenditure Amount | \$31,520.00            |

#### Expenditure: EN-00626058

| Project Name       | DHSS Emergency Housing   |
|--------------------|--------------------------|
| Subaward ID        | SUB-0344680              |
| Subaward No        | 18598-300258             |
| Subaward Amount    | \$127,581.05             |
| Subaward Type      | Direct Payment           |
| Subrecipient Name  | CHUDASAMA ENTERPRISE LLC |
| Expenditure Start  | 7/1/2022                 |
| Expenditure End    | 9/30/2022                |
| Expenditure Amount | \$53,057.03              |

#### Expenditure: EN-00626060

| Project Name       | DHSS Emergency Housing |
|--------------------|------------------------|
| Subaward ID        | SUB-0344685            |
| Subaward No        | 18598-302881           |
| Subaward Amount    | \$89,692.52            |
| Subaward Type      | Direct Payment         |
| Subrecipient Name  | DIPNA INC              |
| Expenditure Start  | 7/1/2022               |
| Expenditure End    | 9/30/2022              |
| Expenditure Amount | \$32,560.53            |

| Project Name | DHSS Emergency Housing |
|--------------|------------------------|
| Subaward ID  | SUB-0344668            |
|              |                        |

| Subaward No        | 18598-214883         |
|--------------------|----------------------|
| Subaward Amount    | \$574,035.00         |
| Subaward Type      | Direct Payment       |
| Subrecipient Name  | DOVER BUDGET INN INC |
| Expenditure Start  | 7/1/2022             |
| Expenditure End    | 9/30/2022            |
| Expenditure Amount | \$251,650.00         |

| Project Name       | DHSS Emergency Housing        |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0344666                   |
| Subaward No        | 18598-583623                  |
| Subaward Amount    | \$846,253.75                  |
| Subaward Type      | Direct Payment                |
| Subrecipient Name  | HERSHA HOSPITALITY MANAGEMENT |
| Expenditure Start  | 7/1/2022                      |
| Expenditure End    | 9/30/2022                     |
| Expenditure Amount | \$275,213.75                  |

# Expenditure: EN-00626070

| Project Name       | DHSS Emergency Housing   |
|--------------------|--------------------------|
| Subaward ID        | SUB-0344670              |
| Subaward No        | 18598-411282             |
| Subaward Amount    | \$486,337.00             |
| Subaward Type      | Direct Payment           |
| Subrecipient Name  | LABURNUM HOSPITALITY LLC |
| Expenditure Start  | 7/1/2022                 |
| Expenditure End    | 9/30/2022                |
| Expenditure Amount | \$184,967.00             |

| Project Name      | DHSS Emergency Housing |
|-------------------|------------------------|
| Subaward ID       | SUB-0344664            |
| Subaward No       | 18598-238174           |
| Subaward Amount   | \$976,671.00           |
| Subaward Type     | Direct Payment         |
| Subrecipient Name | MALL AND SONS LLC      |
|                   |                        |

| Expenditure Start  | 7/1/2022     |
|--------------------|--------------|
| Expenditure End    | 9/30/2022    |
| Expenditure Amount | \$308,403.00 |

| Project Name       | DHSS Emergency Housing |
|--------------------|------------------------|
| Subaward ID        | SUB-0344671            |
| Subaward No        | 18598-299798           |
| Subaward Amount    | \$424,015.00           |
| Subaward Type      | Direct Payment         |
| Subrecipient Name  | MALL MANAGEMENT LLC    |
| Expenditure Start  | 7/1/2022               |
| Expenditure End    | 9/30/2022              |
| Expenditure Amount | \$148,440.00           |

#### Expenditure: EN-00626178

| Project Name       | DHSS Emergency Housing           |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0344676                      |
| Subaward No        | 18598-215216                     |
| Subaward Amount    | \$163,530.00                     |
| Subaward Type      | Direct Payment                   |
| Subrecipient Name  | SAHAJ NEW CASTLE HOSPITALITY LLC |
| Expenditure Start  | 7/1/2022                         |
| Expenditure End    | 9/30/2022                        |
| Expenditure Amount | \$63,550.00                      |

## Expenditure: EN-00626185

| Project Name       | DHSS Emergency Housing |
|--------------------|------------------------|
| Subaward ID        | SUB-0344667            |
| Subaward No        | 18598-275196           |
| Subaward Amount    | \$583,955.95           |
| Subaward Type      | Direct Payment         |
| Subrecipient Name  | SHRI SWAMI NARAYAN LLC |
| Expenditure Start  | 7/1/2022               |
| Expenditure End    | 9/30/2022              |
| Expenditure Amount | \$212,570.00           |

| Project Name       | DHSS Emergency Housing |
|--------------------|------------------------|
| Subaward ID        | SUB-0344683            |
| Subaward No        | 18598-309551           |
| Subaward Amount    | \$112,653.48           |
| Subaward Type      | Direct Payment         |
| Subrecipient Name  | SOUKOON INC            |
| Expenditure Start  | 7/1/2022               |
| Expenditure End    | 9/30/2022              |
| Expenditure Amount | \$51,243.48            |

| Project Name       | DHSS Emergency Housing |
|--------------------|------------------------|
| Subaward ID        | SUB-0344664            |
| Subaward No        | 18598-238174           |
| Subaward Amount    | \$976,671.00           |
| Subaward Type      | Direct Payment         |
| Subrecipient Name  | MALL AND SONS LLC      |
| Expenditure Start  | 4/1/2022               |
| Expenditure End    | 6/30/2022              |
| Expenditure Amount | \$652,088.00           |

## Expenditure: EN-00443405

| Project Name       | DHSS Emergency Housing |
|--------------------|------------------------|
| Subaward ID        | SUB-0344667            |
| Subaward No        | 18598-275196           |
| Subaward Amount    | \$583,955.95           |
| Subaward Type      | Direct Payment         |
| Subrecipient Name  | SHRI SWAMI NARAYAN LLC |
| Expenditure Start  | 4/1/2022               |
| Expenditure End    | 6/30/2022              |
| Expenditure Amount | \$338,791.95           |

| Project Name | DHSS Emergency Housing |
|--------------|------------------------|
| Subaward ID  | SUB-0344668            |
| Subaward No  | 18598-214883           |
|              |                        |

| Subaward Amount    | \$574,035.00         |
|--------------------|----------------------|
| Subaward Type      | Direct Payment       |
| Subrecipient Name  | DOVER BUDGET INN INC |
| Expenditure Start  | 4/1/2022             |
| Expenditure End    | 6/30/2022            |
| Expenditure Amount | \$289,765.00         |

| Project Name       | DHSS Emergency Housing |
|--------------------|------------------------|
| Subaward ID        | SUB-0344685            |
| Subaward No        | 18598-302881           |
| Subaward Amount    | \$89,692.52            |
| Subaward Type      | Direct Payment         |
| Subrecipient Name  | DIPNA INC              |
| Expenditure Start  | 4/1/2022               |
| Expenditure End    | 6/30/2022              |
| Expenditure Amount | \$54,131.67            |

## Expenditure: EN-00443404

| Project Name       | DHSS Emergency Housing        |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0344666                   |
| Subaward No        | 18598-583623                  |
| Subaward Amount    | \$846,253.75                  |
| Subaward Type      | Direct Payment                |
| Subrecipient Name  | HERSHA HOSPITALITY MANAGEMENT |
| Expenditure Start  | 4/1/2022                      |
| Expenditure End    | 6/30/2024                     |
| Expenditure Amount | \$500,640.00                  |

| Project Name      | DHSS Emergency Housing |
|-------------------|------------------------|
| Subaward ID       | SUB-0344682            |
| Subaward No       | 18598-206023           |
| Subaward Amount   | \$108,821.00           |
| Subaward Type     | Direct Payment         |
| Subrecipient Name | BHAVI MOTEL LLC        |
| Expenditure Start | 4/1/2022               |
|                   |                        |

| Expenditure End    | 6/30/2022   |
|--------------------|-------------|
| Expenditure Amount | \$64,355.00 |

| Project Name       | DHSS Emergency Housing  |
|--------------------|-------------------------|
| Subaward ID        | SUB-0344669             |
| Subaward No        | 18598-214677            |
| Subaward Amount    | \$439,414.74            |
| Subaward Type      | Direct Payment          |
| Subrecipient Name  | BHAVANI HOSPITALITY INC |
| Expenditure Start  | 4/1/2022                |
| Expenditure End    | 6/30/2022               |
| Expenditure Amount | \$278,303.00            |

## Expenditure: EN-00443408

| Project Name       | DHSS Emergency Housing   |
|--------------------|--------------------------|
| Subaward ID        | SUB-0344670              |
| Subaward No        | 18598-411282             |
| Subaward Amount    | \$486,337.00             |
| Subaward Type      | Direct Payment           |
| Subrecipient Name  | LABURNUM HOSPITALITY LLC |
| Expenditure Start  | 4/1/2022                 |
| Expenditure End    | 6/30/2022                |
| Expenditure Amount | \$271,150.00             |

#### Expenditure: EN-00443411

| Project Name       | DHSS Emergency Housing |
|--------------------|------------------------|
| Subaward ID        | SUB-0344673            |
| Subaward No        | 18598-319890           |
| Subaward Amount    | \$399,769.00           |
| Subaward Type      | Direct Payment         |
| Subrecipient Name  | RP HOSPITALITY LLC     |
| Expenditure Start  | 4/1/2022               |
| Expenditure End    | 6/30/2022              |
| Expenditure Amount | \$262,645.00           |

| Project Name       | DHSS Emergency Housing   |
|--------------------|--------------------------|
| Subaward ID        | SUB-0344680              |
| Subaward No        | 18598-300258             |
| Subaward Amount    | \$127,581.05             |
| Subaward Type      | Direct Payment           |
| Subrecipient Name  | CHUDASAMA ENTERPRISE LLC |
| Expenditure Start  | 4/1/2022                 |
| Expenditure End    | 6/30/2022                |
| Expenditure Amount | \$69,020.00              |

| Project Name       | DHSS Emergency Housing |
|--------------------|------------------------|
| Subaward ID        | SUB-0344671            |
| Subaward No        | 18598-299798           |
| Subaward Amount    | \$424,015.00           |
| Subaward Type      | Direct Payment         |
| Subrecipient Name  | MALL MANAGEMENT LLC    |
| Expenditure Start  | 4/1/2022               |
| Expenditure End    | 6/30/2022              |
| Expenditure Amount | \$270,715.00           |

# Expenditure: EN-00443412

| Project Name       | DHSS Emergency Housing |
|--------------------|------------------------|
| Subaward ID        | SUB-0344674            |
| Subaward No        | 18598-238178           |
| Subaward Amount    | \$337,187.00           |
| Subaward Type      | Direct Payment         |
| Subrecipient Name  | SAS DE LLC             |
| Expenditure Start  | 4/1/2022               |
| Expenditure End    | 6/30/2022              |
| Expenditure Amount | \$206,042.00           |

| Project Name    | DHSS Emergency Housing |
|-----------------|------------------------|
| Subaward ID     | SUB-0344675            |
| Subaward No     | 18598-44505            |
| Subaward Amount | \$200,943.00           |
|                 |                        |

| Subaward Type      | Direct Payment             |
|--------------------|----------------------------|
| Subrecipient Name  | AATMEEYA HOSPITALITIES LLC |
| Expenditure Start  | 4/1/2022                   |
| Expenditure End    | 6/30/2022                  |
| Expenditure Amount | \$122,918.00               |

| Project Name       | DHSS Emergency Housing           |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0344676                      |
| Subaward No        | 18598-215216                     |
| Subaward Amount    | \$163,530.00                     |
| Subaward Type      | Direct Payment                   |
| Subrecipient Name  | SAHAJ NEW CASTLE HOSPITALITY LLC |
| Expenditure Start  | 4/1/2022                         |
| Expenditure End    | 6/30/2022                        |
| Expenditure Amount | \$93,105.00                      |

# Expenditure: EN-00443415

| Project Name       | DHSS Emergency Housing |
|--------------------|------------------------|
| Subaward ID        | SUB-0344678            |
| Subaward No        | 18598-295926           |
| Subaward Amount    | \$120,498.57           |
| Subaward Type      | Direct Payment         |
| Subrecipient Name  | 300 GATEWAY LLC        |
| Expenditure Start  | 4/1/2022               |
| Expenditure End    | 6/30/2022              |
| Expenditure Amount | \$78,392.57            |

| Project Name      | DHSS Emergency Housing |
|-------------------|------------------------|
| Subaward ID       | SUB-0344683            |
| Subaward No       | 18598-309551           |
| Subaward Amount   | \$112,653.48           |
| Subaward Type     | Direct Payment         |
| Subrecipient Name | SOUKOON INC            |
| Expenditure Start | 4/1/2022               |
| Expenditure End   | 6/30/2022              |
|                   |                        |

| Project Name       | DHSS Emergency Housing |
|--------------------|------------------------|
| Subaward ID        | SUB-0344679            |
| Subaward No        | 18598-34055            |
| Subaward Amount    | \$112,165.00           |
| Subaward Type      | Direct Payment         |
| Subrecipient Name  | AKSHAR LLC             |
| Expenditure Start  | 4/1/2022               |
| Expenditure End    | 6/30/2022              |
| Expenditure Amount | \$72,050.00            |

#### Expenditure: EN-00799425

| Project Name       | DHSS Emergency Housing   |
|--------------------|--------------------------|
| Subaward ID        | SUB-0341408              |
| Subaward No        | 18667-0001               |
| Subaward Amount    | \$473,217.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | FAIRFIELD INN & SUITES   |
| Expenditure Start  | 10/1/2022                |
| Expenditure End    | 12/31/2022               |
| Expenditure Amount | \$88,568.00              |

#### Expenditure: EN-01181212

| Project Name       | DHSS Emergency Housing   |
|--------------------|--------------------------|
| Subaward ID        | SUB-0341408              |
| Subaward No        | 18667-0001               |
| Subaward Amount    | \$473,217.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | FAIRFIELD INN & SUITES   |
| Expenditure Start  | 1/1/2023                 |
| Expenditure End    | 3/31/2023                |
| Expenditure Amount | \$55,516.00              |

| Project Name | DHSS Emergency Housing |
|--------------|------------------------|
|              |                        |

| Subaward ID        | SUB-0341408              |
|--------------------|--------------------------|
| Subaward No        | 18667-0001               |
| Subaward Amount    | \$473,217.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | FAIRFIELD INN & SUITES   |
| Expenditure Start  | 4/1/2023                 |
| Expenditure End    | 6/30/2023                |
| Expenditure Amount | \$14,135.31              |

| Project Name       | DHSS Emergency Housing   |
|--------------------|--------------------------|
| Subaward ID        | SUB-0341408              |
| Subaward No        | 18667-0001               |
| Subaward Amount    | \$473,217.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | FAIRFIELD INN & SUITES   |
| Expenditure Start  | 7/1/2022                 |
| Expenditure End    | 9/30/2022                |
| Expenditure Amount | \$69,254.06              |

## Expenditure: EN-00441477

| Project Name       | DHSS Emergency Housing   |
|--------------------|--------------------------|
| Subaward ID        | SUB-0341408              |
| Subaward No        | 18667-0001               |
| Subaward Amount    | \$473,217.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | FAIRFIELD INN & SUITES   |
| Expenditure Start  | 4/1/2022                 |
| Expenditure End    | 6/30/2022                |
| Expenditure Amount | \$245,743.63             |

| Project Name    | DHSS Vaccine Booster for Homebound Adults |
|-----------------|---|
| Subaward ID     | SUB-0341237                               |
| Subaward No     | 18749-187529                              |
| Subaward Amount | \$0.00                                    |
| Subaward Type   | Contract: Purchase Order                  |
|                 |   |

| Subrecipient Name  | Civic Health Services |
|--------------------|-----------------------|
| Expenditure Start  | 10/1/2022             |
| Expenditure End    | 12/31/2022            |
| Expenditure Amount | \$1,440.00            |

| Project Name       | DHSS Vaccine Booster for Homebound Adults |
|--------------------|---|
| Subaward ID        | SUB-0341281                               |
| Subaward No        | 18749-577283                              |
| Subaward Amount    | \$0.00                                    |
| Subaward Type      | Contract: Purchase Order                  |
| Subrecipient Name  | Shayona Health                            |
| Expenditure Start  | 10/1/2022                                 |
| Expenditure End    | 12/31/2022                                |
| Expenditure Amount | \$5,310.00                                |

## Expenditure: EN-00812868

| Project Name       | DHSS Vaccine Booster for Homebound Adults |
|--------------------|---|
| Subaward ID        | SUB-0530915                               |
| Subaward No        | 18749-24438                               |
| Subaward Amount    | \$0.00                                    |
| Subaward Type      | Contract: Purchase Order                  |
| Subrecipient Name  | DELAWARE PHARMACISTS SOCIETY              |
| Expenditure Start  | 11/16/2022                                |
| Expenditure End    | 12/31/2022                                |
| Expenditure Amount | \$3,510.00                                |

| Project Name       | DHSS Vaccine Booster for Homebound Adults |
|--------------------|---|
| Subaward ID        | SUB-0341237                               |
| Subaward No        | 18749-187529                              |
| Subaward Amount    | \$0.00                                    |
| Subaward Type      | Contract: Purchase Order                  |
| Subrecipient Name  | Civic Health Services                     |
| Expenditure Start  | 1/1/2023                                  |
| Expenditure End    | 3/31/2023                                 |
| Expenditure Amount | (\$1,440.00)                              |

| Project Name       | DHSS Vaccine Booster for Homebound Adults |
|--------------------|---|
| Subaward ID        | SUB-0341281                               |
| Subaward No        | 18749-577283                              |
| Subaward Amount    | \$0.00                                    |
| Subaward Type      | Contract: Purchase Order                  |
| Subrecipient Name  | Shayona Health                            |
| Expenditure Start  | 1/1/2023                                  |
| Expenditure End    | 3/31/2023                                 |
| Expenditure Amount | (\$5,310.00)                              |

## Expenditure: EN-01181220

| Project Name       | DHSS Vaccine Booster for Homebound Adults |
|--------------------|---|
| Subaward ID        | SUB-0530915                               |
| Subaward No        | 18749-24438                               |
| Subaward Amount    | \$0.00                                    |
| Subaward Type      | Contract: Purchase Order                  |
| Subrecipient Name  | DELAWARE PHARMACISTS SOCIETY              |
| Expenditure Start  | 1/1/2023                                  |
| Expenditure End    | 3/31/2023                                 |
| Expenditure Amount | (\$3,510.00)                              |

#### Expenditure: EN-01181221

| Project Name       | DHSS Vaccine Booster for Homebound Adults |
|--------------------|---|
| Subaward ID        | SUB-0341230                               |
| Subaward No        | 18749-                                    |
| Subaward Amount    | \$0.00                                    |
| Subaward Type      | Contract: Purchase Order                  |
| Subrecipient Name  | Cape Pharmacy                             |
| Expenditure Start  | 1/1/2023                                  |
| Expenditure End    | 3/31/2023                                 |
| Expenditure Amount | (\$828.75)                                |

| Project Name | DHSS Vaccine Booster for Homebound Adults |
|--------------|---|
| Subaward ID  | SUB-0341237                               |
|              |   |

| Subaward No        | 18749-187529             |
|--------------------|--------------------------|
| Subaward Amount    | \$0.00                   |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | Civic Health Services    |
| Expenditure Start  | 1/1/2023                 |
| Expenditure End    | 3/31/2023                |
| Expenditure Amount | (\$120.00)               |

| Project Name       | DHSS Vaccine Booster for Homebound Adults |
|--------------------|---|
| Subaward ID        | SUB-0222443                               |
| Subaward No        | 35-1400-2022-64                           |
| Subaward Amount    | \$0.00                                    |
| Subaward Type      | Contract: Purchase Order                  |
| Subrecipient Name  | Laurel Health Services                    |
| Expenditure Start  | 1/1/2023                                  |
| Expenditure End    | 3/31/2023                                 |
| Expenditure Amount | (\$2,700.00)                              |

# Expenditure: EN-00624743

| Project Name       | DHSS Vaccine Booster for Homebound Adults |
|--------------------|---|
| Subaward ID        | SUB-0222439                               |
| Subaward No        | 35-1400-2022-67                           |
| Subaward Amount    | \$0.00                                    |
| Subaward Type      | Contract: Purchase Order                  |
| Subrecipient Name  | Laurel Health Services                    |
| Expenditure Start  | 7/1/2022                                  |
| Expenditure End    | 9/30/2022                                 |
| Expenditure Amount | \$2,700.00                                |

| Project Name      | DHSS Vaccine Booster for Homebound Adults |
|-------------------|---|
| Subaward ID       | SUB-0341237                               |
| Subaward No       | 18749-187529                              |
| Subaward Amount   | \$0.00                                    |
| Subaward Type     | Contract: Purchase Order                  |
| Subrecipient Name | Civic Health Services                     |
|                   |   |

| Expenditure Start  | 7/1/2022  |
|--------------------|-----------|
| Expenditure End    | 9/30/2022 |
| Expenditure Amount | \$0.00    |

| Project Name       | DHSS Vaccine Booster for Homebound Adults |
|--------------------|---|
| Subaward ID        | SUB-0341230                               |
| Subaward No        | 18749-                                    |
| Subaward Amount    | \$0.00                                    |
| Subaward Type      | Contract: Purchase Order                  |
| Subrecipient Name  | Cape Pharmacy                             |
| Expenditure Start  | 7/1/2022                                  |
| Expenditure End    | 9/30/2022                                 |
| Expenditure Amount | \$0.00                                    |

#### Expenditure: EN-00625563

| Project Name       | DHSS Vaccine Booster for Homebound Adults |
|--------------------|---|
| Subaward ID        | SUB-0222443                               |
| Subaward No        | 35-1400-2022-64                           |
| Subaward Amount    | \$0.00                                    |
| Subaward Type      | Contract: Purchase Order                  |
| Subrecipient Name  | Laurel Health Services                    |
| Expenditure Start  | 7/1/2022                                  |
| Expenditure End    | 9/30/2022                                 |
| Expenditure Amount | \$1,170.00                                |

## Expenditure: EN-00625561

| Project Name       | DHSS Vaccine Booster for Homebound Adults |
|--------------------|---|
| Subaward ID        | SUB-0222439                               |
| Subaward No        | 35-1400-2022-67                           |
| Subaward Amount    | \$0.00                                    |
| Subaward Type      | Contract: Purchase Order                  |
| Subrecipient Name  | Laurel Health Services                    |
| Expenditure Start  | 7/1/2022                                  |
| Expenditure End    | 9/30/2022                                 |
| Expenditure Amount | (\$2,700.00)                              |

| Project Name       | DHSS Vaccine Booster for Homebound Adults |
|--------------------|---|
| Subaward ID        | SUB-0222439                               |
| Subaward No        | 35-1400-2022-67                           |
| Subaward Amount    | \$0.00                                    |
| Subaward Type      | Contract: Purchase Order                  |
| Subrecipient Name  | Laurel Health Services                    |
| Expenditure Start  | 3/1/2022                                  |
| Expenditure End    | 3/28/2022                                 |
| Expenditure Amount | \$0.00                                    |

| Project Name       | DHSS Vaccine Booster for Homebound Adults |
|--------------------|---|
| Subaward ID        | SUB-0341230                               |
| Subaward No        | 18749-                                    |
| Subaward Amount    | \$0.00                                    |
| Subaward Type      | Contract: Purchase Order                  |
| Subrecipient Name  | Cape Pharmacy                             |
| Expenditure Start  | 4/1/2022                                  |
| Expenditure End    | 6/30/2022                                 |
| Expenditure Amount | \$828.75                                  |

## Expenditure: EN-00441316

| Project Name       | DHSS Vaccine Booster for Homebound Adults |
|--------------------|---|
| Subaward ID        | SUB-0222443                               |
| Subaward No        | 35-1400-2022-64                           |
| Subaward Amount    | \$0.00                                    |
| Subaward Type      | Contract: Purchase Order                  |
| Subrecipient Name  | Laurel Health Services                    |
| Expenditure Start  | 4/1/2022                                  |
| Expenditure End    | 6/30/2022                                 |
| Expenditure Amount | \$1,530.00                                |

| Project Name | DHSS Vaccine Booster for Homebound Adults |
|--------------|---|
| Subaward ID  | SUB-0341237                               |
| Subaward No  | 18749-187529                              |
|              |   |

| Subaward Amount    | \$0.00                   |
|--------------------|--------------------------|
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | Civic Health Services    |
| Expenditure Start  | 4/1/2022                 |
| Expenditure End    | 6/30/2022                |
| Expenditure Amount | \$120.00                 |

| Project Name       | DHSS Federally Qualified Health Care Fund |
|--------------------|---|
| Subaward ID        | SUB-0221848                               |
| Subaward No        | 44  |
| Subaward Amount    | \$2,500,000.00                            |
| Subaward Type      | Grant: Lump Sum Payment(s)                |
| Subrecipient Name  | Westside Family Healthcare                |
| Expenditure Start  | 2/1/2022                                  |
| Expenditure End    | 2/1/2022                                  |
| Expenditure Amount | \$2,500,000.00                            |

#### Expenditure: EN-00332509

| Project Name       | DHSS Federally Qualified Health Care Fund |
|--------------------|---|
| Subaward ID        | SUB-0221847                               |
| Subaward No        | 3292                                      |
| Subaward Amount    | \$2,000,000.00                            |
| Subaward Type      | Grant: Lump Sum Payment(s)                |
| Subrecipient Name  | La Red Health Center                      |
| Expenditure Start  | 2/1/2022                                  |
| Expenditure End    | 2/1/2022                                  |
| Expenditure Amount | \$2,000,000.00                            |

| Project Name      | DHSS Early Childhood Testing |
|-------------------|------------------------------|
| Subaward ID       | SUB-0441144                  |
| Subaward No       | 18872-261559                 |
| Subaward Amount   | \$0.00                       |
| Subaward Type     | Grant: Lump Sum Payment(s)   |
| Subrecipient Name | QUIDEL CORP                  |
| Expenditure Start | 10/1/2023                    |
|                   |                              |

| Expenditure End    | 12/31/2023    |
|--------------------|---------------|
| Expenditure Amount | (\$86,203.00) |

| Project Name       | DHSS Early Childhood Testing |
|--------------------|------------------------------|
| Subaward ID        | SUB-0441144                  |
| Subaward No        | 18872-261559                 |
| Subaward Amount    | \$0.00                       |
| Subaward Type      | Grant: Lump Sum Payment(s)   |
| Subrecipient Name  | QUIDEL CORP                  |
| Expenditure Start  | 7/20/2022                    |
| Expenditure End    | 9/30/2022                    |
| Expenditure Amount | \$86,203.00                  |

## Expenditure: EN-00799433

| Project Name       | DHSS Pregnancy Housing      |
|--------------------|-----------------------------|
| Subaward ID        | SUB-0441105                 |
| Subaward No        | 18874-22700                 |
| Subaward Amount    | \$1,272,726.77              |
| Subaward Type      | Contract: Purchase Order    |
| Subrecipient Name  | HEALTH MANAGEMENT ASSOC INC |
| Expenditure Start  | 10/1/2022                   |
| Expenditure End    | 12/31/2022                  |
| Expenditure Amount | \$126,000.00                |

#### Expenditure: EN-01181236

| Project Name       | DHSS Pregnancy Housing      |
|--------------------|-----------------------------|
| Subaward ID        | SUB-0441105                 |
| Subaward No        | 18874-22700                 |
| Subaward Amount    | \$1,272,726.77              |
| Subaward Type      | Contract: Purchase Order    |
| Subrecipient Name  | HEALTH MANAGEMENT ASSOC INC |
| Expenditure Start  | 1/1/2023                    |
| Expenditure End    | 3/31/2023                   |
| Expenditure Amount | \$246,353.68                |

| Project Name       | DHSS Pregnancy Housing      |
|--------------------|-----------------------------|
| Subaward ID        | SUB-0441105                 |
| Subaward No        | 18874-22700                 |
| Subaward Amount    | \$1,272,726.77              |
| Subaward Type      | Contract: Purchase Order    |
| Subrecipient Name  | HEALTH MANAGEMENT ASSOC INC |
| Expenditure Start  | 4/30/2023                   |
| Expenditure End    | 6/30/2023                   |
| Expenditure Amount | \$86,623.20                 |

| Project Name       | DHSS Pregnancy Housing      |
|--------------------|-----------------------------|
| Subaward ID        | SUB-0441105                 |
| Subaward No        | 18874-22700                 |
| Subaward Amount    | \$1,272,726.77              |
| Subaward Type      | Contract: Purchase Order    |
| Subrecipient Name  | HEALTH MANAGEMENT ASSOC INC |
| Expenditure Start  | 7/1/2023                    |
| Expenditure End    | 9/30/2023                   |
| Expenditure Amount | \$145,896.83                |

## Expenditure: EN-01920730

| Project Name       | DHSS Pregnancy Housing      |
|--------------------|-----------------------------|
| Subaward ID        | SUB-0441105                 |
| Subaward No        | 18874-22700                 |
| Subaward Amount    | \$1,272,726.77              |
| Subaward Type      | Contract: Purchase Order    |
| Subrecipient Name  | HEALTH MANAGEMENT ASSOC INC |
| Expenditure Start  | 10/1/2023                   |
| Expenditure End    | 12/31/2023                  |
| Expenditure Amount | \$165,502.67                |

| Project Name    | OGOV Administrative Costs & Overhead |
|-----------------|--------------------------------------|
| Subaward ID     | SUB-0618008                          |
| Subaward No     | 18637-649221                         |
| Subaward Amount | \$282,154.50                         |
|                 |                                      |

| Subaward Type      | Contract: Purchase Order |
|--------------------|--------------------------|
| Subrecipient Name  | UHY Advisors Inc         |
| Expenditure Start  | 9/1/2022                 |
| Expenditure End    | 3/31/2023                |
| Expenditure Amount | \$10,262.50              |

| Project Name       | OGOV Administrative Costs & Overhead |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0618004                          |
| Subaward No        | 18637-76974                          |
| Subaward Amount    | \$173,935.50                         |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | BDO USA LLP                          |
| Expenditure Start  | 9/1/2022                             |
| Expenditure End    | 3/31/2023                            |
| Expenditure Amount | \$15,993.00                          |

## Expenditure: EN-01215693

| Project Name       | OGOV Administrative Costs & Overhead |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0618007                          |
| Subaward No        | 18637-649525                         |
| Subaward Amount    | \$159,444.33                         |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | Booth Management Consulting, LLC     |
| Expenditure Start  | 9/1/2022                             |
| Expenditure End    | 3/31/2023                            |
| Expenditure Amount | \$17,128.00                          |

| Project Name      | OGOV Administrative Costs & Overhead |
|-------------------|--------------------------------------|
| Subaward ID       | SUB-0618011                          |
| Subaward No       | 18637-208766                         |
| Subaward Amount   | \$80,499.83                          |
| Subaward Type     | Contract: Purchase Order             |
| Subrecipient Name | SILVER LAKE REALTY LLC               |
| Expenditure Start | 1/1/2022                             |
| Expenditure End   | 3/31/2023                            |
|                   |                                      |

| Project Name       | OGOV Administrative Costs & Overhead |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0618011                          |
| Subaward No        | 18637-208766                         |
| Subaward Amount    | \$80,499.83                          |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | SILVER LAKE REALTY LLC               |
| Expenditure Start  | 4/1/2023                             |
| Expenditure End    | 6/30/2023                            |
| Expenditure Amount | \$10,554.51                          |

#### Expenditure: EN-01616615

| Project Name       | OGOV Administrative Costs & Overhead |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0618004                          |
| Subaward No        | 18637-76974                          |
| Subaward Amount    | \$173,935.50                         |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | BDO USA LLP                          |
| Expenditure Start  | 4/1/2023                             |
| Expenditure End    | 6/30/2023                            |
| Expenditure Amount | \$17,581.00                          |

#### Expenditure: EN-01616617

| Project Name       | OGOV Administrative Costs & Overhead |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0618007                          |
| Subaward No        | 18637-649525                         |
| Subaward Amount    | \$159,444.33                         |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | Booth Management Consulting, LLC     |
| Expenditure Start  | 4/1/2023                             |
| Expenditure End    | 6/30/2023                            |
| Expenditure Amount | \$26,980.09                          |

| Project Name | OGOV Administrative Costs & Overhead |
|--------------|--------------------------------------|
|              |                                      |

| Subaward ID        | SUB-0618008              |
|--------------------|--------------------------|
| Subaward No        | 18637-649221             |
| Subaward Amount    | \$282,154.50             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | UHY Advisors Inc         |
| Expenditure Start  | 4/1/2023                 |
| Expenditure End    | 6/30/2023                |
| Expenditure Amount | \$119,737.50             |

| Project Name       | OGOV Administrative Costs & Overhead |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0618006                          |
| Subaward No        | 18637-599219                         |
| Subaward Amount    | \$129,473.75                         |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | BERRY DUNN MCNEIL AND PARKER LLC     |
| Expenditure Start  | 7/1/2023                             |
| Expenditure End    | 9/30/2023                            |
| Expenditure Amount | \$92,440.75                          |

# Expenditure: EN-01777597

| Project Name       | OGOV Administrative Costs & Overhead |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0618011                          |
| Subaward No        | 18637-208766                         |
| Subaward Amount    | \$80,499.83                          |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | SILVER LAKE REALTY LLC               |
| Expenditure Start  | 7/1/2023                             |
| Expenditure End    | 9/30/2023                            |
| Expenditure Amount | \$10,554.51                          |

| Project Name    | OGOV Administrative Costs & Overhead |
|-----------------|--------------------------------------|
| Subaward ID     | SUB-0618004                          |
| Subaward No     | 18637-76974                          |
| Subaward Amount | \$173,935.50                         |
| Subaward Type   | Contract: Purchase Order             |
|                 |                                      |

| Subrecipient Name  | BDO USA LLP |
|--------------------|-------------|
| Expenditure Start  | 7/1/2023    |
| Expenditure End    | 9/30/2023   |
| Expenditure Amount | \$76,617.00 |

| Project Name       | OGOV Administrative Costs & Overhead |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0618007                          |
| Subaward No        | 18637-649525                         |
| Subaward Amount    | \$159,444.33                         |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | Booth Management Consulting, LLC     |
| Expenditure Start  | 7/1/2023                             |
| Expenditure End    | 9/30/2023                            |
| Expenditure Amount | \$92,406.33                          |

## Expenditure: EN-01917120

| Project Name       | OGOV Administrative Costs & Overhead |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0618006                          |
| Subaward No        | 18637-599219                         |
| Subaward Amount    | \$129,473.75                         |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | BERRY DUNN MCNEIL AND PARKER LLC     |
| Expenditure Start  | 10/1/2023                            |
| Expenditure End    | 12/31/2023                           |
| Expenditure Amount | \$37,033.00                          |

| Project Name       | OGOV Administrative Costs & Overhead |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0618011                          |
| Subaward No        | 18637-208766                         |
| Subaward Amount    | \$80,499.83                          |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | SILVER LAKE REALTY LLC               |
| Expenditure Start  | 10/1/2023                            |
| Expenditure End    | 12/31/2023                           |
| Expenditure Amount | \$7,036.34                           |

| Project Name       | OGOV Administrative Costs & Overhead |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0618004                          |
| Subaward No        | 18637-76974                          |
| Subaward Amount    | \$173,935.50                         |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | BDO USA LLP                          |
| Expenditure Start  | 10/1/2023                            |
| Expenditure End    | 12/31/2023                           |
| Expenditure Amount | \$63,744.50                          |

## Expenditure: EN-01917122

| Project Name       | OGOV Administrative Costs & Overhead |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0618007                          |
| Subaward No        | 18637-649525                         |
| Subaward Amount    | \$159,444.33                         |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | Booth Management Consulting, LLC     |
| Expenditure Start  | 10/1/2023                            |
| Expenditure End    | 12/31/2023                           |
| Expenditure Amount | \$22,929.91                          |

#### Expenditure: EN-01917124

| Project Name       | OGOV Administrative Costs & Overhead |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0618008                          |
| Subaward No        | 18637-649221                         |
| Subaward Amount    | \$282,154.50                         |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | UHY Advisors Inc                     |
| Expenditure Start  | 10/1/2023                            |
| Expenditure End    | 12/31/2023                           |
| Expenditure Amount | \$152,154.50                         |

| Project Name | DHSS Meals, Meal Delivery, Case Management |
|--------------|--|
| Subaward ID  | SUB-0222467                                |
|              |  |

| Subaward No        | 502453          |
|--------------------|-----------------|
| Subaward Amount    | \$149,651.00    |
| Subaward Type      | Direct Payment  |
| Subrecipient Name  | Campus Cafe LLC |
| Expenditure Start  | 1/1/2023        |
| Expenditure End    | 3/31/2023       |
| Expenditure Amount | \$176,677.79    |

| Project Name       | DHSS Meals, Meal Delivery, Case Management |
|--------------------|--|
| Subaward ID        | SUB-0441108                                |
| Subaward No        | 18955-197556                               |
| Subaward Amount    | \$130,177.32                               |
| Subaward Type      | Direct Payment                             |
| Subrecipient Name  | Business Interface of Maryland             |
| Expenditure Start  | 1/1/2023                                   |
| Expenditure End    | 3/31/2023                                  |
| Expenditure Amount | \$13,084.78                                |

## Expenditure: EN-01181252

| Project Name       | DHSS Meals, Meal Delivery, Case Management |
|--------------------|--|
| Subaward ID        | SUB-0441112                                |
| Subaward No        | 18955-24324                                |
| Subaward Amount    | \$566,692.47                               |
| Subaward Type      | Direct Payment                             |
| Subrecipient Name  | Goodwill DE and DE County                  |
| Expenditure Start  | 1/1/2023                                   |
| Expenditure End    | 3/31/2023                                  |
| Expenditure Amount | \$147,360.21                               |

| Project Name      | DHSS Meals, Meal Delivery, Case Management |
|-------------------|--|
| Subaward ID       | SUB-0441108                                |
| Subaward No       | 18955-197556                               |
| Subaward Amount   | \$130,177.32                               |
| Subaward Type     | Direct Payment                             |
| Subrecipient Name | Business Interface of Maryland             |
|                   |  |

| Expenditure Start  | 4/1/2023    |
|--------------------|-------------|
| Expenditure End    | 6/30/2023   |
| Expenditure Amount | \$20,351.20 |

| Project Name       | DHSS Meals, Meal Delivery, Case Management |
|--------------------|--|
| Subaward ID        | SUB-0222467                                |
| Subaward No        | 502453                                     |
| Subaward Amount    | \$149,651.00                               |
| Subaward Type      | Direct Payment                             |
| Subrecipient Name  | Campus Cafe LLC                            |
| Expenditure Start  | 4/1/2023                                   |
| Expenditure End    | 6/30/2023                                  |
| Expenditure Amount | (\$176,677.79)                             |

#### Expenditure: EN-01614048

| Project Name       | DHSS Meals, Meal Delivery, Case Management |
|--------------------|--|
| Subaward ID        | SUB-0441112                                |
| Subaward No        | 18955-24324                                |
| Subaward Amount    | \$566,692.47                               |
| Subaward Type      | Direct Payment                             |
| Subrecipient Name  | Goodwill DE and DE County                  |
| Expenditure Start  | 4/1/2023                                   |
| Expenditure End    | 6/30/2023                                  |
| Expenditure Amount | \$150,732.53                               |

## Expenditure: EN-00624528

| Project Name       | DHSS Meals, Meal Delivery, Case Management |
|--------------------|--|
| Subaward ID        | SUB-0222467                                |
| Subaward No        | 502453                                     |
| Subaward Amount    | \$149,651.00                               |
| Subaward Type      | Direct Payment                             |
| Subrecipient Name  | Campus Cafe LLC                            |
| Expenditure Start  | 7/1/2022                                   |
| Expenditure End    | 9/30/2022                                  |
| Expenditure Amount | (\$926,636.00)                             |

| Project Name       | DHSS Meals, Meal Delivery, Case Management |
|--------------------|--|
| Subaward ID        | SUB-0441108                                |
| Subaward No        | 18955-197556                               |
| Subaward Amount    | \$130,177.32                               |
| Subaward Type      | Direct Payment                             |
| Subrecipient Name  | Business Interface of Maryland             |
| Expenditure Start  | 7/1/2022                                   |
| Expenditure End    | 9/30/2022                                  |
| Expenditure Amount | \$96,741.34                                |

| Project Name       | DHSS Meals, Meal Delivery, Case Management |
|--------------------|--|
| Subaward ID        | SUB-0441112                                |
| Subaward No        | 18955-24324                                |
| Subaward Amount    | \$566,692.47                               |
| Subaward Type      | Direct Payment                             |
| Subrecipient Name  | Goodwill DE and DE County                  |
| Expenditure Start  | 7/1/2022                                   |
| Expenditure End    | 9/30/2022                                  |
| Expenditure Amount | \$268,599.73                               |

## Expenditure: EN-00333172

| Project Name       | DHSS Meals, Meal Delivery, Case Management |
|--------------------|--|
| Subaward ID        | SUB-0222467                                |
| Subaward No        | 502453                                     |
| Subaward Amount    | \$149,651.00                               |
| Subaward Type      | Direct Payment                             |
| Subrecipient Name  | Campus Cafe LLC                            |
| Expenditure Start  | 3/1/2022                                   |
| Expenditure End    | 3/1/2022                                   |
| Expenditure Amount | \$1,076,287.00                             |

| Project Name | DOL Operational Expenses |
|--------------|--------------------------|
| Subaward ID  | SUB-0333174              |
| Subaward No  | 18869-288188             |
|              |                          |

| Subaward Amount    | \$6,838,757.46    |
|--------------------|-------------------|
| Subaward Type      | Direct Payment    |
| Subrecipient Name  | ACRO SERVICE CORP |
| Expenditure Start  | 10/1/2022         |
| Expenditure End    | 12/31/2022        |
| Expenditure Amount | \$1,116,154.43    |

| Project Name       | DOL Operational Expenses |
|--------------------|--------------------------|
| Subaward ID        | SUB-0333177              |
| Subaward No        | 18869-549012             |
| Subaward Amount    | \$1,897,947.59           |
| Subaward Type      | Direct Payment           |
| Subrecipient Name  | ROI SOLUTIONS LLC        |
| Expenditure Start  | 10/1/2022                |
| Expenditure End    | 12/31/2022               |
| Expenditure Amount | \$82,643.92              |

#### Expenditure: EN-00809781

| Project Name       | DOL Operational Expenses   |
|--------------------|----------------------------|
| Subaward ID        | SUB-0333180                |
| Subaward No        | 18869-26950                |
| Subaward Amount    | \$1,366,082.55             |
| Subaward Type      | Direct Payment             |
| Subrecipient Name  | DELMARVA TEMP STAFFING INC |
| Expenditure Start  | 10/1/2022                  |
| Expenditure End    | 12/31/2022                 |
| Expenditure Amount | \$188,625.72               |

| Project Name      | DOL Operational Expenses |
|-------------------|--------------------------|
| Subaward ID       | SUB-0333184              |
| Subaward No       | 18869-553545             |
| Subaward Amount   | \$138,000.00             |
| Subaward Type     | Direct Payment           |
| Subrecipient Name | SAGITEC SOLUTIONS LLC    |
| Expenditure Start | 10/1/2022                |
|                   |                          |

| Expenditure End    | 12/31/2022  |
|--------------------|-------------|
| Expenditure Amount | \$46,000.00 |

| Project Name       | DOL Operational Expenses  |
|--------------------|---------------------------|
| Subaward ID        | SUB-0333188               |
| Subaward No        | 18869-24324               |
| Subaward Amount    | \$1,078,672.40            |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | Goodwill DE and DE County |
| Expenditure Start  | 10/1/2022                 |
| Expenditure End    | 12/31/2022                |
| Expenditure Amount | \$120,403.20              |

#### Expenditure: EN-00810021

| Project Name       | DOL Operational Expenses |
|--------------------|--------------------------|
| Subaward ID        | SUB-0333557              |
| Subaward No        | 18869-18102              |
| Subaward Amount    | \$1,414,314.07           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | COMPUTER AID INC         |
| Expenditure Start  | 10/1/2022                |
| Expenditure End    | 12/31/2022               |
| Expenditure Amount | \$379,453.56             |

#### Expenditure: EN-00810024

| Project Name       | DOL Operational Expenses         |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0333558                      |
| Subaward No        | 18869-133149                     |
| Subaward Amount    | \$324,873.77                     |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | CARAHSOFT TECHNOLOGY CORPORATION |
| Expenditure Start  | 10/1/2022                        |
| Expenditure End    | 12/30/2022                       |
| Expenditure Amount | \$19,452.60                      |

| Project Name       | DOL Operational Expenses |
|--------------------|--------------------------|
| Subaward ID        | SUB-0448859              |
| Subaward No        | 18869-503554             |
| Subaward Amount    | \$1,052,235.00           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | ROCKFORD CHAPMAN LLC     |
| Expenditure Start  | 10/1/2022                |
| Expenditure End    | 12/31/2022               |
| Expenditure Amount | \$323,448.22             |

| Project Name       | DOL Operational Expenses               |
|--------------------|--|
| Subaward ID        | SUB-0448921                            |
| Subaward No        | 18869-26637                            |
| Subaward Amount    | \$107,444.83                           |
| Subaward Type      | Contract: Purchase Order               |
| Subrecipient Name  | DELAWARE ASSOCIATION OF REHABILITATION |
| Expenditure Start  | 10/1/2022                              |
| Expenditure End    | 12/31/2022                             |
| Expenditure Amount | \$1,105.11                             |

## Expenditure: EN-00810030

| Project Name       | DOL Operational Expenses |
|--------------------|--------------------------|
| Subaward ID        | SUB-0448897              |
| Subaward No        | 18869-641094             |
| Subaward Amount    | \$74,000.00              |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | CX PARTNER SOURCE        |
| Expenditure Start  | 10/1/2022                |
| Expenditure End    | 12/31/2022               |
| Expenditure Amount | \$4,000.00               |

| Project Name    | DOL Operational Expenses |
|-----------------|--------------------------|
| Subaward ID     | SUB-0333174              |
| Subaward No     | 18869-288188             |
| Subaward Amount | \$6,838,757.46           |
|                 |                          |

| Subaward Type      | Direct Payment    |
|--------------------|-------------------|
| Subrecipient Name  | ACRO SERVICE CORP |
| Expenditure Start  | 1/1/2023          |
| Expenditure End    | 3/31/2023         |
| Expenditure Amount | \$963,469.84      |

| Project Name       | DOL Operational Expenses   |
|--------------------|----------------------------|
| Subaward ID        | SUB-0333180                |
| Subaward No        | 18869-26950                |
| Subaward Amount    | \$1,366,082.55             |
| Subaward Type      | Direct Payment             |
| Subrecipient Name  | DELMARVA TEMP STAFFING INC |
| Expenditure Start  | 1/1/2023                   |
| Expenditure End    | 3/31/2023                  |
| Expenditure Amount | \$175,098.56               |

# Expenditure: EN-01174201

| Project Name       | DOL Operational Expenses |
|--------------------|--------------------------|
| Subaward ID        | SUB-0333184              |
| Subaward No        | 18869-553545             |
| Subaward Amount    | \$138,000.00             |
| Subaward Type      | Direct Payment           |
| Subrecipient Name  | SAGITEC SOLUTIONS LLC    |
| Expenditure Start  | 1/1/2023                 |
| Expenditure End    | 3/31/2023                |
| Expenditure Amount | \$73,600.00              |

| Project Name      | DOL Operational Expenses  |
|-------------------|---------------------------|
| Subaward ID       | SUB-0333188               |
| Subaward No       | 18869-24324               |
| Subaward Amount   | \$1,078,672.40            |
| Subaward Type     | Contract: Purchase Order  |
| Subrecipient Name | Goodwill DE and DE County |
| Expenditure Start | 1/1/2023                  |
| Expenditure End   | 3/31/2023                 |
| <br>I             |                           |

| Project Name       | DOL Operational Expenses |
|--------------------|--------------------------|
| Subaward ID        | SUB-0333557              |
| Subaward No        | 18869-18102              |
| Subaward Amount    | \$1,414,314.07           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | COMPUTER AID INC         |
| Expenditure Start  | 1/1/2023                 |
| Expenditure End    | 3/31/2023                |
| Expenditure Amount | \$290,399.94             |

#### Expenditure: EN-01174207

| Project Name       | DOL Operational Expenses         |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0333558                      |
| Subaward No        | 18869-133149                     |
| Subaward Amount    | \$324,873.77                     |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | CARAHSOFT TECHNOLOGY CORPORATION |
| Expenditure Start  | 1/1/2023                         |
| Expenditure End    | 3/31/2023                        |
| Expenditure Amount | \$30,960.45                      |

#### Expenditure: EN-01174208

| Project Name       | DOL Operational Expenses |
|--------------------|--------------------------|
| Subaward ID        | SUB-0333560              |
| Subaward No        | 18869-302906             |
| Subaward Amount    | \$311,317.31             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | AUM TECH INCORPORATED    |
| Expenditure Start  | 1/1/2023                 |
| Expenditure End    | 3/31/2023                |
| Expenditure Amount | \$108,088.09             |

| Project Name | DOL Operational Expenses |
|--------------|--------------------------|
|              |                          |

| Subaward ID        | SUB-0448859              |
|--------------------|--------------------------|
| Subaward No        | 18869-503554             |
| Subaward Amount    | \$1,052,235.00           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | ROCKFORD CHAPMAN LLC     |
| Expenditure Start  | 1/1/2023                 |
| Expenditure End    | 3/31/2023                |
| Expenditure Amount | \$134,864.66             |

| Project Name       | DOL Operational Expenses |
|--------------------|--------------------------|
| Subaward ID        | SUB-0333574              |
| Subaward No        | 18869-630696             |
| Subaward Amount    | \$200,000.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | RUSSELL ALLEN PARTNERS   |
| Expenditure Start  | 1/1/2023                 |
| Expenditure End    | 3/31/2023                |
| Expenditure Amount | \$70,000.00              |

## Expenditure: EN-01174212

| Project Name       | DOL Operational Expenses |
|--------------------|--------------------------|
| Subaward ID        | SUB-0548889              |
| Subaward No        | 18869-373                |
| Subaward Amount    | \$67,559.50              |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | G A Blanco and Sons Inc  |
| Expenditure Start  | 1/1/2023                 |
| Expenditure End    | 3/31/2023                |
| Expenditure Amount | \$67,559.50              |

| Project Name    | DOL Operational Expenses |
|-----------------|--------------------------|
| Subaward ID     | SUB-0333188              |
| Subaward No     | 18869-24324              |
| Subaward Amount | \$1,078,672.40           |
| Subaward Type   | Contract: Purchase Order |
|                 |                          |

| Subrecipient Name  | Goodwill DE and DE County |
|--------------------|---------------------------|
| Expenditure Start  | 4/1/2023                  |
| Expenditure End    | 6/30/2023                 |
| Expenditure Amount | \$123,174.75              |

| Project Name       | DOL Operational Expenses |
|--------------------|--------------------------|
| Subaward ID        | SUB-0333574              |
| Subaward No        | 18869-630696             |
| Subaward Amount    | \$200,000.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | RUSSELL ALLEN PARTNERS   |
| Expenditure Start  | 4/1/2023                 |
| Expenditure End    | 6/30/2023                |
| Expenditure Amount | \$35,000.00              |

## Expenditure: EN-01615331

| Project Name       | DOL Operational Expenses             |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0605429                          |
| Subaward No        | 18869-630238                         |
| Subaward Amount    | \$305,987.25                         |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | GUIDESOFT INC DBA KNOWLEDGE SERVICES |
| Expenditure Start  | 4/1/2023                             |
| Expenditure End    | 6/30/2023                            |
| Expenditure Amount | \$20,109.50                          |

| Project Name       | DOL Operational Expenses |
|--------------------|--------------------------|
| Subaward ID        | SUB-0448859              |
| Subaward No        | 18869-503554             |
| Subaward Amount    | \$1,052,235.00           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | ROCKFORD CHAPMAN LLC     |
| Expenditure Start  | 4/1/2023                 |
| Expenditure End    | 6/30/2023                |
| Expenditure Amount | \$100,156.75             |

| Project Name       | DOL Operational Expenses |
|--------------------|--------------------------|
| Subaward ID        | SUB-0333174              |
| Subaward No        | 18869-288188             |
| Subaward Amount    | \$6,838,757.46           |
| Subaward Type      | Direct Payment           |
| Subrecipient Name  | ACRO SERVICE CORP        |
| Expenditure Start  | 4/1/2023                 |
| Expenditure End    | 6/30/2023                |
| Expenditure Amount | \$1,019,799.16           |

## Expenditure: EN-01615323

| Project Name       | DOL Operational Expenses   |
|--------------------|----------------------------|
| Subaward ID        | SUB-0333180                |
| Subaward No        | 18869-26950                |
| Subaward Amount    | \$1,366,082.55             |
| Subaward Type      | Direct Payment             |
| Subrecipient Name  | DELMARVA TEMP STAFFING INC |
| Expenditure Start  | 4/1/2023                   |
| Expenditure End    | 6/30/2023                  |
| Expenditure Amount | \$156,715.99               |

#### Expenditure: EN-01615325

| Project Name       | DOL Operational Expenses |
|--------------------|--------------------------|
| Subaward ID        | SUB-0333557              |
| Subaward No        | 18869-18102              |
| Subaward Amount    | \$1,414,314.07           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | COMPUTER AID INC         |
| Expenditure Start  | 4/1/2023                 |
| Expenditure End    | 6/30/2023                |
| Expenditure Amount | \$294,544.26             |

| Project Name | DOL Operational Expenses |
|--------------|--------------------------|
| Subaward ID  | SUB-0333558              |
|              |                          |

| Subaward No        | 18869-133149                     |
|--------------------|----------------------------------|
| Subaward Amount    | \$324,873.77                     |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | CARAHSOFT TECHNOLOGY CORPORATION |
| Expenditure Start  | 4/1/2023                         |
| Expenditure End    | 6/30/2023                        |
| Expenditure Amount | \$18,826.65                      |

| Project Name       | DOL Operational Expenses |
|--------------------|--------------------------|
| Subaward ID        | SUB-0333557              |
| Subaward No        | 18869-18102              |
| Subaward Amount    | \$1,414,314.07           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | COMPUTER AID INC         |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$108,837.50             |

# Expenditure: EN-01799703

| Project Name       | DOL Operational Expenses |
|--------------------|--------------------------|
| Subaward ID        | SUB-0796713              |
| Subaward No        | 18869-401860             |
| Subaward Amount    | \$69,749.51              |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | EXPRESS SERVICES         |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$59,715.05              |

| Project Name      | DOL Operational Expenses             |
|-------------------|--------------------------------------|
| Subaward ID       | SUB-0605429                          |
| Subaward No       | 18869-630238                         |
| Subaward Amount   | \$305,987.25                         |
| Subaward Type     | Contract: Purchase Order             |
| Subrecipient Name | GUIDESOFT INC DBA KNOWLEDGE SERVICES |
|                   |                                      |

| Expenditure Start  | 7/1/2023    |
|--------------------|-------------|
| Expenditure End    | 9/30/2023   |
| Expenditure Amount | \$13,301.50 |

| Project Name       | DOL Operational Expenses |
|--------------------|--------------------------|
| Subaward ID        | SUB-0333184              |
| Subaward No        | 18869-553545             |
| Subaward Amount    | \$138,000.00             |
| Subaward Type      | Direct Payment           |
| Subrecipient Name  | SAGITEC SOLUTIONS LLC    |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | (\$607,857.00)           |

#### Expenditure: EN-01799708

| Project Name       | DOL Operational Expenses         |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0333558                      |
| Subaward No        | 18869-133149                     |
| Subaward Amount    | \$324,873.77                     |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | CARAHSOFT TECHNOLOGY CORPORATION |
| Expenditure Start  | 7/1/2023                         |
| Expenditure End    | 9/30/2023                        |
| Expenditure Amount | \$23,882.40                      |

## Expenditure: EN-01799710

| Project Name       | DOL Operational Expenses |
|--------------------|--------------------------|
| Subaward ID        | SUB-0448859              |
| Subaward No        | 18869-503554             |
| Subaward Amount    | \$1,052,235.00           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | ROCKFORD CHAPMAN LLC     |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$106,978.08             |

| Project Name       | DOL Operational Expenses  |
|--------------------|---------------------------|
| Subaward ID        | SUB-0333188               |
| Subaward No        | 18869-24324               |
| Subaward Amount    | \$1,078,672.40            |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | Goodwill DE and DE County |
| Expenditure Start  | 7/1/2023                  |
| Expenditure End    | 9/30/2023                 |
| Expenditure Amount | \$160,409.31              |

| Project Name       | DOL Operational Expenses   |
|--------------------|----------------------------|
| Subaward ID        | SUB-0333180                |
| Subaward No        | 18869-26950                |
| Subaward Amount    | \$1,366,082.55             |
| Subaward Type      | Direct Payment             |
| Subrecipient Name  | DELMARVA TEMP STAFFING INC |
| Expenditure Start  | 7/1/2023                   |
| Expenditure End    | 9/30/2023                  |
| Expenditure Amount | \$147,561.93               |

## Expenditure: EN-01799716

| Project Name       | DOL Operational Expenses |
|--------------------|--------------------------|
| Subaward ID        | SUB-0333174              |
| Subaward No        | 18869-288188             |
| Subaward Amount    | \$6,838,757.46           |
| Subaward Type      | Direct Payment           |
| Subrecipient Name  | ACRO SERVICE CORP        |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$607,628.26             |

| Project Name | DOL Operational Expenses |
|--------------|--------------------------|
| Subaward ID  | SUB-0333180              |
| Subaward No  | 18869-26950              |
|              |                          |

| Subaward Amount    | \$1,366,082.55             |
|--------------------|----------------------------|
| Subaward Type      | Direct Payment             |
| Subrecipient Name  | DELMARVA TEMP STAFFING INC |
| Expenditure Start  | 10/1/2023                  |
| Expenditure End    | 12/31/2023                 |
| Expenditure Amount | \$128,897.90               |

| Project Name       | DOL Operational Expenses |
|--------------------|--------------------------|
| Subaward ID        | SUB-0796713              |
| Subaward No        | 18869-401860             |
| Subaward Amount    | \$69,749.51              |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | EXPRESS SERVICES         |
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$10,034.46              |

#### Expenditure: EN-01912851

| Project Name       | DOL Operational Expenses             |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0605429                          |
| Subaward No        | 18869-630238                         |
| Subaward Amount    | \$305,987.25                         |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | GUIDESOFT INC DBA KNOWLEDGE SERVICES |
| Expenditure Start  | 10/1/2023                            |
| Expenditure End    | 12/31/2023                           |
| Expenditure Amount | \$272,576.25                         |

| Project Name      | DOL Operational Expenses         |
|-------------------|----------------------------------|
| Subaward ID       | SUB-0333558                      |
| Subaward No       | 18869-133149                     |
| Subaward Amount   | \$324,873.77                     |
| Subaward Type     | Contract: Purchase Order         |
| Subrecipient Name | CARAHSOFT TECHNOLOGY CORPORATION |
| Expenditure Start | 10/1/2023                        |
|                   |                                  |

| Expenditure End    | 12/31/2023  |
|--------------------|-------------|
| Expenditure Amount | \$60,014.70 |

| Project Name       | DOL Operational Expenses |
|--------------------|--------------------------|
| Subaward ID        | SUB-0333560              |
| Subaward No        | 18869-302906             |
| Subaward Amount    | \$311,317.31             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | AUM TECH INCORPORATED    |
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$39,234.70              |

#### Expenditure: EN-01912857

| Project Name       | DOL Operational Expenses |
|--------------------|--------------------------|
| Subaward ID        | SUB-0448859              |
| Subaward No        | 18869-503554             |
| Subaward Amount    | \$1,052,235.00           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | ROCKFORD CHAPMAN LLC     |
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$66,513.34              |

#### Expenditure: EN-01912859

| Project Name       | DOL Operational Expenses  |
|--------------------|---------------------------|
| Subaward ID        | SUB-0333188               |
| Subaward No        | 18869-24324               |
| Subaward Amount    | \$1,078,672.40            |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | Goodwill DE and DE County |
| Expenditure Start  | 10/1/2023                 |
| Expenditure End    | 12/31/2023                |
| Expenditure Amount | \$127,296.79              |

| Project Name       | DOL Operational Expenses |
|--------------------|--------------------------|
| Subaward ID        | SUB-0333174              |
| Subaward No        | 18869-288188             |
| Subaward Amount    | \$6,838,757.46           |
| Subaward Type      | Direct Payment           |
| Subrecipient Name  | ACRO SERVICE CORP        |
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$740,390.53             |

| Project Name       | DOL Operational Expenses |
|--------------------|--------------------------|
| Subaward ID        | SUB-0333174              |
| Subaward No        | 18869-288188             |
| Subaward Amount    | \$6,838,757.46           |
| Subaward Type      | Direct Payment           |
| Subrecipient Name  | ACRO SERVICE CORP        |
| Expenditure Start  | 7/1/2022                 |
| Expenditure End    | 9/3/2022                 |
| Expenditure Amount | \$1,088,622.32           |

## Expenditure: EN-00629002

| Project Name       | DOL Operational Expenses |
|--------------------|--------------------------|
| Subaward ID        | SUB-0333177              |
| Subaward No        | 18869-549012             |
| Subaward Amount    | \$1,897,947.59           |
| Subaward Type      | Direct Payment           |
| Subrecipient Name  | ROI SOLUTIONS LLC        |
| Expenditure Start  | 7/1/2022                 |
| Expenditure End    | 9/30/2022                |
| Expenditure Amount | \$904,313.29             |

| Project Name    | DOL Operational Expenses |
|-----------------|--------------------------|
| Subaward ID     | SUB-0333180              |
| Subaward No     | 18869-26950              |
| Subaward Amount | \$1,366,082.55           |
|                 |                          |

| Subaward Type      | Direct Payment             |
|--------------------|----------------------------|
| Subrecipient Name  | DELMARVA TEMP STAFFING INC |
| Expenditure Start  | 7/1/2022                   |
| Expenditure End    | 9/30/2022                  |
| Expenditure Amount | \$209,909.97               |

| Project Name       | DOL Operational Expenses |
|--------------------|--------------------------|
| Subaward ID        | SUB-0333184              |
| Subaward No        | 18869-553545             |
| Subaward Amount    | \$138,000.00             |
| Subaward Type      | Direct Payment           |
| Subrecipient Name  | SAGITEC SOLUTIONS LLC    |
| Expenditure Start  | 7/1/2022                 |
| Expenditure End    | 9/30/2022                |
| Expenditure Amount | \$138,000.00             |

# Expenditure: EN-00629013

| Project Name       | DOL Operational Expenses  |
|--------------------|---------------------------|
| Subaward ID        | SUB-0333188               |
| Subaward No        | 18869-24324               |
| Subaward Amount    | \$1,078,672.40            |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | Goodwill DE and DE County |
| Expenditure Start  | 7/1/2022                  |
| Expenditure End    | 9/30/2022                 |
| Expenditure Amount | \$148,843.77              |

| Project Name      | DOL Operational Expenses |
|-------------------|--------------------------|
| Subaward ID       | SUB-0333557              |
| Subaward No       | 18869-18102              |
| Subaward Amount   | \$1,414,314.07           |
| Subaward Type     | Contract: Purchase Order |
| Subrecipient Name | COMPUTER AID INC         |
| Expenditure Start | 7/1/2022                 |
| Expenditure End   | 9/30/2022                |
|                   |                          |

| Project Name       | DOL Operational Expenses         |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0333558                      |
| Subaward No        | 18869-133149                     |
| Subaward Amount    | \$324,873.77                     |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | CARAHSOFT TECHNOLOGY CORPORATION |
| Expenditure Start  | 7/1/2022                         |
| Expenditure End    | 9/30/2022                        |
| Expenditure Amount | \$50,743.17                      |

#### Expenditure: EN-00629021

| Project Name       | DOL Operational Expenses |
|--------------------|--------------------------|
| Subaward ID        | SUB-0333560              |
| Subaward No        | 18869-302906             |
| Subaward Amount    | \$311,317.31             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | AUM TECH INCORPORATED    |
| Expenditure Start  | 7/1/2022                 |
| Expenditure End    | 9/30/2022                |
| Expenditure Amount | \$43,011.64              |

#### Expenditure: EN-00629024

| Project Name       | DOL Operational Expenses |
|--------------------|--------------------------|
| Subaward ID        | SUB-0333574              |
| Subaward No        | 18869-630696             |
| Subaward Amount    | \$200,000.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | RUSSELL ALLEN PARTNERS   |
| Expenditure Start  | 7/1/2022                 |
| Expenditure End    | 9/30/2022                |
| Expenditure Amount | \$45,000.00              |

| Project Name | DOL Operational Expenses |
|--------------|--------------------------|
|              |                          |

| Subaward ID        | SUB-0333562              |
|--------------------|--------------------------|
| Subaward No        | 18869-28172              |
| Subaward Amount    | \$80,000.00              |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | DIAMOND TECHNOLOGIES INC |
| Expenditure Start  | 7/1/2022                 |
| Expenditure End    | 9/30/2022                |
| Expenditure Amount | (\$8,600.00)             |

| Project Name       | DOL Operational Expenses |
|--------------------|--------------------------|
| Subaward ID        | SUB-0448859              |
| Subaward No        | 18869-503554             |
| Subaward Amount    | \$1,052,235.00           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | ROCKFORD CHAPMAN LLC     |
| Expenditure Start  | 7/1/2022                 |
| Expenditure End    | 9/30/2022                |
| Expenditure Amount | \$112,546.00             |

## Expenditure: EN-00634113

| Project Name       | DOL Operational Expenses               |
|--------------------|--|
| Subaward ID        | SUB-0448921                            |
| Subaward No        | 18869-26637                            |
| Subaward Amount    | \$107,444.83                           |
| Subaward Type      | Contract: Purchase Order               |
| Subrecipient Name  | DELAWARE ASSOCIATION OF REHABILITATION |
| Expenditure Start  | 7/1/2022                               |
| Expenditure End    | 9/30/2022                              |
| Expenditure Amount | \$106,339.72                           |

| Project Name    | DOL Operational Expenses |
|-----------------|--------------------------|
| Subaward ID     | SUB-0448897              |
| Subaward No     | 18869-641094             |
| Subaward Amount | \$74,000.00              |
| Subaward Type   | Contract: Purchase Order |
|                 |                          |

| Subrecipient Name  | CX PARTNER SOURCE |
|--------------------|-------------------|
| Expenditure Start  | 7/1/2022          |
| Expenditure End    | 9/30/2022         |
| Expenditure Amount | \$70,000.00       |

| Project Name       | DOL Operational Expenses |
|--------------------|--------------------------|
| Subaward ID        | SUB-0333174              |
| Subaward No        | 18869-288188             |
| Subaward Amount    | \$6,838,757.46           |
| Subaward Type      | Direct Payment           |
| Subrecipient Name  | ACRO SERVICE CORP        |
| Expenditure Start  | 4/1/2022                 |
| Expenditure End    | 6/30/2022                |
| Expenditure Amount | \$1,302,692.92           |

## Expenditure: EN-00432692

| Project Name       | DOL Operational Expenses |
|--------------------|--------------------------|
| Subaward ID        | SUB-0333177              |
| Subaward No        | 18869-549012             |
| Subaward Amount    | \$1,897,947.59           |
| Subaward Type      | Direct Payment           |
| Subrecipient Name  | ROI SOLUTIONS LLC        |
| Expenditure Start  | 4/1/2022                 |
| Expenditure End    | 6/30/2022                |
| Expenditure Amount | \$910,990.38             |

| Project Name       | DOL Operational Expenses   |
|--------------------|----------------------------|
| Subaward ID        | SUB-0333180                |
| Subaward No        | 18869-26950                |
| Subaward Amount    | \$1,366,082.55             |
| Subaward Type      | Direct Payment             |
| Subrecipient Name  | DELMARVA TEMP STAFFING INC |
| Expenditure Start  | 4/1/2022                   |
| Expenditure End    | 6/30/2022                  |
| Expenditure Amount | \$359,272.48               |

| Project Name       | DOL Operational Expenses |
|--------------------|--------------------------|
| Subaward ID        | SUB-0333184              |
| Subaward No        | 18869-553545             |
| Subaward Amount    | \$138,000.00             |
| Subaward Type      | Direct Payment           |
| Subrecipient Name  | SAGITEC SOLUTIONS LLC    |
| Expenditure Start  | 4/1/2022                 |
| Expenditure End    | 6/30/2022                |
| Expenditure Amount | \$350,257.00             |

## Expenditure: EN-00432699

| Project Name       | DOL Operational Expenses  |
|--------------------|---------------------------|
| Subaward ID        | SUB-0333188               |
| Subaward No        | 18869-24324               |
| Subaward Amount    | \$1,078,672.40            |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | Goodwill DE and DE County |
| Expenditure Start  | 4/1/2022                  |
| Expenditure End    | 6/30/2022                 |
| Expenditure Amount | \$275,825.82              |

#### Expenditure: EN-00432702

| Project Name       | DOL Operational Expenses |
|--------------------|--------------------------|
| Subaward ID        | SUB-0333557              |
| Subaward No        | 18869-18102              |
| Subaward Amount    | \$1,414,314.07           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | COMPUTER AID INC         |
| Expenditure Start  | 4/1/2022                 |
| Expenditure End    | 6/30/2022                |
| Expenditure Amount | \$201,996.05             |

| Project Name | DOL Operational Expenses |
|--------------|--------------------------|
| Subaward ID  | SUB-0333558              |
|              |                          |

| Subaward No        | 18869-133149                     |
|--------------------|----------------------------------|
| Subaward Amount    | \$324,873.77                     |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | CARAHSOFT TECHNOLOGY CORPORATION |
| Expenditure Start  | 4/1/2022                         |
| Expenditure End    | 6/30/2022                        |
| Expenditure Amount | \$120,993.80                     |

| Project Name       | DOL Operational Expenses |
|--------------------|--------------------------|
| Subaward ID        | SUB-0333560              |
| Subaward No        | 18869-302906             |
| Subaward Amount    | \$311,317.31             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | AUM TECH INCORPORATED    |
| Expenditure Start  | 4/1/2022                 |
| Expenditure End    | 6/30/2022                |
| Expenditure Amount | \$120,982.88             |

# Expenditure: EN-00432706

| Project Name       | DOL Operational Expenses |
|--------------------|--------------------------|
| Subaward ID        | SUB-0333562              |
| Subaward No        | 18869-28172              |
| Subaward Amount    | \$80,000.00              |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | DIAMOND TECHNOLOGIES INC |
| Expenditure Start  | 4/1/2022                 |
| Expenditure End    | 6/30/2022                |
| Expenditure Amount | \$88,600.00              |

| Project Name      | DOL Operational Expenses |
|-------------------|--------------------------|
| Subaward ID       | SUB-0333574              |
| Subaward No       | 18869-630696             |
| Subaward Amount   | \$200,000.00             |
| Subaward Type     | Contract: Purchase Order |
| Subrecipient Name | RUSSELL ALLEN PARTNERS   |
|                   |                          |

| Expenditure Start  | 4/1/2022    |
|--------------------|-------------|
| Expenditure End    | 6/30/2022   |
| Expenditure Amount | \$50,000.00 |

| Project Name       | DOL FAST Program         |
|--------------------|--------------------------|
| Subaward ID        | SUB-0722309              |
| Subaward No        | 18898-1417               |
| Subaward Amount    | \$92,752.29              |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | CAREER T E A M LLC       |
| Expenditure Start  | 6/1/2023                 |
| Expenditure End    | 6/30/2023                |
| Expenditure Amount | \$3,821.30               |

#### Expenditure: EN-01615198

| Project Name       | DOL FAST Program         |
|--------------------|--------------------------|
| Subaward ID        | SUB-0722310              |
| Subaward No        | 18898-28180              |
| Subaward Amount    | \$95,000.00              |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | DELAWARE FUTURES INC     |
| Expenditure Start  | 6/1/2023                 |
| Expenditure End    | 6/30/2023                |
| Expenditure Amount | \$2,450.00               |

## Expenditure: EN-01615199

| Project Name       | DOL FAST Program         |
|--------------------|--------------------------|
| Subaward ID        | SUB-0722311              |
| Subaward No        | 18898-25444              |
| Subaward Amount    | \$91,938.52              |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | JOBS FOR DE GRADUATES    |
| Expenditure Start  | 6/1/2023                 |
| Expenditure End    | 6/30/2023                |
| Expenditure Amount | \$3,241.73               |

| Project Name       | DOL FAST Program            |
|--------------------|-----------------------------|
| Subaward ID        | SUB-0722312                 |
| Subaward No        | 18898-45108                 |
| Subaward Amount    | \$63,616.29                 |
| Subaward Type      | Contract: Purchase Order    |
| Subrecipient Name  | WEST END NEIGHBORHOOD HOUSE |
| Expenditure Start  | 6/1/2023                    |
| Expenditure End    | 6/30/2023                   |
| Expenditure Amount | \$53,011.51                 |

| Project Name       | DOL FAST Program         |
|--------------------|--------------------------|
| Subaward ID        | SUB-0722310              |
| Subaward No        | 18898-28180              |
| Subaward Amount    | \$95,000.00              |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | DELAWARE FUTURES INC     |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$5,000.00               |

## Expenditure: EN-01799717

| Project Name       | DOL FAST Program         |
|--------------------|--------------------------|
| Subaward ID        | SUB-0722311              |
| Subaward No        | 18898-25444              |
| Subaward Amount    | \$91,938.52              |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | JOBS FOR DE GRADUATES    |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$90.13                  |

| Project Name | DOL FAST Program |
|--------------|------------------|
| Subaward ID  | SUB-0722309      |
| Subaward No  | 18898-1417       |
|              |                  |

| Subaward Amount    | \$92,752.29              |
|--------------------|--------------------------|
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | CAREER T E A M LLC       |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$48,713.90              |

| Project Name       | DOL FAST Program            |
|--------------------|-----------------------------|
| Subaward ID        | SUB-0722312                 |
| Subaward No        | 18898-45108                 |
| Subaward Amount    | \$63,616.29                 |
| Subaward Type      | Contract: Purchase Order    |
| Subrecipient Name  | WEST END NEIGHBORHOOD HOUSE |
| Expenditure Start  | 10/1/2023                   |
| Expenditure End    | 12/31/2023                  |
| Expenditure Amount | \$10,354.28                 |

## Expenditure: EN-01912873

| Project Name       | DOL FAST Program         |
|--------------------|--------------------------|
| Subaward ID        | SUB-0722311              |
| Subaward No        | 18898-25444              |
| Subaward Amount    | \$91,938.52              |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | JOBS FOR DE GRADUATES    |
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$4,679.19               |

| Project Name      | DOL FAST Program         |
|-------------------|--------------------------|
| Subaward ID       | SUB-0722309              |
| Subaward No       | 18898-1417               |
| Subaward Amount   | \$92,752.29              |
| Subaward Type     | Contract: Purchase Order |
| Subrecipient Name | CAREER T E A M LLC       |
| Expenditure Start | 10/1/2023                |
|                   |                          |

| Expenditure End    | 12/31/2023  |
|--------------------|-------------|
| Expenditure Amount | \$37,259.20 |

| Project Name       | DOL FAST Program         |
|--------------------|--------------------------|
| Subaward ID        | SUB-0722310              |
| Subaward No        | 18898-28180              |
| Subaward Amount    | \$95,000.00              |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | DELAWARE FUTURES INC     |
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$54,639.14              |

#### Expenditure: EN-00778786

| Project Name       | DE NG Pandemic Readiness Center |
|--------------------|---------------------------------|
| Subaward ID        | SUB-0336408                     |
| Subaward No        | 18823-30078                     |
| Subaward Amount    | \$740,900.00                    |
| Subaward Type      | Contract: Purchase Order        |
| Subrecipient Name  | Davis Bowen & Friedel Inc       |
| Expenditure Start  | 9/1/2022                        |
| Expenditure End    | 12/31/2022                      |
| Expenditure Amount | \$176,475.00                    |

#### Expenditure: EN-01173644

| Project Name       | DE NG Pandemic Readiness Center |
|--------------------|---------------------------------|
| Subaward ID        | SUB-0336408                     |
| Subaward No        | 18823-30078                     |
| Subaward Amount    | \$740,900.00                    |
| Subaward Type      | Contract: Purchase Order        |
| Subrecipient Name  | Davis Bowen & Friedel Inc       |
| Expenditure Start  | 1/1/2023                        |
| Expenditure End    | 3/31/2023                       |
| Expenditure Amount | \$70,590.00                     |

| Project Name       | DE NG Pandemic Readiness Center |
|--------------------|---------------------------------|
| Subaward ID        | SUB-0336408                     |
| Subaward No        | 18823-30078                     |
| Subaward Amount    | \$740,900.00                    |
| Subaward Type      | Contract: Purchase Order        |
| Subrecipient Name  | Davis Bowen & Friedel Inc       |
| Expenditure Start  | 4/1/2023                        |
| Expenditure End    | 6/30/2023                       |
| Expenditure Amount | \$105,885.00                    |

| Project Name       | DE NG Pandemic Readiness Center |
|--------------------|---------------------------------|
| Subaward ID        | SUB-0336408                     |
| Subaward No        | 18823-30078                     |
| Subaward Amount    | \$740,900.00                    |
| Subaward Type      | Contract: Purchase Order        |
| Subrecipient Name  | Davis Bowen & Friedel Inc       |
| Expenditure Start  | 7/1/2023                        |
| Expenditure End    | 9/30/2023                       |
| Expenditure Amount | \$35,295.00                     |

## Expenditure: EN-01920708

| Project Name       | DE NG Pandemic Readiness Center |
|--------------------|---------------------------------|
| Subaward ID        | SUB-0336408                     |
| Subaward No        | 18823-30078                     |
| Subaward Amount    | \$740,900.00                    |
| Subaward Type      | Contract: Purchase Order        |
| Subrecipient Name  | Davis Bowen & Friedel Inc       |
| Expenditure Start  | 10/1/2023                       |
| Expenditure End    | 12/31/2023                      |
| Expenditure Amount | \$28,000.00                     |

| Project Name    | DE NG Pandemic Readiness Center |
|-----------------|---------------------------------|
| Subaward ID     | SUB-0336408                     |
| Subaward No     | 18823-30078                     |
| Subaward Amount | \$740,900.00                    |
|                 |                                 |

| Subaward Type      | Contract: Purchase Order  |
|--------------------|---------------------------|
| Subrecipient Name  | Davis Bowen & Friedel Inc |
| Expenditure Start  | 7/1/2022                  |
| Expenditure End    | 9/30/2022                 |
| Expenditure Amount | \$70,590.00               |

| Project Name       | DE NG Pandemic Readiness Center |
|--------------------|---------------------------------|
| Subaward ID        | SUB-0336408                     |
| Subaward No        | 18823-30078                     |
| Subaward Amount    | \$740,900.00                    |
| Subaward Type      | Contract: Purchase Order        |
| Subrecipient Name  | Davis Bowen & Friedel Inc       |
| Expenditure Start  | 4/1/2022                        |
| Expenditure End    | 6/30/2022                       |
| Expenditure Amount | \$105,885.00                    |

## Expenditure: EN-00840422

| Project Name       | OGOV Academy of Medicine               |
|--------------------|--|
| Subaward ID        | SUB-0359717                            |
| Subaward No        | 19108                                  |
| Subaward Amount    | \$5,000,000.00                         |
| Subaward Type      | Grant: Lump Sum Payment(s)             |
| Subrecipient Name  | The Delaware Academy of Medicine, Inc. |
| Expenditure Start  | 10/1/2022                              |
| Expenditure End    | 12/31/2022                             |
| Expenditure Amount | \$113,328.23                           |

| Project Name      | OGOV Academy of Medicine               |
|-------------------|--|
| Subaward ID       | SUB-0359717                            |
| Subaward No       | 19108                                  |
| Subaward Amount   | \$5,000,000.00                         |
| Subaward Type     | Grant: Lump Sum Payment(s)             |
| Subrecipient Name | The Delaware Academy of Medicine, Inc. |
| Expenditure Start | 1/1/2023                               |
| Expenditure End   | 3/31/2023                              |
|                   |  |

| Project Name       | OGOV Academy of Medicine               |
|--------------------|--|
| Subaward ID        | SUB-0359717                            |
| Subaward No        | 19108                                  |
| Subaward Amount    | \$5,000,000.00                         |
| Subaward Type      | Grant: Lump Sum Payment(s)             |
| Subrecipient Name  | The Delaware Academy of Medicine, Inc. |
| Expenditure Start  | 7/1/2023                               |
| Expenditure End    | 9/30/2023                              |
| Expenditure Amount | \$2,267,650.00                         |

#### Expenditure: EN-00613225

| Project Name       | OGOV Academy of Medicine               |
|--------------------|--|
| Subaward ID        | SUB-0359717                            |
| Subaward No        | 19108                                  |
| Subaward Amount    | \$5,000,000.00                         |
| Subaward Type      | Grant: Lump Sum Payment(s)             |
| Subrecipient Name  | The Delaware Academy of Medicine, Inc. |
| Expenditure Start  | 7/1/2022                               |
| Expenditure End    | 9/30/2022                              |
| Expenditure Amount | \$336,688.17                           |

#### Expenditure: EN-00457231

| Project Name       | OGOV Academy of Medicine               |
|--------------------|--|
| Subaward ID        | SUB-0359717                            |
| Subaward No        | 19108                                  |
| Subaward Amount    | \$5,000,000.00                         |
| Subaward Type      | Grant: Lump Sum Payment(s)             |
| Subrecipient Name  | The Delaware Academy of Medicine, Inc. |
| Expenditure Start  | 4/20/2022                              |
| Expenditure End    | 6/30/2022                              |
| Expenditure Amount | \$56,639.90                            |

| Project Name | OGOV UD Research Lab |
|--------------|----------------------|
|              |                      |

| Subaward ID        | SUB-0354554                |
|--------------------|----------------------------|
| Subaward No        | 19110                      |
| Subaward Amount    | \$41,000,000.00            |
| Subaward Type      | Grant: Lump Sum Payment(s) |
| Subrecipient Name  | University of Delaware     |
| Expenditure Start  | 10/1/2022                  |
| Expenditure End    | 12/31/2022                 |
| Expenditure Amount | \$7,114,584.30             |

| Project Name       | OGOV UD Research Lab       |
|--------------------|----------------------------|
| Subaward ID        | SUB-0354554                |
| Subaward No        | 19110                      |
| Subaward Amount    | \$41,000,000.00            |
| Subaward Type      | Grant: Lump Sum Payment(s) |
| Subrecipient Name  | University of Delaware     |
| Expenditure Start  | 1/1/2023                   |
| Expenditure End    | 3/31/2023                  |
| Expenditure Amount | (\$5,806,703.97)           |

## Expenditure: EN-01614215

| Project Name       | OGOV UD Research Lab       |
|--------------------|----------------------------|
| Subaward ID        | SUB-0354554                |
| Subaward No        | 19110                      |
| Subaward Amount    | \$41,000,000.00            |
| Subaward Type      | Grant: Lump Sum Payment(s) |
| Subrecipient Name  | University of Delaware     |
| Expenditure Start  | 4/1/2023                   |
| Expenditure End    | 6/30/2023                  |
| Expenditure Amount | \$21,000,000.00            |

| Project Name    | OGOV UD Research Lab       |
|-----------------|----------------------------|
| Subaward ID     | SUB-0354554                |
| Subaward No     | 19110                      |
| Subaward Amount | \$41,000,000.00            |
| Subaward Type   | Grant: Lump Sum Payment(s) |
|                 |                            |

| Subrecipient Name  | University of Delaware |
|--------------------|------------------------|
| Expenditure Start  | 10/1/2023              |
| Expenditure End    | 12/31/2023             |
| Expenditure Amount | \$10,000,000.00        |

| Project Name       | OGOV UD Research Lab       |
|--------------------|----------------------------|
| Subaward ID        | SUB-0354554                |
| Subaward No        | 19110                      |
| Subaward Amount    | \$41,000,000.00            |
| Subaward Type      | Grant: Lump Sum Payment(s) |
| Subrecipient Name  | University of Delaware     |
| Expenditure Start  | 7/1/2022                   |
| Expenditure End    | 9/30/2022                  |
| Expenditure Amount | \$8,692,119.67             |

## Expenditure: EN-00840429

| Project Name       | OGOV MH Del Nurses Association |
|--------------------|--------------------------------|
| Subaward ID        | SUB-0341380                    |
| Subaward No        | 19161                          |
| Subaward Amount    | \$500,000.00                   |
| Subaward Type      | Grant: Lump Sum Payment(s)     |
| Subrecipient Name  | Delaware Nurses Association    |
| Expenditure Start  | 10/1/2022                      |
| Expenditure End    | 12/31/2022                     |
| Expenditure Amount | \$1,226.21                     |

| Project Name       | OGOV MH Del Nurses Association |
|--------------------|--------------------------------|
| Subaward ID        | SUB-0341380                    |
| Subaward No        | 19161                          |
| Subaward Amount    | \$500,000.00                   |
| Subaward Type      | Grant: Lump Sum Payment(s)     |
| Subrecipient Name  | Delaware Nurses Association    |
| Expenditure Start  | 1/1/2023                       |
| Expenditure End    | 3/31/2023                      |
| Expenditure Amount | \$165,473.79                   |

| Project Name       | OGOV DRA Mental Health          |
|--------------------|---------------------------------|
| Subaward ID        | SUB-0341420                     |
| Subaward No        | 19315                           |
| Subaward Amount    | \$300,000.00                    |
| Subaward Type      | Grant: Lump Sum Payment(s)      |
| Subrecipient Name  | Delaware Restaurant Association |
| Expenditure Start  | 10/1/2022                       |
| Expenditure End    | 12/31/2022                      |
| Expenditure Amount | \$12,094.88                     |

#### Expenditure: EN-01173813

| Project Name       | OGOV DRA Mental Health          |
|--------------------|---------------------------------|
| Subaward ID        | SUB-0341420                     |
| Subaward No        | 19315                           |
| Subaward Amount    | \$300,000.00                    |
| Subaward Type      | Grant: Lump Sum Payment(s)      |
| Subrecipient Name  | Delaware Restaurant Association |
| Expenditure Start  | 1/1/2023                        |
| Expenditure End    | 3/31/2023                       |
| Expenditure Amount | \$277,173.12                    |

#### Expenditure: EN-00623903

| Project Name       | OGOV DRA Mental Health          |
|--------------------|---------------------------------|
| Subaward ID        | SUB-0341420                     |
| Subaward No        | 19315                           |
| Subaward Amount    | \$300,000.00                    |
| Subaward Type      | Grant: Lump Sum Payment(s)      |
| Subrecipient Name  | Delaware Restaurant Association |
| Expenditure Start  | 7/1/2022                        |
| Expenditure End    | 9/30/2022                       |
| Expenditure Amount | \$10,732.00                     |

| Project Name | OGOV Children & Families First |
|--------------|--------------------------------|
| Subaward ID  | SUB-0341425                    |
|              |                                |

| Subaward No        | 19320                       |
|--------------------|-----------------------------|
| Subaward Amount    | \$276,625.00                |
| Subaward Type      | Grant: Lump Sum Payment(s)  |
| Subrecipient Name  | Children and Families first |
| Expenditure Start  | 10/1/2022                   |
| Expenditure End    | 12/31/2022                  |
| Expenditure Amount | \$295.00                    |

| Project Name       | OGOV Children & Families First |
|--------------------|--------------------------------|
| Subaward ID        | SUB-0341425                    |
| Subaward No        | 19320                          |
| Subaward Amount    | \$276,625.00                   |
| Subaward Type      | Grant: Lump Sum Payment(s)     |
| Subrecipient Name  | Children and Families first    |
| Expenditure Start  | 1/1/2023                       |
| Expenditure End    | 3/31/2023                      |
| Expenditure Amount | \$276,330.00                   |

## Expenditure: EN-00840460

| Project Name       | OGOV Advanced Family Care  |
|--------------------|----------------------------|
| Subaward ID        | SUB-0341430                |
| Subaward No        | 19323                      |
| Subaward Amount    | \$183,400.00               |
| Subaward Type      | Grant: Lump Sum Payment(s) |
| Subrecipient Name  | Advanced Family Care       |
| Expenditure Start  | 10/1/2022                  |
| Expenditure End    | 12/31/2022                 |
| Expenditure Amount | \$48,661.09                |

| Project Name      | OGOV Advanced Family Care  |
|-------------------|----------------------------|
| Subaward ID       | SUB-0341430                |
| Subaward No       | 19323                      |
| Subaward Amount   | \$183,400.00               |
| Subaward Type     | Grant: Lump Sum Payment(s) |
| Subrecipient Name | Advanced Family Care       |
|                   |                            |

| Expenditure Start  | 1/1/2023     |
|--------------------|--------------|
| Expenditure End    | 3/31/2023    |
| Expenditure Amount | \$109,104.68 |

| Project Name       | OGOV Advanced Family Care  |
|--------------------|----------------------------|
| Subaward ID        | SUB-0341430                |
| Subaward No        | 19323                      |
| Subaward Amount    | \$183,400.00               |
| Subaward Type      | Grant: Lump Sum Payment(s) |
| Subrecipient Name  | Advanced Family Care       |
| Expenditure Start  | 7/1/2022                   |
| Expenditure End    | 9/30/2022                  |
| Expenditure Amount | \$25,634.23                |

#### Expenditure: EN-00840463

| Project Name       | OGOV Jewish Family Services |
|--------------------|-----------------------------|
| Subaward ID        | SUB-0341437                 |
| Subaward No        | 19324                       |
| Subaward Amount    | \$1,000,000.00              |
| Subaward Type      | Grant: Lump Sum Payment(s)  |
| Subrecipient Name  | Jewish Family Services      |
| Expenditure Start  | 10/1/2022                   |
| Expenditure End    | 12/31/2022                  |
| Expenditure Amount | \$250,193.95                |

## Expenditure: EN-01173830

| Project Name       | OGOV Jewish Family Services |
|--------------------|-----------------------------|
| Subaward ID        | SUB-0341437                 |
| Subaward No        | 19324                       |
| Subaward Amount    | \$1,000,000.00              |
| Subaward Type      | Grant: Lump Sum Payment(s)  |
| Subrecipient Name  | Jewish Family Services      |
| Expenditure Start  | 1/1/2023                    |
| Expenditure End    | 3/31/2023                   |
| Expenditure Amount | \$749,806.05                |

| Project Name       | OGOV United Way DE Fellowship |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0350179                   |
| Subaward No        | 19162-24423                   |
| Subaward Amount    | \$1,000,000.00                |
| Subaward Type      | Contract: Definitive Contract |
| Subrecipient Name  | United Way of Delaware        |
| Expenditure Start  | 1/1/2023                      |
| Expenditure End    | 3/31/2023                     |
| Expenditure Amount | \$92,526.00                   |

| Project Name       | OGOV United Way DE Fellowship |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0350179                   |
| Subaward No        | 19162-24423                   |
| Subaward Amount    | \$1,000,000.00                |
| Subaward Type      | Contract: Definitive Contract |
| Subrecipient Name  | United Way of Delaware        |
| Expenditure Start  | 7/1/2022                      |
| Expenditure End    | 9/30/2022                     |
| Expenditure Amount | \$138,445.00                  |

## Expenditure: EN-00449670

| Project Name       | OGOV United Way DE Fellowship |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0350179                   |
| Subaward No        | 19162-24423                   |
| Subaward Amount    | \$1,000,000.00                |
| Subaward Type      | Contract: Definitive Contract |
| Subrecipient Name  | United Way of Delaware        |
| Expenditure Start  | 5/17/2022                     |
| Expenditure End    | 6/30/2022                     |
| Expenditure Amount | \$769,029.00                  |

| Project Name | OGOV LEEP   |
|--------------|-------------|
| Subaward ID  | SUB-0354111 |
| Subaward No  | 19297       |
|              |             |

| Subaward Amount    | \$1,700,000.00                                 |
|--------------------|--|
| Subaward Type      | Contract: Definitive Contract                  |
| Subrecipient Name  | LEEP Inc Labor Economics Education emPowerment |
| Expenditure Start  | 10/1/2022                                      |
| Expenditure End    | 12/31/2022                                     |
| Expenditure Amount | \$404,016.68                                   |

| Project Name       | OGOV LEEP                                      |
|--------------------|--|
| Subaward ID        | SUB-0354111                                    |
| Subaward No        | 19297  |
| Subaward Amount    | \$1,700,000.00                                 |
| Subaward Type      | Contract: Definitive Contract                  |
| Subrecipient Name  | LEEP Inc Labor Economics Education emPowerment |
| Expenditure Start  | 1/1/2023                                       |
| Expenditure End    | 3/31/2023                                      |
| Expenditure Amount | (\$4,016.68)                                   |

## Expenditure: EN-01770497

| Project Name       | DSFS Learning Management System      |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0782561                          |
| Subaward No        | 19222-583966                         |
| Subaward Amount    | \$200,000.00                         |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | SYMBIOSYS CONSULTING LLC DBA BELSHAM |
| Expenditure Start  | 7/1/2023                             |
| Expenditure End    | 9/30/2023                            |
| Expenditure Amount | \$57,185.00                          |

| Project Name      | DSFS Learning Management System      |
|-------------------|--------------------------------------|
| Subaward ID       | SUB-0782561                          |
| Subaward No       | 19222-583966                         |
| Subaward Amount   | \$200,000.00                         |
| Subaward Type     | Contract: Purchase Order             |
| Subrecipient Name | SYMBIOSYS CONSULTING LLC DBA BELSHAM |
| Expenditure Start | 10/1/2023                            |
|                   |                                      |

| Expenditure End    | 12/31/2023  |
|--------------------|-------------|
| Expenditure Amount | \$58,350.00 |

| Project Name       | DOL DET On the Job Training |
|--------------------|-----------------------------|
| Subaward ID        | SUB-0722303                 |
| Subaward No        | 19285-24324                 |
| Subaward Amount    | \$72,923.99                 |
| Subaward Type      | Contract: Purchase Order    |
| Subrecipient Name  | Goodwill DE and DE County   |
| Expenditure Start  | 6/1/2022                    |
| Expenditure End    | 6/30/2023                   |
| Expenditure Amount | \$56,256.08                 |

## Expenditure: EN-01799720

| Project Name       | DOL DET On the Job Training |
|--------------------|-----------------------------|
| Subaward ID        | SUB-0722303                 |
| Subaward No        | 19285-24324                 |
| Subaward Amount    | \$72,923.99                 |
| Subaward Type      | Contract: Purchase Order    |
| Subrecipient Name  | Goodwill DE and DE County   |
| Expenditure Start  | 7/1/2023                    |
| Expenditure End    | 9/30/2023                   |
| Expenditure Amount | \$7,808.64                  |

#### Expenditure: EN-01912876

| Project Name       | DOL DET On the Job Training |
|--------------------|-----------------------------|
| Subaward ID        | SUB-0722303                 |
| Subaward No        | 19285-24324                 |
| Subaward Amount    | \$72,923.99                 |
| Subaward Type      | Contract: Purchase Order    |
| Subrecipient Name  | Goodwill DE and DE County   |
| Expenditure Start  | 10/1/2023                   |
| Expenditure End    | 12/31/2023                  |
| Expenditure Amount | \$8,859.27                  |

| Project Name       | DTI Employee Attestation         |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0335680                      |
| Subaward No        | 19141-133149                     |
| Subaward Amount    | \$77,189.75                      |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | CARAHSOFT TECHNOLOGY CORPORATION |
| Expenditure Start  | 4/1/2022                         |
| Expenditure End    | 6/30/2022                        |
| Expenditure Amount | \$77,189.75                      |

| Project Name       | DTI Data Center Modernization |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0505850                   |
| Subaward No        | 19144-22295                   |
| Subaward Amount    | \$2,941,299.78                |
| Subaward Type      | Contract: Purchase Order      |
| Subrecipient Name  | INSIGHT PUBLIC SECTOR         |
| Expenditure Start  | 10/27/2022                    |
| Expenditure End    | 12/31/2022                    |
| Expenditure Amount | \$2,941,296.84                |

# Expenditure: EN-00781329

| Project Name       | DTI Data Center Modernization |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0442407                   |
| Subaward No        | 19144-18102                   |
| Subaward Amount    | \$234,000.00                  |
| Subaward Type      | Contract: Purchase Order      |
| Subrecipient Name  | COMPUTER AID INC              |
| Expenditure Start  | 10/1/2022                     |
| Expenditure End    | 12/31/2022                    |
| Expenditure Amount | \$45,760.00                   |

| Project Name    | DTI Data Center Modernization |
|-----------------|-------------------------------|
| Subaward ID     | SUB-0442407                   |
| Subaward No     | 19144-18102                   |
| Subaward Amount | \$234,000.00                  |
|                 |                               |

| Subaward Type      | Contract: Purchase Order |
|--------------------|--------------------------|
| Subrecipient Name  | COMPUTER AID INC         |
| Expenditure Start  | 1/1/2023                 |
| Expenditure End    | 3/31/2023                |
| Expenditure Amount | \$84,240.00              |

| Project Name       | DTI Data Center Modernization |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0335975                   |
| Subaward No        | 19144-49758                   |
| Subaward Amount    | \$456,815.00                  |
| Subaward Type      | Contract: Purchase Order      |
| Subrecipient Name  | Info Solutions LLC            |
| Expenditure Start  | 1/1/2023                      |
| Expenditure End    | 3/31/2023                     |
| Expenditure Amount | \$456,815.00                  |

# Expenditure: EN-01616369

| Project Name       | DTI Data Center Modernization |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0335975                   |
| Subaward No        | 19144-49758                   |
| Subaward Amount    | \$456,815.00                  |
| Subaward Type      | Contract: Purchase Order      |
| Subrecipient Name  | Info Solutions LLC            |
| Expenditure Start  | 4/1/2023                      |
| Expenditure End    | 6/30/2023                     |
| Expenditure Amount | \$8,320.00                    |

| Project Name      | DTI Data Center Modernization    |
|-------------------|----------------------------------|
| Subaward ID       | SUB-0782597                      |
| Subaward No       | 19144-133149                     |
| Subaward Amount   | \$2,554,053.41                   |
| Subaward Type     | Contract: Purchase Order         |
| Subrecipient Name | CARAHSOFT TECHNOLOGY CORPORATION |
| Expenditure Start | 7/1/2023                         |
| Expenditure End   | 9/30/2023                        |
|                   |                                  |

| Project Name       | DTI Data Center Modernization           |
|--------------------|---|
| Subaward ID        | SUB-0722825                             |
| Subaward No        | 19144-35850                             |
| Subaward Amount    | \$2,350,925.21                          |
| Subaward Type      | Contract: Purchase Order                |
| Subrecipient Name  | PRESIDIO NETWORKED SOLUTIONS GROUP, LLC |
| Expenditure Start  | 7/1/2023                                |
| Expenditure End    | 9/30/2023                               |
| Expenditure Amount | \$405,595.85                            |

#### Expenditure: EN-01916526

| Project Name       | DTI Data Center Modernization |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0836529                   |
| Subaward No        | 19144-16884                   |
| Subaward Amount    | \$58,300.00                   |
| Subaward Type      | Contract: Purchase Order      |
| Subrecipient Name  | SHI INTERNATIONAL CORP        |
| Expenditure Start  | 10/1/2023                     |
| Expenditure End    | 12/31/2023                    |
| Expenditure Amount | \$58,300.00                   |

#### Expenditure: EN-01916527

| Project Name       | DTI Data Center Modernization |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0335974                   |
| Subaward No        | 19144-33778                   |
| Subaward Amount    | \$854,992.33                  |
| Subaward Type      | Contract: Purchase Order      |
| Subrecipient Name  | DELL MARKETING LP             |
| Expenditure Start  | 10/1/2023                     |
| Expenditure End    | 12/31/2023                    |
| Expenditure Amount | \$496,524.09                  |

| Project Name DTI Data Center Modernization |
|--|
|--|

| Subaward ID        | SUB-0335974              |
|--------------------|--------------------------|
| Subaward No        | 19144-33778              |
| Subaward Amount    | \$854,992.33             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | DELL MARKETING LP        |
| Expenditure Start  | 7/1/2022                 |
| Expenditure End    | 9/30/2022                |
| Expenditure Amount | \$358,468.24             |

| Project Name       | DTI Mainframe            |
|--------------------|--------------------------|
| Subaward ID        | SUB-0609160              |
| Subaward No        | 19176-666611             |
| Subaward Amount    | \$7,114,739.00           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | ENSONO LLC               |
| Expenditure Start  | 1/1/2023                 |
| Expenditure End    | 3/31/2023                |
| Expenditure Amount | \$42,480.25              |

# Expenditure: EN-01186997

| Project Name       | DTI Mainframe                        |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0442408                          |
| Subaward No        | 19176-630238                         |
| Subaward Amount    | \$140,000.00                         |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | GUIDESOFT INC DBA KNOWLEDGE SERVICES |
| Expenditure Start  | 1/1/2023                             |
| Expenditure End    | 3/31/2023                            |
| Expenditure Amount | \$31,860.00                          |

| Project Name    | DTI Mainframe            |
|-----------------|--------------------------|
| Subaward ID     | SUB-0335981              |
| Subaward No     | 19176-16884              |
| Subaward Amount | \$879,540.79             |
| Subaward Type   | Contract: Purchase Order |
|                 |                          |

| Subrecipient Name  | SHI INTERNATIONAL CORP |
|--------------------|------------------------|
| Expenditure Start  | 4/1/2023               |
| Expenditure End    | 6/30/2023              |
| Expenditure Amount | \$65,815.00            |

| Project Name       | DTI Mainframe            |
|--------------------|--------------------------|
| Subaward ID        | SUB-0609163              |
| Subaward No        | 19176-31655              |
| Subaward Amount    | \$1,011,000.00           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | SOFTWARE AG USA INC      |
| Expenditure Start  | 4/1/2023                 |
| Expenditure End    | 6/30/2023                |
| Expenditure Amount | \$5,187.48               |

## Expenditure: EN-01770753

| Project Name       | DTI Mainframe            |
|--------------------|--------------------------|
| Subaward ID        | SUB-0722829              |
| Subaward No        | 19176-22295              |
| Subaward Amount    | \$301,891.94             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | INSIGHT PUBLIC SECTOR    |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$272,098.78             |

| Project Name       | DTI Mainframe            |
|--------------------|--------------------------|
| Subaward ID        | SUB-0609160              |
| Subaward No        | 19176-666611             |
| Subaward Amount    | \$7,114,739.00           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | ENSONO LLC               |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$254,881.50             |

| Project Name       | DTI Mainframe            |
|--------------------|--------------------------|
| Subaward ID        | SUB-0609163              |
| Subaward No        | 19176-31655              |
| Subaward Amount    | \$1,011,000.00           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | SOFTWARE AG USA INC      |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$1,000,000.00           |

## Expenditure: EN-01770756

| Project Name       | DTI Mainframe            |
|--------------------|--------------------------|
| Subaward ID        | SUB-0782645              |
| Subaward No        | 19176/17433              |
| Subaward Amount    | \$380,669.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | RICOH USA INC            |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$340,681.00             |

#### Expenditure: EN-01770757

| Project Name       | DTI Mainframe            |
|--------------------|--------------------------|
| Subaward ID        | SUB-0335981              |
| Subaward No        | 19176-16884              |
| Subaward Amount    | \$879,540.79             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | SHI INTERNATIONAL CORP   |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$27,874.74              |

| Project Name | DTI Mainframe |
|--------------|---------------|
| Subaward ID  | SUB-0609160   |
|              |               |

| Subaward No        | 19176-666611             |
|--------------------|--------------------------|
| Subaward Amount    | \$7,114,739.00           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | ENSONO LLC               |
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$42,480.25              |

| Project Name       | DTI Mainframe            |
|--------------------|--------------------------|
| Subaward ID        | SUB-0722829              |
| Subaward No        | 19176-22295              |
| Subaward Amount    | \$301,891.94             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | INSIGHT PUBLIC SECTOR    |
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$1,866.45               |

# Expenditure: EN-01916529

| Project Name       | DTI Mainframe            |
|--------------------|--------------------------|
| Subaward ID        | SUB-0782645              |
| Subaward No        | 19176/17433              |
| Subaward Amount    | \$380,669.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | RICOH USA INC            |
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$39,988.00              |

| Project Name      | DTI Mainframe            |
|-------------------|--------------------------|
| Subaward ID       | SUB-0609163              |
| Subaward No       | 19176-31655              |
| Subaward Amount   | \$1,011,000.00           |
| Subaward Type     | Contract: Purchase Order |
| Subrecipient Name | SOFTWARE AG USA INC      |
|                   |                          |

| Expenditure Start  | 10/1/2023  |
|--------------------|------------|
| Expenditure End    | 12/31/2023 |
| Expenditure Amount | \$1,925.00 |

| Project Name       | DTI Mainframe            |
|--------------------|--------------------------|
| Subaward ID        | SUB-0335981              |
| Subaward No        | 19176-16884              |
| Subaward Amount    | \$879,540.79             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | SHI INTERNATIONAL CORP   |
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$70,463.59              |

#### Expenditure: EN-00628024

| Project Name       | DTI Mainframe            |
|--------------------|--------------------------|
| Subaward ID        | SUB-0335981              |
| Subaward No        | 19176-16884              |
| Subaward Amount    | \$879,540.79             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | SHI INTERNATIONAL CORP   |
| Expenditure Start  | 7/1/2022                 |
| Expenditure End    | 9/30/2022                |
| Expenditure Amount | \$79,588.00              |

## Expenditure: EN-01616446

| Project Name       | DTI Security Incident Detection |
|--------------------|---------------------------------|
| Subaward ID        | SUB-0335990                     |
| Subaward No        | 19279-511907                    |
| Subaward Amount    | \$500,000.00                    |
| Subaward Type      | Contract: Purchase Order        |
| Subrecipient Name  | NUHARBOR SECURITY INC           |
| Expenditure Start  | 4/1/2023                        |
| Expenditure End    | 6/30/2023                       |
| Expenditure Amount | \$250,000.00                    |

| Project Name       | DTI Security Incident Detection |
|--------------------|---------------------------------|
| Subaward ID        | SUB-0335990                     |
| Subaward No        | 19279-511907                    |
| Subaward Amount    | \$500,000.00                    |
| Subaward Type      | Contract: Purchase Order        |
| Subrecipient Name  | NUHARBOR SECURITY INC           |
| Expenditure Start  | 4/25/2022                       |
| Expenditure End    | 6/30/2022                       |
| Expenditure Amount | \$250,000.00                    |

| Project Name       | DTI Digital Accessibility |
|--------------------|---------------------------|
| Subaward ID        | SUB-0336012               |
| Subaward No        | 19280-16884               |
| Subaward Amount    | \$1,564,343.87            |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | SHI INTERNATIONAL CORP    |
| Expenditure Start  | 7/1/2023                  |
| Expenditure End    | 9/30/2023                 |
| Expenditure Amount | \$725,771.42              |

## Expenditure: EN-01916533

| Project Name       | DTI Digital Accessibility |
|--------------------|---------------------------|
| Subaward ID        | SUB-0336012               |
| Subaward No        | 19280-16884               |
| Subaward Amount    | \$1,564,343.87            |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | SHI INTERNATIONAL CORP    |
| Expenditure Start  | 10/1/2023                 |
| Expenditure End    | 12/31/2023                |
| Expenditure Amount | \$48,972.00               |

| Project Name | DTI Digital Accessibility |
|--------------|---------------------------|
| Subaward ID  | SUB-0336012               |
| Subaward No  | 19280-16884               |
|              |                           |

| Subaward Amount    | \$1,564,343.87           |
|--------------------|--------------------------|
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | SHI INTERNATIONAL CORP   |
| Expenditure Start  | 7/1/2022                 |
| Expenditure End    | 9/30/2022                |
| Expenditure Amount | \$356,526.91             |

| Project Name       | OGOV Kind to Kids Foundation |
|--------------------|------------------------------|
| Subaward ID        | SUB-0345733                  |
| Subaward No        | 19109                        |
| Subaward Amount    | \$600,000.00                 |
| Subaward Type      | Grant: Lump Sum Payment(s)   |
| Subrecipient Name  | Kind to Kids Foundation      |
| Expenditure Start  | 10/1/2022                    |
| Expenditure End    | 12/31/2022                   |
| Expenditure Amount | \$69,486.00                  |

#### Expenditure: EN-01173832

| Project Name       | OGOV Kind to Kids Foundation |
|--------------------|------------------------------|
| Subaward ID        | SUB-0345733                  |
| Subaward No        | 19109                        |
| Subaward Amount    | \$600,000.00                 |
| Subaward Type      | Grant: Lump Sum Payment(s)   |
| Subrecipient Name  | Kind to Kids Foundation      |
| Expenditure Start  | 1/1/2023                     |
| Expenditure End    | 3/31/2023                    |
| Expenditure Amount | \$97,006.00                  |

| Project Name      | OGOV Kind to Kids Foundation |
|-------------------|------------------------------|
| Subaward ID       | SUB-0345733                  |
| Subaward No       | 19109                        |
| Subaward Amount   | \$600,000.00                 |
| Subaward Type     | Grant: Lump Sum Payment(s)   |
| Subrecipient Name | Kind to Kids Foundation      |
| Expenditure Start | 7/1/2023                     |
|                   |                              |

| Expenditure End    | 9/30/2023    |
|--------------------|--------------|
| Expenditure Amount | \$200,000.00 |

| Project Name       | OGOV Kind to Kids Foundation |
|--------------------|------------------------------|
| Subaward ID        | SUB-0345733                  |
| Subaward No        | 19109                        |
| Subaward Amount    | \$600,000.00                 |
| Subaward Type      | Grant: Lump Sum Payment(s)   |
| Subrecipient Name  | Kind to Kids Foundation      |
| Expenditure Start  | 10/1/2023                    |
| Expenditure End    | 12/31/2023                   |
| Expenditure Amount | \$200,000.00                 |

#### Expenditure: EN-00633560

| Project Name       | OGOV Kind to Kids Foundation |
|--------------------|------------------------------|
| Subaward ID        | SUB-0345733                  |
| Subaward No        | 19109                        |
| Subaward Amount    | \$600,000.00                 |
| Subaward Type      | Grant: Lump Sum Payment(s)   |
| Subrecipient Name  | Kind to Kids Foundation      |
| Expenditure Start  | 7/1/2022                     |
| Expenditure End    | 9/30/2022                    |
| Expenditure Amount | \$25,064.00                  |

#### Expenditure: EN-00462010

| Project Name       | OGOV Kind to Kids Foundation |
|--------------------|------------------------------|
| Subaward ID        | SUB-0345733                  |
| Subaward No        | 19109                        |
| Subaward Amount    | \$600,000.00                 |
| Subaward Type      | Grant: Lump Sum Payment(s)   |
| Subrecipient Name  | Kind to Kids Foundation      |
| Expenditure Start  | 4/12/2022                    |
| Expenditure End    | 6/30/2022                    |
| Expenditure Amount | \$8,444.00                   |

| Project Name       | DOJ Domestic Violence Education and Awareness |
|--------------------|---|
| Subaward ID        | SUB-0604943                                   |
| Subaward No        | 19189-24928                                   |
| Subaward Amount    | \$99,992.00                                   |
| Subaward Type      | Direct Payment                                |
| Subrecipient Name  | Aloysius, Butler & Clark Associates, Inc.     |
| Expenditure Start  | 1/9/2023                                      |
| Expenditure End    | 3/31/2023                                     |
| Expenditure Amount | \$99,992.00                                   |

| Project Name       | DOJ Domestic Violence Education and Awareness |
|--------------------|---|
| Subaward ID        | SUB-0604943                                   |
| Subaward No        | 19189-24928                                   |
| Subaward Amount    | \$99,992.00                                   |
| Subaward Type      | Direct Payment                                |
| Subrecipient Name  | Aloysius, Butler & Clark Associates, Inc.     |
| Expenditure Start  | 4/1/2023                                      |
| Expenditure End    | 6/30/2023                                     |
| Expenditure Amount | \$99,992.00                                   |

## Expenditure: EN-01601466

| Project Name       | DOJ Domestic Violence Education and Awareness |
|--------------------|---|
| Subaward ID        | SUB-0604943                                   |
| Subaward No        | 19189-24928                                   |
| Subaward Amount    | \$99,992.00                                   |
| Subaward Type      | Direct Payment                                |
| Subrecipient Name  | Aloysius, Butler & Clark Associates, Inc.     |
| Expenditure Start  | 4/1/2023                                      |
| Expenditure End    | 6/30/2023                                     |
| Expenditure Amount | (\$99,992.00)                                 |

| Project Name    | OMB DSCYF Wharton Hall |
|-----------------|------------------------|
| Subaward ID     | SUB-0449149            |
| Subaward No     | 19177-6674             |
| Subaward Amount | \$1,163,105.00         |
|                 |                        |

| Subaward Type      | Contract: Definitive Contract |
|--------------------|-------------------------------|
| Subrecipient Name  | R G ARCHITECTS                |
| Expenditure Start  | 10/1/2022                     |
| Expenditure End    | 12/31/2022                    |
| Expenditure Amount | \$191,647.83                  |

| Project Name       | OMB DSCYF Wharton Hall        |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0449149                   |
| Subaward No        | 19177-6674                    |
| Subaward Amount    | \$1,163,105.00                |
| Subaward Type      | Contract: Definitive Contract |
| Subrecipient Name  | R G ARCHITECTS                |
| Expenditure Start  | 1/1/2023                      |
| Expenditure End    | 3/31/2023                     |
| Expenditure Amount | \$517,837.92                  |

# Expenditure: EN-01600998

| Project Name       | OMB DSCYF Wharton Hall        |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0449149                   |
| Subaward No        | 19177-6674                    |
| Subaward Amount    | \$1,163,105.00                |
| Subaward Type      | Contract: Definitive Contract |
| Subrecipient Name  | R G ARCHITECTS                |
| Expenditure Start  | 4/1/2023                      |
| Expenditure End    | 6/30/2023                     |
| Expenditure Amount | \$93,497.96                   |

| Project Name      | OMB DSCYF Wharton Hall        |
|-------------------|-------------------------------|
| Subaward ID       | SUB-0449149                   |
| Subaward No       | 19177-6674                    |
| Subaward Amount   | \$1,163,105.00                |
| Subaward Type     | Contract: Definitive Contract |
| Subrecipient Name | R G ARCHITECTS                |
| Expenditure Start | 7/1/2023                      |
| Expenditure End   | 9/30/2023                     |
|                   |                               |

| Project Name       | OMB DSCYF Wharton Hall   |
|--------------------|--------------------------|
| Subaward ID        | SUB-0718597              |
| Subaward No        | 19177-299895             |
| Subaward Amount    | \$65,549.00              |
| Subaward Type      | Contract: Delivery Order |
| Subrecipient Name  | ECOSERVICES LLC          |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$65,549.00              |

#### Expenditure: EN-01916680

| Project Name       | OMB DSCYF Wharton Hall        |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0449149                   |
| Subaward No        | 19177-6674                    |
| Subaward Amount    | \$1,163,105.00                |
| Subaward Type      | Contract: Definitive Contract |
| Subrecipient Name  | R G ARCHITECTS                |
| Expenditure Start  | 10/1/2023                     |
| Expenditure End    | 12/31/2023                    |
| Expenditure Amount | \$37,274.37                   |

#### Expenditure: EN-01916682

| Project Name       | OMB DSCYF Wharton Hall        |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0836546                   |
| Subaward No        | 19177-19558                   |
| Subaward Amount    | \$78,240.00                   |
| Subaward Type      | Contract: Purchase Order      |
| Subrecipient Name  | PLYMOUTH ENVIRONMENTAL CO INC |
| Expenditure Start  | 10/1/2023                     |
| Expenditure End    | 12/31/2023                    |
| Expenditure Amount | \$74,750.00                   |

| Project Name OMB DSCYF Wharton Hall |
|-------------------------------------|
|-------------------------------------|

| Subaward ID        | SUB-0785249                  |
|--------------------|------------------------------|
| Subaward No        | 19177-25843                  |
| Subaward Amount    | \$12,900,000.00              |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | COMMONWEALTH CONSTRUCTION CO |
| Expenditure Start  | 10/1/2023                    |
| Expenditure End    | 12/31/2023                   |
| Expenditure Amount | \$761,337.00                 |

| Project Name       | OMB DSCYF Wharton Hall        |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0449149                   |
| Subaward No        | 19177-6674                    |
| Subaward Amount    | \$1,163,105.00                |
| Subaward Type      | Contract: Definitive Contract |
| Subrecipient Name  | R G ARCHITECTS                |
| Expenditure Start  | 8/23/2022                     |
| Expenditure End    | 9/6/2022                      |
| Expenditure Amount | \$93,597.69                   |

## Expenditure: EN-00793263

| Project Name       | DEMA Emergency Operations Center Upgrades |
|--------------------|---|
| Subaward ID        | SUB-0505438                               |
| Subaward No        | 18015-258955                              |
| Subaward Amount    | \$1,209,158.00                            |
| Subaward Type      | Contract: Purchase Order                  |
| Subrecipient Name  | VISUAL SOUND INC                          |
| Expenditure Start  | 10/1/2022                                 |
| Expenditure End    | 12/31/2022                                |
| Expenditure Amount | \$395,260.86                              |

| Project Name    | DEMA Emergency Operations Center Upgrades |
|-----------------|---|
| Subaward ID     | SUB-0505438                               |
| Subaward No     | 18015-258955                              |
| Subaward Amount | \$1,209,158.00                            |
| Subaward Type   | Contract: Purchase Order                  |
|                 |   |

| Subrecipient Name  | VISUAL SOUND INC |
|--------------------|------------------|
| Expenditure Start  | 10/1/2023        |
| Expenditure End    | 12/31/2023       |
| Expenditure Amount | \$775,507.14     |

| Project Name       | DEMA Emergency Operations Center Upgrades |
|--------------------|---|
| Subaward ID        | SUB-0314698                               |
| Subaward No        | 24878_18015                               |
| Subaward Amount    | \$57,600.00                               |
| Subaward Type      | Contract: Purchase Order                  |
| Subrecipient Name  | P&C Roofing                               |
| Expenditure Start  | 4/20/2022                                 |
| Expenditure End    | 4/20/2022                                 |
| Expenditure Amount | \$57,600.00                               |

## Expenditure: EN-00793258

| Project Name       | DEMA COVID Testing Program    |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0211054                   |
| Subaward No        | 17949-550494                  |
| Subaward Amount    | \$19,673,520.00               |
| Subaward Type      | Contract: Definitive Contract |
| Subrecipient Name  | GOTHAMS LLC                   |
| Expenditure Start  | 10/1/2022                     |
| Expenditure End    | 12/31/2022                    |
| Expenditure Amount | (\$1,590,402.80)              |

| Project Name       | DEMA COVID Testing Program    |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0211054                   |
| Subaward No        | 17949-550494                  |
| Subaward Amount    | \$19,673,520.00               |
| Subaward Type      | Contract: Definitive Contract |
| Subrecipient Name  | GOTHAMS LLC                   |
| Expenditure Start  | 7/6/2022                      |
| Expenditure End    | 7/6/2022                      |
| Expenditure Amount | \$1,721,640.00                |

| Project Name       | DEMA COVID Testing Program                    |
|--------------------|---|
| Subaward ID        | SUB-0314697                                   |
| Subaward No        | 621429_17949                                  |
| Subaward Amount    | \$1,350,000.00                                |
| Subaward Type      | Contract: Purchase Order                      |
| Subrecipient Name  | Transpara EHLP LLC dba Zebra Health Solutions |
| Expenditure Start  | 7/6/2022                                      |
| Expenditure End    | 7/6/2022                                      |
| Expenditure Amount | \$737,640.00                                  |

#### Expenditure: EN-00322072

| Project Name       | DEMA COVID Testing Program    |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0211054                   |
| Subaward No        | 17949-550494                  |
| Subaward Amount    | \$19,673,520.00               |
| Subaward Type      | Contract: Definitive Contract |
| Subrecipient Name  | GOTHAMS LLC                   |
| Expenditure Start  | 1/25/2022                     |
| Expenditure End    | 3/23/2022                     |
| Expenditure Amount | \$19,542,282.80               |

#### Expenditure: EN-00321678

| Project Name       | DEMA COVID Testing Program    |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0211077                   |
| Subaward No        | 17949-621325                  |
| Subaward Amount    | \$4,776,148.00                |
| Subaward Type      | Contract: Definitive Contract |
| Subrecipient Name  | RANDOM RUBBER CHICKEN         |
| Expenditure Start  | 1/10/2022                     |
| Expenditure End    | 1/10/2022                     |
| Expenditure Amount | \$4,776,148.00                |

| Project Name | DEMA COVID Testing Program |
|--------------|----------------------------|
| Subaward ID  | SUB-0211006                |
|              |                            |

| Subaward No        | 17949-560289                  |
|--------------------|-------------------------------|
| Subaward Amount    | \$1,800,000.00                |
| Subaward Type      | Contract: Definitive Contract |
| Subrecipient Name  | VAULT MEDICAL SERVICES PA     |
| Expenditure Start  | 2/9/2022                      |
| Expenditure End    | 2/9/2022                      |
| Expenditure Amount | \$1,800,000.00                |

| Project Name       | DEMA COVID Testing Program                    |
|--------------------|---|
| Subaward ID        | SUB-0314697                                   |
| Subaward No        | 621429_17949                                  |
| Subaward Amount    | \$1,350,000.00                                |
| Subaward Type      | Contract: Purchase Order                      |
| Subrecipient Name  | Transpara EHLP LLC dba Zebra Health Solutions |
| Expenditure Start  | 4/11/2022                                     |
| Expenditure End    | 4/11/2022                                     |
| Expenditure Amount | \$612,360.00                                  |

## Expenditure: EN-01600940

| Project Name       | DSP Mobile Command Unit Vehicle |
|--------------------|---------------------------------|
| Subaward ID        | SUB-0605568                     |
| Subaward No        | 18014_22005                     |
| Subaward Amount    | \$96,918.99                     |
| Subaward Type      | Contract: Purchase Order        |
| Subrecipient Name  | MOTOROLA SOLUTIONS INC          |
| Expenditure Start  | 4/1/2023                        |
| Expenditure End    | 6/30/2023                       |
| Expenditure Amount | \$58,372.26                     |

| Project Name      | DSP Mobile Command Unit Vehicle  |
|-------------------|----------------------------------|
| Subaward ID       | SUB-0168872                      |
| Subaward No       | GSS22901-CMD_VEHV01              |
| Subaward Amount   | \$2,073,382.00                   |
| Subaward Type     | Contract: Purchase Order         |
| Subrecipient Name | ATLANTIC EMERGENCY SOLUTIONS INC |
|                   |                                  |

| Expenditure Start  | 10/1/2023      |
|--------------------|----------------|
| Expenditure End    | 12/31/2023     |
| Expenditure Amount | \$2,073,382.00 |

| Project Name       | Courts Holding Cell Upgrades |
|--------------------|------------------------------|
| Subaward ID        | SUB-0193499                  |
| Subaward No        | 18490-25395                  |
| Subaward Amount    | \$271,402.00                 |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | Jaed Corp                    |
| Expenditure Start  | 10/1/2022                    |
| Expenditure End    | 12/31/2022                   |
| Expenditure Amount | \$67,725.50                  |

#### Expenditure: EN-01187424

| Project Name       | Courts Holding Cell Upgrades |
|--------------------|------------------------------|
| Subaward ID        | SUB-0193499                  |
| Subaward No        | 18490-25395                  |
| Subaward Amount    | \$271,402.00                 |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | Jaed Corp                    |
| Expenditure Start  | 1/1/2023                     |
| Expenditure End    | 3/31/2023                    |
| Expenditure Amount | \$35,217.26                  |

## Expenditure: EN-01943978

| Project Name       | Courts Holding Cell Upgrades |
|--------------------|------------------------------|
| Subaward ID        | SUB-0193499                  |
| Subaward No        | 18490-25395                  |
| Subaward Amount    | \$271,402.00                 |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | Jaed Corp                    |
| Expenditure Start  | 10/1/2023                    |
| Expenditure End    | 12/31/2023                   |
| Expenditure Amount | \$32,508.24                  |

| Project Name       | Courts Holding Cell Upgrades |
|--------------------|------------------------------|
| Subaward ID        | SUB-0193499                  |
| Subaward No        | 18490-25395                  |
| Subaward Amount    | \$271,402.00                 |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | Jaed Corp                    |
| Expenditure Start  | 8/1/2022                     |
| Expenditure End    | 8/25/2022                    |
| Expenditure Amount | \$62,307.46                  |

| Project Name       | Courts Holding Cell Upgrades |
|--------------------|------------------------------|
| Subaward ID        | SUB-0193499                  |
| Subaward No        | 18490-25395                  |
| Subaward Amount    | \$271,402.00                 |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | Jaed Corp                    |
| Expenditure Start  | 4/1/2022                     |
| Expenditure End    | 6/30/2022                    |
| Expenditure Amount | \$18,963.14                  |

## Expenditure: EN-00798958

| Project Name       | OMB DHCI Project          |
|--------------------|---------------------------|
| Subaward ID        | SUB-0193501               |
| Subaward No        | 18396-30078               |
| Subaward Amount    | \$3,955,995.00            |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | Davis Bowen & Friedel Inc |
| Expenditure Start  | 10/1/2022                 |
| Expenditure End    | 12/31/2022                |
| Expenditure Amount | \$418,317.26              |

| Project Name | OMB DHCI Project |
|--------------|------------------|
| Subaward ID  | SUB-0193501      |
| Subaward No  | 18396-30078      |
|              |                  |

| Subaward Amount    | \$3,955,995.00            |
|--------------------|---------------------------|
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | Davis Bowen & Friedel Inc |
| Expenditure Start  | 1/1/2023                  |
| Expenditure End    | 3/31/2023                 |
| Expenditure Amount | \$435,700.70              |

| Project Name       | OMB DHCI Project             |
|--------------------|------------------------------|
| Subaward ID        | SUB-0348441                  |
| Subaward No        | 18396-17673                  |
| Subaward Amount    | \$566,679.00                 |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | WOHLSEN CONSTRUCTION COMPANY |
| Expenditure Start  | 1/1/2023                     |
| Expenditure End    | 3/31/2023                    |
| Expenditure Amount | \$140,809.02                 |

## Expenditure: EN-01602707

| Project Name       | OMB DHCI Project          |
|--------------------|---------------------------|
| Subaward ID        | SUB-0193501               |
| Subaward No        | 18396-30078               |
| Subaward Amount    | \$3,955,995.00            |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | Davis Bowen & Friedel Inc |
| Expenditure Start  | 4/1/2023                  |
| Expenditure End    | 6/30/2023                 |
| Expenditure Amount | \$409,924.22              |

| Project Name      | OMB DHCI Project             |
|-------------------|------------------------------|
| Subaward ID       | SUB-0348441                  |
| Subaward No       | 18396-17673                  |
| Subaward Amount   | \$566,679.00                 |
| Subaward Type     | Contract: Purchase Order     |
| Subrecipient Name | WOHLSEN CONSTRUCTION COMPANY |
| Expenditure Start | 4/1/2023                     |
|                   |                              |

| Expenditure End    | 6/30/2023   |
|--------------------|-------------|
| Expenditure Amount | \$26,212.16 |

| Project Name       | OMB DHCI Project          |
|--------------------|---------------------------|
| Subaward ID        | SUB-0193501               |
| Subaward No        | 18396-30078               |
| Subaward Amount    | \$3,955,995.00            |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | Davis Bowen & Friedel Inc |
| Expenditure Start  | 7/1/2023                  |
| Expenditure End    | 9/30/2023                 |
| Expenditure Amount | \$345,418.50              |

#### Expenditure: EN-01796332

| Project Name       | OMB DHCI Project             |
|--------------------|------------------------------|
| Subaward ID        | SUB-0348441                  |
| Subaward No        | 18396-17673                  |
| Subaward Amount    | \$566,679.00                 |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | WOHLSEN CONSTRUCTION COMPANY |
| Expenditure Start  | 7/1/2023                     |
| Expenditure End    | 9/30/2023                    |
| Expenditure Amount | \$29,618.37                  |

#### Expenditure: EN-01920600

| Project Name       | OMB DHCI Project          |
|--------------------|---------------------------|
| Subaward ID        | SUB-0193501               |
| Subaward No        | 18396-30078               |
| Subaward Amount    | \$3,955,995.00            |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | Davis Bowen & Friedel Inc |
| Expenditure Start  | 10/1/2023                 |
| Expenditure End    | 12/31/2023                |
| Expenditure Amount | \$828,799.52              |

| Project Name       | OMB DHCI Project          |
|--------------------|---------------------------|
| Subaward ID        | SUB-0193501               |
| Subaward No        | 18396-30078               |
| Subaward Amount    | \$3,955,995.00            |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | Davis Bowen & Friedel Inc |
| Expenditure Start  | 7/1/2022                  |
| Expenditure End    | 9/30/2022                 |
| Expenditure Amount | \$88,929.80               |

| Project Name       | OMB DHCI Project          |
|--------------------|---------------------------|
| Subaward ID        | SUB-0193501               |
| Subaward No        | 18396-30078               |
| Subaward Amount    | \$3,955,995.00            |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | Davis Bowen & Friedel Inc |
| Expenditure Start  | 4/1/2022                  |
| Expenditure End    | 6/30/2022                 |
| Expenditure Amount | \$37,000.00               |

# Expenditure: EN-00797461

| Project Name       | OMB Food Warehouse       |
|--------------------|--------------------------|
| Subaward ID        | SUB-0193498              |
| Subaward No        | 18541-25395              |
| Subaward Amount    | \$721,150.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | Jaed Corp                |
| Expenditure Start  | 10/1/2022                |
| Expenditure End    | 12/31/2022               |
| Expenditure Amount | \$90,500.75              |

| Project Name    | OMB Food Warehouse |
|-----------------|--------------------|
| Subaward ID     | SUB-0193498        |
| Subaward No     | 18541-25395        |
| Subaward Amount | \$721,150.00       |
|                 |                    |

| Subaward Type      | Contract: Purchase Order |
|--------------------|--------------------------|
| Subrecipient Name  | Jaed Corp                |
| Expenditure Start  | 1/1/2023                 |
| Expenditure End    | 3/31/2023                |
| Expenditure Amount | \$289,921.12             |

| Project Name       | OMB Food Warehouse       |
|--------------------|--------------------------|
| Subaward ID        | SUB-0193498              |
| Subaward No        | 18541-25395              |
| Subaward Amount    | \$721,150.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | Jaed Corp                |
| Expenditure Start  | 4/1/2023                 |
| Expenditure End    | 6/30/2023                |
| Expenditure Amount | \$99,827.75              |

## Expenditure: EN-01803820

| Project Name       | OMB Food Warehouse       |
|--------------------|--------------------------|
| Subaward ID        | SUB-0193498              |
| Subaward No        | 18541-25395              |
| Subaward Amount    | \$721,150.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | Jaed Corp                |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$30,607.25              |

| Project Name      | OMB Food Warehouse       |
|-------------------|--------------------------|
| Subaward ID       | SUB-0193498              |
| Subaward No       | 18541-25395              |
| Subaward Amount   | \$721,150.00             |
| Subaward Type     | Contract: Purchase Order |
| Subrecipient Name | Jaed Corp                |
| Expenditure Start | 10/1/2023                |
| Expenditure End   | 12/31/2023               |
|                   |                          |

| Project Name       | OMB Food Warehouse       |
|--------------------|--------------------------|
| Subaward ID        | SUB-0193498              |
| Subaward No        | 18541-25395              |
| Subaward Amount    | \$721,150.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | Jaed Corp                |
| Expenditure Start  | 4/1/2022                 |
| Expenditure End    | 6/30/2022                |
| Expenditure Amount | \$20,893.13              |

#### Expenditure: EN-00778897

| Project Name       | DNREC Lab                |
|--------------------|--------------------------|
| Subaward ID        | SUB-0193502              |
| Subaward No        | 18550-18283              |
| Subaward Amount    | \$1,646,200.00           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | Bernardon Delaware LLC   |
| Expenditure Start  | 9/1/2022                 |
| Expenditure End    | 12/31/2022               |
| Expenditure Amount | \$80,002.00              |

#### Expenditure: EN-01210065

| Project Name       | DNREC Lab                |
|--------------------|--------------------------|
| Subaward ID        | SUB-0193502              |
| Subaward No        | 18550-18283              |
| Subaward Amount    | \$1,646,200.00           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | Bernardon Delaware LLC   |
| Expenditure Start  | 1/1/2023                 |
| Expenditure End    | 3/31/2023                |
| Expenditure Amount | \$49,734.00              |

| Proj | DNREC Lab |
|------|-----------|
|      |           |

| Subaward ID        | SUB-0193502              |
|--------------------|--------------------------|
| Subaward No        | 18550-18283              |
| Subaward Amount    | \$1,646,200.00           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | Bernardon Delaware LLC   |
| Expenditure Start  | 4/1/2023                 |
| Expenditure End    | 6/30/2023                |
| Expenditure Amount | \$356,315.00             |

| Project Name       | DNREC Lab                |
|--------------------|--------------------------|
| Subaward ID        | SUB-0193502              |
| Subaward No        | 18550-18283              |
| Subaward Amount    | \$1,646,200.00           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | Bernardon Delaware LLC   |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$287,045.00             |

## Expenditure: EN-01917257

| Project Name       | DNREC Lab                |
|--------------------|--------------------------|
| Subaward ID        | SUB-0193502              |
| Subaward No        | 18550-18283              |
| Subaward Amount    | \$1,646,200.00           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | Bernardon Delaware LLC   |
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$378,220.00             |

| Project Name    | DNREC Lab                |
|-----------------|--------------------------|
| Subaward ID     | SUB-0193502              |
| Subaward No     | 18550-18283              |
| Subaward Amount | \$1,646,200.00           |
| Subaward Type   | Contract: Purchase Order |
|                 |                          |

| Subrecipient Name  | Bernardon Delaware LLC |
|--------------------|------------------------|
| Expenditure Start  | 4/1/2022               |
| Expenditure End    | 6/30/2022              |
| Expenditure Amount | \$9,824.00             |

| Project Name       | Judicial Branch COVID Testing Program |
|--------------------|---------------------------------------|
| Subaward ID        | SUB-0208593                           |
| Subaward No        | 18017-610035                          |
| Subaward Amount    | \$0.00                                |
| Subaward Type      | Contract: Definitive Contract         |
| Subrecipient Name  | W3 LLC DBA Healthcare IT Leaders      |
| Expenditure Start  | 7/1/2022                              |
| Expenditure End    | 9/30/2022                             |
| Expenditure Amount | (\$46,950.00)                         |

## Expenditure: EN-00320873

| Project Name       | Judicial Branch COVID Testing Program |
|--------------------|---------------------------------------|
| Subaward ID        | SUB-0208593                           |
| Subaward No        | 18017-610035                          |
| Subaward Amount    | \$0.00                                |
| Subaward Type      | Contract: Definitive Contract         |
| Subrecipient Name  | W3 LLC DBA Healthcare IT Leaders      |
| Expenditure Start  | 6/22/2021                             |
| Expenditure End    | 12/31/2021                            |
| Expenditure Amount | \$261,407.50                          |

| Project Name       | Judicial Branch COVID Testing Program |
|--------------------|---------------------------------------|
| Subaward ID        | SUB-0208593                           |
| Subaward No        | 18017-610035                          |
| Subaward Amount    | \$0.00                                |
| Subaward Type      | Contract: Definitive Contract         |
| Subrecipient Name  | W3 LLC DBA Healthcare IT Leaders      |
| Expenditure Start  | 6/22/2021                             |
| Expenditure End    | 12/31/2021                            |
| Expenditure Amount | (\$214,457.50)                        |

| Project Name       | Courts eFiling Case and Document Management |
|--------------------|---|
| Subaward ID        | SUB-0208598                                 |
| Subaward No        | 18214-17483                                 |
| Subaward Amount    | \$200,000.00                                |
| Subaward Type      | Contract: Definitive Contract               |
| Subrecipient Name  | Morgan Lewis & Bockius LLP                  |
| Expenditure Start  | 9/1/2022                                    |
| Expenditure End    | 12/31/2022                                  |
| Expenditure Amount | \$3,428.00                                  |

## Expenditure: EN-00780028

| Project Name       | Courts eFiling Case and Document Management |
|--------------------|---|
| Subaward ID        | SUB-0336530                                 |
| Subaward No        | 18214-327000                                |
| Subaward Amount    | \$800,000.00                                |
| Subaward Type      | Contract: Purchase Order                    |
| Subrecipient Name  | FSX HOLDINGS LLC                            |
| Expenditure Start  | 10/1/2022                                   |
| Expenditure End    | 12/31/2022                                  |
| Expenditure Amount | \$101,721.80                                |

#### Expenditure: EN-01187248

| Project Name       | Courts eFiling Case and Document Management |
|--------------------|---|
| Subaward ID        | SUB-0208598                                 |
| Subaward No        | 18214-17483                                 |
| Subaward Amount    | \$200,000.00                                |
| Subaward Type      | Contract: Definitive Contract               |
| Subrecipient Name  | Morgan Lewis & Bockius LLP                  |
| Expenditure Start  | 1/1/2023                                    |
| Expenditure End    | 3/31/2023                                   |
| Expenditure Amount | \$2,130.40                                  |

| Project Name | Courts eFiling Case and Document Management |
|--------------|---|
| Subaward ID  | SUB-0336530                                 |
|              |   |

| Subaward No        | 18214-327000             |
|--------------------|--------------------------|
| Subaward Amount    | \$800,000.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | FSX HOLDINGS LLC         |
| Expenditure Start  | 1/1/2023                 |
| Expenditure End    | 3/31/2023                |
| Expenditure Amount | \$227,490.12             |

| Project Name       | Courts eFiling Case and Document Management |
|--------------------|---|
| Subaward ID        | SUB-0208598                                 |
| Subaward No        | 18214-17483                                 |
| Subaward Amount    | \$200,000.00                                |
| Subaward Type      | Contract: Definitive Contract               |
| Subrecipient Name  | Morgan Lewis & Bockius LLP                  |
| Expenditure Start  | 4/1/2023                                    |
| Expenditure End    | 6/30/2023                                   |
| Expenditure Amount | \$8,668.90                                  |

## Expenditure: EN-01783026

| Project Name       | Courts eFiling Case and Document Management |
|--------------------|---|
| Subaward ID        | SUB-0208598                                 |
| Subaward No        | 18214-17483                                 |
| Subaward Amount    | \$200,000.00                                |
| Subaward Type      | Contract: Definitive Contract               |
| Subrecipient Name  | Morgan Lewis & Bockius LLP                  |
| Expenditure Start  | 7/1/2023                                    |
| Expenditure End    | 9/30/2023                                   |
| Expenditure Amount | \$27,205.90                                 |

| Project Name      | Courts eFiling Case and Document Management |
|-------------------|---|
| Subaward ID       | SUB-0208598                                 |
| Subaward No       | 18214-17483                                 |
| Subaward Amount   | \$200,000.00                                |
| Subaward Type     | Contract: Definitive Contract               |
| Subrecipient Name | Morgan Lewis & Bockius LLP                  |
|                   |   |

| Expenditure Start  | 10/1/2023   |
|--------------------|-------------|
| Expenditure End    | 12/31/2023  |
| Expenditure Amount | \$68,751.29 |

| Project Name       | Courts eFiling Case and Document Management |
|--------------------|---|
| Subaward ID        | SUB-0336530                                 |
| Subaward No        | 18214-327000                                |
| Subaward Amount    | \$800,000.00                                |
| Subaward Type      | Contract: Purchase Order                    |
| Subrecipient Name  | FSX HOLDINGS LLC                            |
| Expenditure Start  | 7/1/2022                                    |
| Expenditure End    | 9/30/2022                                   |
| Expenditure Amount | \$307,188.11                                |

#### Expenditure: EN-00624526

| Project Name       | Courts eFiling Case and Document Management |
|--------------------|---|
| Subaward ID        | SUB-0208598                                 |
| Subaward No        | 18214-17483                                 |
| Subaward Amount    | \$200,000.00                                |
| Subaward Type      | Contract: Definitive Contract               |
| Subrecipient Name  | Morgan Lewis & Bockius LLP                  |
| Expenditure Start  | 7/1/2022                                    |
| Expenditure End    | 9/30/2022                                   |
| Expenditure Amount | \$7,387.60                                  |

## Expenditure: EN-00320867

| Project Name       | Courts eFiling Case and Document Management |
|--------------------|---|
| Subaward ID        | SUB-0208598                                 |
| Subaward No        | 18214-17483                                 |
| Subaward Amount    | \$200,000.00                                |
| Subaward Type      | Contract: Definitive Contract               |
| Subrecipient Name  | Morgan Lewis & Bockius LLP                  |
| Expenditure Start  | 10/25/2021                                  |
| Expenditure End    | 12/31/2021                                  |
| Expenditure Amount | \$54,523.71                                 |

| Project Name       | Courts eFiling Case and Document Management |
|--------------------|---|
| Subaward ID        | SUB-0208598                                 |
| Subaward No        | 18214-17483                                 |
| Subaward Amount    | \$200,000.00                                |
| Subaward Type      | Contract: Definitive Contract               |
| Subrecipient Name  | Morgan Lewis & Bockius LLP                  |
| Expenditure Start  | 4/1/2022                                    |
| Expenditure End    | 6/30/2022                                   |
| Expenditure Amount | \$27,904.20                                 |

| Project Name       | Courts eFiling Case and Document Management |
|--------------------|---|
| Subaward ID        | SUB-0336530                                 |
| Subaward No        | 18214-327000                                |
| Subaward Amount    | \$800,000.00                                |
| Subaward Type      | Contract: Purchase Order                    |
| Subrecipient Name  | FSX HOLDINGS LLC                            |
| Expenditure Start  | 4/1/2022                                    |
| Expenditure End    | 6/30/2022                                   |
| Expenditure Amount | \$163,599.97                                |

## Expenditure: EN-00780054

| Project Name       | Courts eCourtroom Upgrades Expansion |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0336536                          |
| Subaward No        | 18215-472209                         |
| Subaward Amount    | \$4,873,601.81                       |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | FTR LTD                              |
| Expenditure Start  | 10/1/2022                            |
| Expenditure End    | 12/31/2022                           |
| Expenditure Amount | \$173,531.13                         |

| Project Name | Courts eCourtroom Upgrades Expansion |
|--------------|--------------------------------------|
| Subaward ID  | SUB-0336536                          |
| Subaward No  | 18215-472209                         |
|              |                                      |

| Subaward Amount    | \$4,873,601.81           |
|--------------------|--------------------------|
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | FTR LTD                  |
| Expenditure Start  | 1/1/2023                 |
| Expenditure End    | 3/31/2023                |
| Expenditure Amount | \$1,112,669.56           |

| Project Name       | Courts eCourtroom Upgrades Expansion |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0609253                          |
| Subaward No        | 18215-27762                          |
| Subaward Amount    | \$67,610.00                          |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | PSC CONTRACTING INC                  |
| Expenditure Start  | 1/1/2023                             |
| Expenditure End    | 3/31/2023                            |
| Expenditure Amount | \$51,485.00                          |

#### Expenditure: EN-01601875

| Project Name       | Courts eCourtroom Upgrades Expansion |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0336536                          |
| Subaward No        | 18215-472209                         |
| Subaward Amount    | \$4,873,601.81                       |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | FTR LTD                              |
| Expenditure Start  | 4/1/2023                             |
| Expenditure End    | 6/30/2023                            |
| Expenditure Amount | \$507,549.08                         |

| Project Name      | Courts eCourtroom Upgrades Expansion |
|-------------------|--------------------------------------|
| Subaward ID       | SUB-0336536                          |
| Subaward No       | 18215-472209                         |
| Subaward Amount   | \$4,873,601.81                       |
| Subaward Type     | Contract: Purchase Order             |
| Subrecipient Name | FTR LTD                              |
| Expenditure Start | 7/1/2023                             |
|                   |                                      |

| Expenditure End    | 9/30/2023      |
|--------------------|----------------|
| Expenditure Amount | \$1,344,924.95 |

| Project Name       | Courts eCourtroom Upgrades Expansion |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0609253                          |
| Subaward No        | 18215-27762                          |
| Subaward Amount    | \$67,610.00                          |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | PSC CONTRACTING INC                  |
| Expenditure Start  | 7/1/2023                             |
| Expenditure End    | 9/30/2023                            |
| Expenditure Amount | \$5,825.00                           |

#### Expenditure: EN-01917337

| Project Name       | Courts eCourtroom Upgrades Expansion |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0609253                          |
| Subaward No        | 18215-27762                          |
| Subaward Amount    | \$67,610.00                          |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | PSC CONTRACTING INC                  |
| Expenditure Start  | 10/1/2023                            |
| Expenditure End    | 12/31/2023                           |
| Expenditure Amount | \$10,300.00                          |

#### Expenditure: EN-01917338

| Project Name       | Courts eCourtroom Upgrades Expansion |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0336536                          |
| Subaward No        | 18215-472209                         |
| Subaward Amount    | \$4,873,601.81                       |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | FTR LTD                              |
| Expenditure Start  | 10/1/2023                            |
| Expenditure End    | 12/31/2023                           |
| Expenditure Amount | \$745,915.46                         |

| Project Name       | Courts eCourtroom Upgrades Expansion |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0336536                          |
| Subaward No        | 18215-472209                         |
| Subaward Amount    | \$4,873,601.81                       |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | FTR LTD                              |
| Expenditure Start  | 7/1/2022                             |
| Expenditure End    | 9/30/2022                            |
| Expenditure Amount | \$651,609.33                         |

| Project Name       | Courts Backlog Assistance |
|--------------------|---------------------------|
| Subaward ID        | SUB-0336532               |
| Subaward No        | 18489-49758               |
| Subaward Amount    | \$55,166.77               |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | Info Solutions LLC        |
| Expenditure Start  | 4/1/2023                  |
| Expenditure End    | 6/30/2023                 |
| Expenditure Amount | \$55,166.77               |

## Expenditure: EN-01917340

| Project Name       | Courts Backlog Assistance |
|--------------------|---------------------------|
| Subaward ID        | SUB-0336532               |
| Subaward No        | 18489-49758               |
| Subaward Amount    | \$55,166.77               |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | Info Solutions LLC        |
| Expenditure Start  | 10/1/2023                 |
| Expenditure End    | 12/31/2023                |
| Expenditure Amount | (\$43,167.00)             |

| Project Name    | DelDOT CDL Training |
|-----------------|---------------------|
| Subaward ID     | SUB-0220001         |
| Subaward No     | 18298-17144         |
| Subaward Amount | \$238,000.00        |
|                 |                     |

| Subaward Type      | Contract: Definitive Contract   |
|--------------------|---------------------------------|
| Subrecipient Name  | Bordentown Driver Training, LLC |
| Expenditure Start  | 9/1/2022                        |
| Expenditure End    | 12/31/2022                      |
| Expenditure Amount | \$63,750.00                     |

| Project Name       | DelDOT CDL Training             |
|--------------------|---------------------------------|
| Subaward ID        | SUB-0220001                     |
| Subaward No        | 18298-17144                     |
| Subaward Amount    | \$238,000.00                    |
| Subaward Type      | Contract: Definitive Contract   |
| Subrecipient Name  | Bordentown Driver Training, LLC |
| Expenditure Start  | 9/1/2022                        |
| Expenditure End    | 12/31/2022                      |
| Expenditure Amount | (\$3,750.00)                    |

## Expenditure: EN-01171894

| Project Name       | DelDOT CDL Training             |
|--------------------|---------------------------------|
| Subaward ID        | SUB-0220001                     |
| Subaward No        | 18298-17144                     |
| Subaward Amount    | \$238,000.00                    |
| Subaward Type      | Contract: Definitive Contract   |
| Subrecipient Name  | Bordentown Driver Training, LLC |
| Expenditure Start  | 1/1/2023                        |
| Expenditure End    | 3/30/2023                       |
| Expenditure Amount | \$70,250.00                     |

| Project Name      | DelDOT CDL Training             |
|-------------------|---------------------------------|
| Subaward ID       | SUB-0220001                     |
| Subaward No       | 18298-17144                     |
| Subaward Amount   | \$238,000.00                    |
| Subaward Type     | Contract: Definitive Contract   |
| Subrecipient Name | Bordentown Driver Training, LLC |
| Expenditure Start | 4/1/2023                        |
| Expenditure End   | 6/30/2023                       |
|                   |                                 |

| Project Name       | DelDOT CDL Training             |
|--------------------|---------------------------------|
| Subaward ID        | SUB-0220001                     |
| Subaward No        | 18298-17144                     |
| Subaward Amount    | \$238,000.00                    |
| Subaward Type      | Contract: Definitive Contract   |
| Subrecipient Name  | Bordentown Driver Training, LLC |
| Expenditure Start  | 10/1/2023                       |
| Expenditure End    | 12/31/2023                      |
| Expenditure Amount | \$750.00                        |

#### Expenditure: EN-00603349

| Project Name       | DelDOT CDL Training             |
|--------------------|---------------------------------|
| Subaward ID        | SUB-0220001                     |
| Subaward No        | 18298-17144                     |
| Subaward Amount    | \$238,000.00                    |
| Subaward Type      | Contract: Definitive Contract   |
| Subrecipient Name  | Bordentown Driver Training, LLC |
| Expenditure Start  | 7/1/2022                        |
| Expenditure End    | 9/30/2022                       |
| Expenditure Amount | \$56,250.00                     |

#### Expenditure: EN-00329840

| Project Name       | DelDOT CDL Training             |
|--------------------|---------------------------------|
| Subaward ID        | SUB-0220001                     |
| Subaward No        | 18298-17144                     |
| Subaward Amount    | \$238,000.00                    |
| Subaward Type      | Contract: Definitive Contract   |
| Subrecipient Name  | Bordentown Driver Training, LLC |
| Expenditure Start  | 10/27/2021                      |
| Expenditure End    | 10/27/2021                      |
| Expenditure Amount | \$3,750.00                      |

| Project Name | DelDOT CDL Training |
|--------------|---------------------|
|              |                     |

| Subaward ID        | SUB-0220001                     |
|--------------------|---------------------------------|
| Subaward No        | 18298-17144                     |
| Subaward Amount    | \$238,000.00                    |
| Subaward Type      | Contract: Definitive Contract   |
| Subrecipient Name  | Bordentown Driver Training, LLC |
| Expenditure Start  | 1/20/2022                       |
| Expenditure End    | 2/3/2022                        |
| Expenditure Amount | \$18,750.00                     |

| Project Name       | DelDOT Keep DE Litter Free    |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0219998                   |
| Subaward No        | 18300-24324                   |
| Subaward Amount    | \$228,662.70                  |
| Subaward Type      | Contract: Definitive Contract |
| Subrecipient Name  | Goodwill DE and DE County     |
| Expenditure Start  | 7/1/2022                      |
| Expenditure End    | 10/31/2022                    |
| Expenditure Amount | \$37,960.18                   |

# Expenditure: EN-00329923

| Project Name       | DelDOT Keep DE Litter Free    |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0219998                   |
| Subaward No        | 18300-24324                   |
| Subaward Amount    | \$228,662.70                  |
| Subaward Type      | Contract: Definitive Contract |
| Subrecipient Name  | Goodwill DE and DE County     |
| Expenditure Start  | 10/21/2021                    |
| Expenditure End    | 10/21/2021                    |
| Expenditure Amount | \$10,639.11                   |

| Project Name    | DelDOT Keep DE Litter Free    |
|-----------------|-------------------------------|
| Subaward ID     | SUB-0219998                   |
| Subaward No     | 18300-24324                   |
| Subaward Amount | \$228,662.70                  |
| Subaward Type   | Contract: Definitive Contract |
|                 |                               |

| Subrecipient Name  | Goodwill DE and DE County |
|--------------------|---------------------------|
| Expenditure Start  | 1/5/2022                  |
| Expenditure End    | 3/31/2022                 |
| Expenditure Amount | \$97,768.04               |

| Project Name       | DelDOT Keep DE Litter Free    |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0219998                   |
| Subaward No        | 18300-24324                   |
| Subaward Amount    | \$228,662.70                  |
| Subaward Type      | Contract: Definitive Contract |
| Subrecipient Name  | Goodwill DE and DE County     |
| Expenditure Start  | 4/1/2022                      |
| Expenditure End    | 6/30/2022                     |
| Expenditure Amount | \$82,295.37                   |

## Expenditure: EN-01187619

| Project Name       | DelDOT Western Sussex NSTI |
|--------------------|----------------------------|
| Subaward ID        | SUB-0609309                |
| Subaward No        | 18299-31213                |
| Subaward Amount    | \$80,000.00                |
| Subaward Type      | Contract: Purchase Order   |
| Subrecipient Name  | UNIVERSITY OF MD           |
| Expenditure Start  | 1/1/2023                   |
| Expenditure End    | 3/31/2023                  |
| Expenditure Amount | \$60,952.42                |

| Project Name       | DPH POINT OF CARE RAPID TESTING |
|--------------------|---------------------------------|
| Subaward ID        | SUB-0034261                     |
| Subaward No        | 0000018807                      |
| Subaward Amount    | \$310,496.28                    |
| Subaward Type      | Contract: Purchase Order        |
| Subrecipient Name  | FISHER SCIENTIFIC               |
| Expenditure Start  | 10/1/2022                       |
| Expenditure End    | 12/31/2022                      |
| Expenditure Amount | \$386,601.66                    |

| Project Name       | DPH POINT OF CARE RAPID TESTING |
|--------------------|---------------------------------|
| Subaward ID        | SUB-0034261                     |
| Subaward No        | 0000018807                      |
| Subaward Amount    | \$310,496.28                    |
| Subaward Type      | Contract: Purchase Order        |
| Subrecipient Name  | FISHER SCIENTIFIC               |
| Expenditure Start  | 1/1/2023                        |
| Expenditure End    | 3/31/2023                       |
| Expenditure Amount | (\$643,492.76)                  |

## Expenditure: EN-01179569

| Project Name       | DPH POINT OF CARE RAPID TESTING      |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0034260                          |
| Subaward No        | 0000256563                           |
| Subaward Amount    | \$103,558.32                         |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | "ABBOTT RAPID DX NORTH AMERICA, LLC" |
| Expenditure Start  | 1/1/2023                             |
| Expenditure End    | 3/31/2023                            |
| Expenditure Amount | (\$945,933.37)                       |

#### Expenditure: EN-01179960

| Project Name       | DPH POINT OF CARE RAPID TESTING |
|--------------------|---------------------------------|
| Subaward ID        | SUB-0034262                     |
| Subaward No        | 0000023798                      |
| Subaward Amount    | \$96,000.00                     |
| Subaward Type      | Contract: Purchase Order        |
| Subrecipient Name  | ANP TECHNOLOGIES INC            |
| Expenditure Start  | 1/1/2023                        |
| Expenditure End    | 3/31/2023                       |
| Expenditure Amount | (\$96,000.00)                   |

| Project Name | DPH POINT OF CARE RAPID TESTING |
|--------------|---------------------------------|
| Subaward ID  | SUB-0034260                     |
|              |                                 |

| Subaward No        | 0000256563                           |
|--------------------|--------------------------------------|
| Subaward Amount    | \$103,558.32                         |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | "ABBOTT RAPID DX NORTH AMERICA, LLC" |
| Expenditure Start  | 4/1/2023                             |
| Expenditure End    | 6/30/2023                            |
| Expenditure Amount | \$103,558.32                         |

| Project Name       | DPH POINT OF CARE RAPID TESTING |
|--------------------|---------------------------------|
| Subaward ID        | SUB-0034262                     |
| Subaward No        | 0000023798                      |
| Subaward Amount    | \$96,000.00                     |
| Subaward Type      | Contract: Purchase Order        |
| Subrecipient Name  | ANP TECHNOLOGIES INC            |
| Expenditure Start  | 7/1/2022                        |
| Expenditure End    | 9/30/2022                       |
| Expenditure Amount | \$96,000.00                     |

## Expenditure: EN-00624430

| Project Name       | DPH POINT OF CARE RAPID TESTING |
|--------------------|---------------------------------|
| Subaward ID        | SUB-0034261                     |
| Subaward No        | 0000018807                      |
| Subaward Amount    | \$310,496.28                    |
| Subaward Type      | Contract: Purchase Order        |
| Subrecipient Name  | FISHER SCIENTIFIC               |
| Expenditure Start  | 7/1/2022                        |
| Expenditure End    | 9/30/2022                       |
| Expenditure Amount | (\$508,901.85)                  |

| Project Name      | DPH POINT OF CARE RAPID TESTING |
|-------------------|---------------------------------|
| Subaward ID       | SUB-0034261                     |
| Subaward No       | 0000018807                      |
| Subaward Amount   | \$310,496.28                    |
| Subaward Type     | Contract: Purchase Order        |
| Subrecipient Name | FISHER SCIENTIFIC               |
|                   |                                 |

| Expenditure Start  | 4/1/2022     |
|--------------------|--------------|
| Expenditure End    | 6/30/2022    |
| Expenditure Amount | \$536,354.79 |

| Project Name       | DPH POINT OF CARE RAPID TESTING |
|--------------------|---------------------------------|
| Subaward ID        | SUB-0034262                     |
| Subaward No        | 0000023798                      |
| Subaward Amount    | \$96,000.00                     |
| Subaward Type      | Contract: Purchase Order        |
| Subrecipient Name  | ANP TECHNOLOGIES INC            |
| Expenditure Start  | 10/24/2021                      |
| Expenditure End    | 12/31/2021                      |
| Expenditure Amount | \$96,000.00                     |

#### Expenditure: EN-00047104

| Project Name       | DPH POINT OF CARE RAPID TESTING |
|--------------------|---------------------------------|
| Subaward ID        | SUB-0034261                     |
| Subaward No        | 0000018807                      |
| Subaward Amount    | \$310,496.28                    |
| Subaward Type      | Contract: Purchase Order        |
| Subrecipient Name  | FISHER SCIENTIFIC               |
| Expenditure Start  | 10/4/2021                       |
| Expenditure End    | 12/31/2021                      |
| Expenditure Amount | \$264,414.44                    |

## Expenditure: EN-00047105

| Project Name       | DPH POINT OF CARE RAPID TESTING |
|--------------------|---------------------------------|
| Subaward ID        | SUB-0034261                     |
| Subaward No        | 0000018807                      |
| Subaward Amount    | \$310,496.28                    |
| Subaward Type      | Contract: Purchase Order        |
| Subrecipient Name  | FISHER SCIENTIFIC               |
| Expenditure Start  | 9/29/2021                       |
| Expenditure End    | 12/31/2021                      |
| Expenditure Amount | \$275,520.00                    |

| Project Name       | DPH POINT OF CARE RAPID TESTING      |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0034260                          |
| Subaward No        | 0000256563                           |
| Subaward Amount    | \$103,558.32                         |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | "ABBOTT RAPID DX NORTH AMERICA, LLC" |
| Expenditure Start  | 10/22/2021                           |
| Expenditure End    | 12/31/2021                           |
| Expenditure Amount | \$945,933.37                         |

| Project Name       | DHSS DPH Lab                |
|--------------------|-----------------------------|
| Subaward ID        | SUB-0720324                 |
| Subaward No        | 18470-226303                |
| Subaward Amount    | \$232,000.00                |
| Subaward Type      | Contract: Purchase Order    |
| Subrecipient Name  | U S ELECTRICAL SERVICES Inc |
| Expenditure Start  | 7/1/2023                    |
| Expenditure End    | 9/30/2023                   |
| Expenditure Amount | \$1,687.60                  |

## Expenditure: EN-01920666

| Project Name       | DHSS DPH Lab                |
|--------------------|-----------------------------|
| Subaward ID        | SUB-0720324                 |
| Subaward No        | 18470-226303                |
| Subaward Amount    | \$232,000.00                |
| Subaward Type      | Contract: Purchase Order    |
| Subrecipient Name  | U S ELECTRICAL SERVICES Inc |
| Expenditure Start  | 10/1/2023                   |
| Expenditure End    | 12/31/2023                  |
| Expenditure Amount | \$56,400.46                 |

| Project Name | DHSS DPH Lab |
|--------------|--------------|
| Subaward ID  | SUB-0836378  |
| Subaward No  | 18470-29265  |
|              |              |

| Subaward Amount    | \$277,402.86             |
|--------------------|--------------------------|
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | Town of Smyrna           |
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$277,402.86             |

| Project Name       | DHSS Health Data System  |
|--------------------|--------------------------|
| Subaward ID        | SUB-0222469              |
| Subaward No        | 0000018102               |
| Subaward Amount    | \$377,200.15             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | COMPUTER AID INC         |
| Expenditure Start  | 10/1/2022                |
| Expenditure End    | 12/31/2022               |
| Expenditure Amount | \$141,054.00             |

## Expenditure: EN-01180305

| Project Name       | DHSS Health Data System  |
|--------------------|--------------------------|
| Subaward ID        | SUB-0222469              |
| Subaward No        | 0000018102               |
| Subaward Amount    | \$377,200.15             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | COMPUTER AID INC         |
| Expenditure Start  | 2/3/2023                 |
| Expenditure End    | 3/31/2023                |
| Expenditure Amount | \$79,529.00              |

| Project Name      | DHSS Health Data System              |
|-------------------|--------------------------------------|
| Subaward ID       | SUB-0606340                          |
| Subaward No       | 18574-630238                         |
| Subaward Amount   | \$1,321,415.00                       |
| Subaward Type     | Contract: Purchase Order             |
| Subrecipient Name | GUIDESOFT INC DBA KNOWLEDGE SERVICES |
| Expenditure Start | 4/1/2023                             |
|                   |                                      |

| Expenditure End    | 6/30/2023    |
|--------------------|--------------|
| Expenditure Amount | \$233,661.00 |

| Project Name       | DHSS Health Data System              |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0606340                          |
| Subaward No        | 18574-630238                         |
| Subaward Amount    | \$1,321,415.00                       |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | GUIDESOFT INC DBA KNOWLEDGE SERVICES |
| Expenditure Start  | 7/1/2023                             |
| Expenditure End    | 9/30/2023                            |
| Expenditure Amount | \$467,391.00                         |

#### Expenditure: EN-01920682

| Project Name       | DHSS Health Data System              |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0606340                          |
| Subaward No        | 18574-630238                         |
| Subaward Amount    | \$1,321,415.00                       |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | GUIDESOFT INC DBA KNOWLEDGE SERVICES |
| Expenditure Start  | 10/1/2023                            |
| Expenditure End    | 12/31/2023                           |
| Expenditure Amount | \$194,530.00                         |

#### Expenditure: EN-00624481

| Project Name       | DHSS Health Data System  |
|--------------------|--------------------------|
| Subaward ID        | SUB-0222469              |
| Subaward No        | 0000018102               |
| Subaward Amount    | \$377,200.15             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | COMPUTER AID INC         |
| Expenditure Start  | 7/1/2022                 |
| Expenditure End    | 9/30/2022                |
| Expenditure Amount | \$146,408.00             |

| Project Name       | DHSS Health Data System  |
|--------------------|--------------------------|
| Subaward ID        | SUB-0222469              |
| Subaward No        | 0000018102               |
| Subaward Amount    | \$377,200.15             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | COMPUTER AID INC         |
| Expenditure Start  | 4/1/2022                 |
| Expenditure End    | 6/30/2022                |
| Expenditure Amount | \$10,209.15              |

| Project Name       | DE NATL GUARD MOBILE BARRIERS      |
|--------------------|------------------------------------|
| Subaward ID        | SUB-0195100                        |
| Subaward No        | 0000586945                         |
| Subaward Amount    | \$958,380.00                       |
| Subaward Type      | Contract: Purchase Order           |
| Subrecipient Name  | Advanced Security Technologies LLC |
| Expenditure Start  | 7/1/2022                           |
| Expenditure End    | 9/30/2022                          |
| Expenditure Amount | \$219,113.00                       |

## Expenditure: EN-00302698

| Project Name       | DE NATL GUARD MOBILE BARRIERS |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0195108                   |
| Subaward No        | 0000587078                    |
| Subaward Amount    | \$0.00                        |
| Subaward Type      | Contract: Purchase Order      |
| Subrecipient Name  | Davis Bowen & Friedel Inc     |
| Expenditure Start  | 3/3/2022                      |
| Expenditure End    | 3/3/2022                      |
| Expenditure Amount | \$0.00                        |

| Project Name    | DE NATL GUARD MOBILE BARRIERS |
|-----------------|-------------------------------|
| Subaward ID     | SUB-0195100                   |
| Subaward No     | 0000586945                    |
| Subaward Amount | \$958,380.00                  |
|                 |                               |

| Subaward Type      | Contract: Purchase Order           |
|--------------------|------------------------------------|
| Subrecipient Name  | Advanced Security Technologies LLC |
| Expenditure Start  | 3/3/2022                           |
| Expenditure End    | 3/3/2022                           |
| Expenditure Amount | \$245,970.00                       |

| Project Name       | DE NATL GUARD MOBILE BARRIERS      |
|--------------------|------------------------------------|
| Subaward ID        | SUB-0195100                        |
| Subaward No        | 0000586945                         |
| Subaward Amount    | \$958,380.00                       |
| Subaward Type      | Contract: Purchase Order           |
| Subrecipient Name  | Advanced Security Technologies LLC |
| Expenditure Start  | 5/10/2022                          |
| Expenditure End    | 6/8/2022                           |
| Expenditure Amount | \$493,297.00                       |

# Expenditure: EN-00435963

| Project Name       | DOJ Technology Upgrade   |
|--------------------|--------------------------|
| Subaward ID        | SUB-0336525              |
| Subaward No        | 18508-33778              |
| Subaward Amount    | \$329,970.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | DELL MARKETING LP        |
| Expenditure Start  | 4/1/2022                 |
| Expenditure End    | 6/30/2022                |
| Expenditure Amount | \$329,970.00             |

| Project Name      | DHSS AFFORDABLE CARE ACT MARKETPLACE      |
|-------------------|---|
| Subaward ID       | SUB-0034259                               |
| Subaward No       | 0000024928                                |
| Subaward Amount   | \$0.00                                    |
| Subaward Type     | Contract: Definitive Contract             |
| Subrecipient Name | Aloysius, Butler & Clark Associates, Inc. |
| Expenditure Start | 10/1/2022                                 |
| Expenditure End   | 12/31/2022                                |
|                   |   |

| Project Name       | DHSS AFFORDABLE CARE ACT MARKETPLACE      |
|--------------------|---|
| Subaward ID        | SUB-0034259                               |
| Subaward No        | 0000024928                                |
| Subaward Amount    | \$0.00                                    |
| Subaward Type      | Contract: Definitive Contract             |
| Subrecipient Name  | Aloysius, Butler & Clark Associates, Inc. |
| Expenditure Start  | 4/1/2023                                  |
| Expenditure End    | 6/30/2023                                 |
| Expenditure Amount | (\$31,206.47)                             |

#### Expenditure: EN-00624456

| Project Name       | DHSS AFFORDABLE CARE ACT MARKETPLACE      |
|--------------------|---|
| Subaward ID        | SUB-0034259                               |
| Subaward No        | 0000024928                                |
| Subaward Amount    | \$0.00                                    |
| Subaward Type      | Contract: Definitive Contract             |
| Subrecipient Name  | Aloysius, Butler & Clark Associates, Inc. |
| Expenditure Start  | 7/1/2022                                  |
| Expenditure End    | 9/30/2022                                 |
| Expenditure Amount | \$2,584.12                                |

#### Expenditure: EN-00333567

| Project Name       | DHSS AFFORDABLE CARE ACT MARKETPLACE      |
|--------------------|---|
| Subaward ID        | SUB-0034259                               |
| Subaward No        | 0000024928                                |
| Subaward Amount    | \$0.00                                    |
| Subaward Type      | Contract: Definitive Contract             |
| Subrecipient Name  | Aloysius, Butler & Clark Associates, Inc. |
| Expenditure Start  | 2/1/2022                                  |
| Expenditure End    | 2/1/2022                                  |
| Expenditure Amount | \$13,360.00                               |
|                    |   |

| Project Name | DHSS AFFORDABLE CARE ACT MARKETPLACE |
|--------------|--------------------------------------|

| Subaward ID        | SUB-0034259                               |
|--------------------|---|
| Subaward No        | 0000024928                                |
| Subaward Amount    | \$0.00                                    |
| Subaward Type      | Contract: Definitive Contract             |
| Subrecipient Name  | Aloysius, Butler & Clark Associates, Inc. |
| Expenditure Start  | 4/1/2022                                  |
| Expenditure End    | 6/30/2022                                 |
| Expenditure Amount | \$2,714.13                                |

| Project Name       | DHSS Youth Risk Behavior Surveillance System |
|--------------------|--|
| Subaward ID        | SUB-0606332                                  |
| Subaward No        | 18362-171231                                 |
| Subaward Amount    | \$150,000.00                                 |
| Subaward Type      | Contract: Purchase Order                     |
| Subrecipient Name  | ABT SRBI INC                                 |
| Expenditure Start  | 7/1/2023                                     |
| Expenditure End    | 9/30/2023                                    |
| Expenditure Amount | \$76,392.49                                  |

# Expenditure: EN-01796329

| Project Name       | DHSS Youth Risk Behavior Surveillance System |
|--------------------|--|
| Subaward ID        | SUB-0796688                                  |
| Subaward No        | 18362-24928                                  |
| Subaward Amount    | \$156,000.00                                 |
| Subaward Type      | Contract: Purchase Order                     |
| Subrecipient Name  | Aloysius, Butler & Clark Associates, Inc.    |
| Expenditure Start  | 7/1/2023                                     |
| Expenditure End    | 9/30/2023                                    |
| Expenditure Amount | \$6,085.00                                   |

| Project Name    | DHSS Youth Risk Behavior Surveillance System |
|-----------------|--|
| Subaward ID     | SUB-0606332                                  |
| Subaward No     | 18362-171231                                 |
| Subaward Amount | \$150,000.00                                 |
| Subaward Type   | Contract: Purchase Order                     |
|                 |  |

| Subrecipient Name  | ABT SRBI INC |
|--------------------|--------------|
| Expenditure Start  | 10/1/2023    |
| Expenditure End    | 12/31/2023   |
| Expenditure Amount | \$73,607.51  |

| Project Name       | DHSS Youth Risk Behavior Surveillance System |
|--------------------|--|
| Subaward ID        | SUB-0796688                                  |
| Subaward No        | 18362-24928                                  |
| Subaward Amount    | \$156,000.00                                 |
| Subaward Type      | Contract: Purchase Order                     |
| Subrecipient Name  | Aloysius, Butler & Clark Associates, Inc.    |
| Expenditure Start  | 10/1/2023                                    |
| Expenditure End    | 12/31/2023                                   |
| Expenditure Amount | \$7,080.00                                   |

## Expenditure: EN-00446872

| Project Name       | DELAWARE HOSPITAL RELIEF FUND |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0345807                   |
| Subaward No        | 18205-7285                    |
| Subaward Amount    | \$144,444.44                  |
| Subaward Type      | Grant: Lump Sum Payment(s)    |
| Subrecipient Name  | UHS of Dover LLC              |
| Expenditure Start  | 10/26/2021                    |
| Expenditure End    | 12/31/2021                    |
| Expenditure Amount | \$144,444.44                  |

| Project Name       | DELAWARE HOSPITAL RELIEF FUND |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0034111                   |
| Subaward No        | 1007785                       |
| Subaward Amount    | \$145,833.33                  |
| Subaward Type      | Grant: Lump Sum Payment(s)    |
| Subrecipient Name  | UHS of Rockford LLC           |
| Expenditure Start  | 10/26/2021                    |
| Expenditure End    | 10/26/2021                    |
| Expenditure Amount | \$145,833.33                  |

| Project Name       | DELAWARE HOSPITAL RELIEF FUND       |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0034149                         |
| Subaward No        | 077069243                           |
| Subaward Amount    | \$12,086,183.31                     |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | Christiana Care Health Services Inc |
| Expenditure Start  | 8/1/2021                            |
| Expenditure End    | 12/31/2021                          |
| Expenditure Amount | \$12,086,183.31                     |

## Expenditure: EN-00047047

| Project Name       | DELAWARE HOSPITAL RELIEF FUND  |
|--------------------|--------------------------------|
| Subaward ID        | SUB-0034145                    |
| Subaward No        | 148403731                      |
| Subaward Amount    | \$4,124,487.00                 |
| Subaward Type      | Grant: Lump Sum Payment(s)     |
| Subrecipient Name  | Bayhealth Medical Center, Inc. |
| Expenditure Start  | 8/1/2021                       |
| Expenditure End    | 12/31/2021                     |
| Expenditure Amount | \$4,124,487.00                 |

#### Expenditure: EN-00047048

| Project Name       | DELAWARE HOSPITAL RELIEF FUND |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0034143                   |
| Subaward No        | 069885374                     |
| Subaward Amount    | \$2,154,582.76                |
| Subaward Type      | Grant: Lump Sum Payment(s)    |
| Subrecipient Name  | Beebe Medical Center Inc      |
| Expenditure Start  | 8/1/2021                      |
| Expenditure End    | 12/31/2021                    |
| Expenditure Amount | \$2,154,582.76                |

| Project Name | DELAWARE HOSPITAL RELIEF FUND |
|--------------|-------------------------------|
| Subaward ID  | SUB-0034136                   |
|              |                               |

| Subaward No        | 071620025                                |
|--------------------|--|
| Subaward Amount    | \$2,015,731.87                           |
| Subaward Type      | Grant: Lump Sum Payment(s)               |
| Subrecipient Name  | Tidal Health Nanticoke Memorial Hospital |
| Expenditure Start  | 8/1/2021                                 |
| Expenditure End    | 12/31/2021                               |
| Expenditure Amount | \$2,015,731.87                           |

| Project Name       | DELAWARE HOSPITAL RELIEF FUND |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0034115                   |
| Subaward No        | 91143568                      |
| Subaward Amount    | \$113,888.89                  |
| Subaward Type      | Grant: Lump Sum Payment(s)    |
| Subrecipient Name  | SUN Behavioral Delaware       |
| Expenditure Start  | 8/1/2021                      |
| Expenditure End    | 12/31/2021                    |
| Expenditure Amount | \$113,888.89                  |

## Expenditure: EN-00047051

| Project Name       | DELAWARE HOSPITAL RELIEF FUND |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0034114                   |
| Subaward No        | 78058344                      |
| Subaward Amount    | \$1,984,952.12                |
| Subaward Type      | Grant: Lump Sum Payment(s)    |
| Subrecipient Name  | St. Francis Hospital, Inc     |
| Expenditure Start  | 8/1/2021                      |
| Expenditure End    | 12/31/2021                    |
| Expenditure Amount | \$1,984,952.12                |

| Project Name      | DELAWARE HOSPITAL RELIEF FUND |
|-------------------|-------------------------------|
| Subaward ID       | SUB-0034141                   |
| Subaward No       | 038004941                     |
| Subaward Amount   | \$2,134,062.93                |
| Subaward Type     | Grant: Lump Sum Payment(s)    |
| Subrecipient Name | The Nemours Foundation        |
|                   |                               |

| Expenditure Start  | 8/1/2021       |
|--------------------|----------------|
| Expenditure End    | 12/31/2021     |
| Expenditure Amount | \$2,134,062.93 |

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0221714                         |
| Subaward No        | 550719                              |
| Subaward Amount    | \$728,699.00                        |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | SNH DEL TENANT LLC- SHIPLEY MANOR   |
| Expenditure Start  | 7/1/2023                            |
| Expenditure End    | 9/30/2023                           |
| Expenditure Amount | \$457,048.00                        |

#### Expenditure: EN-01813982

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0345729                         |
| Subaward No        | 18205-Foulk                         |
| Subaward Amount    | \$0.00                              |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | Foulk Manor North                   |
| Expenditure Start  | 7/1/2023                            |
| Expenditure End    | 9/30/2023                           |
| Expenditure Amount | (\$134,414.00)                      |

## Expenditure: EN-01813984

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0345726                         |
| Subaward No        | 18205-Millcroft                     |
| Subaward Amount    | \$0.00                              |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | Millcroft                           |
| Expenditure Start  | 7/1/2023                            |
| Expenditure End    | 9/30/2023                           |
| Expenditure Amount | (\$299,892.00)                      |

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0034255                         |
| Subaward No        | 0000551705                          |
| Subaward Amount    | \$701,375.00                        |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | New Castle Health & Rehab           |
| Expenditure Start  | 12/17/2021                          |
| Expenditure End    | 12/17/2021                          |
| Expenditure Amount | \$701,375.00                        |

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND  |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0221713                          |
| Subaward No        | 552391                               |
| Subaward Amount    | \$174,304.00                         |
| Subaward Type      | Grant: Lump Sum Payment(s)           |
| Subrecipient Name  | ACTS RETIREMENT LIFE COMMUNITIES INC |
| Expenditure Start  | 1/5/2022                             |
| Expenditure End    | 1/5/2022                             |
| Expenditure Amount | \$174,304.00                         |

## Expenditure: EN-00333059

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0221714                         |
| Subaward No        | 550719                              |
| Subaward Amount    | \$728,699.00                        |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | SNH DEL TENANT LLC- SHIPLEY MANOR   |
| Expenditure Start  | 3/15/2022                           |
| Expenditure End    | 3/15/2022                           |
| Expenditure Amount | \$705,957.00                        |

| Project Name | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------|-------------------------------------|
| Subaward ID  | SUB-0034248                         |
| Subaward No  | 117517190                           |
|              |                                     |

| Subaward Amount    | \$527,989.00               |
|--------------------|----------------------------|
| Subaward Type      | Grant: Lump Sum Payment(s) |
| Subrecipient Name  | Churchman Village          |
| Expenditure Start  | 12/17/2021                 |
| Expenditure End    | 12/17/2021                 |
| Expenditure Amount | \$527,989.00               |

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0034256                         |
| Subaward No        | 075530444                           |
| Subaward Amount    | \$468,540.00                        |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | Newark Manor Nursing Home           |
| Expenditure Start  | 12/20/2021                          |
| Expenditure End    | 12/20/2021                          |
| Expenditure Amount | \$468,540.00                        |

#### Expenditure: EN-00333061

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0221715                         |
| Subaward No        | 583491                              |
| Subaward Amount    | \$176,234.00                        |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | WELL BL OPCO LLC                    |
| Expenditure Start  | 3/15/2022                           |
| Expenditure End    | 3/15/2022                           |
| Expenditure Amount | \$176,234.00                        |

| Project Name      | DELAWARE HEALTHCARE FACILITIES FUND              |
|-------------------|--|
| Subaward ID       | SUB-0034244                                      |
| Subaward No       | 002147638  |
| Subaward Amount   | \$701,549.00                                     |
| Subaward Type     | Grant: Lump Sum Payment(s)                       |
| Subrecipient Name | Regency Healthcare and Rehabilitation Center LLC |
| Expenditure Start | 12/14/2021                                       |
|                   |  |

| Expenditure End    | 12/14/2021   |
|--------------------|--------------|
| Expenditure Amount | \$701,549.00 |

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND       |
|--------------------|---|
| Subaward ID        | SUB-0034257                               |
| Subaward No        | 018054380                                 |
| Subaward Amount    | \$892,695.00                              |
| Subaward Type      | Grant: Lump Sum Payment(s)                |
| Subrecipient Name  | Pinnacle Rehabilitation and Health Center |
| Expenditure Start  | 12/20/2021                                |
| Expenditure End    | 12/20/2021                                |
| Expenditure Amount | \$892,695.00                              |

#### Expenditure: EN-00333094

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0034246                         |
| Subaward No        | 0000606006                          |
| Subaward Amount    | \$1,223,476.00                      |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | Coral Springs Rehab & Healthcare    |
| Expenditure Start  | 12/16/2021                          |
| Expenditure End    | 12/16/2021                          |
| Expenditure Amount | \$1,223,476.00                      |

#### Expenditure: EN-00333095

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0034247                         |
| Subaward No        | 077078855                           |
| Subaward Amount    | \$527,892.00                        |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | Kutz Rehab & Nursing                |
| Expenditure Start  | 12/16/2021                          |
| Expenditure End    | 12/16/2021                          |
| Expenditure Amount | \$527,892.00                        |

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0034249                         |
| Subaward No        | 021057047                           |
| Subaward Amount    | \$592,833.00                        |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | Kentmere Rehab & Healthcare         |
| Expenditure Start  | 12/17/2021                          |
| Expenditure End    | 12/17/2021                          |
| Expenditure Amount | \$592,833.00                        |

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0034258                         |
| Subaward No        | 075501627                           |
| Subaward Amount    | \$0.00                              |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | Manor House - ACTS                  |
| Expenditure Start  | 12/20/2021                          |
| Expenditure End    | 12/20/2021                          |
| Expenditure Amount | \$108,320.00                        |

## Expenditure: EN-00333098

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0034250                         |
| Subaward No        | 933793007                           |
| Subaward Amount    | \$1,071,176.00                      |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | Parkview Nursing & Rehab Center     |
| Expenditure Start  | 12/17/2021                          |
| Expenditure End    | 12/17/2021                          |
| Expenditure Amount | \$1,071,176.00                      |

| Project Name    | DELAWARE HEALTHCARE FACILITIES FUND |
|-----------------|-------------------------------------|
| Subaward ID     | SUB-0034251                         |
| Subaward No     | 117510885                           |
| Subaward Amount | \$1,054,509.00                      |
|                 |                                     |

| Subaward Type      | Grant: Lump Sum Payment(s)        |
|--------------------|-----------------------------------|
| Subrecipient Name  | Harbor Health Care & Rehab Center |
| Expenditure Start  | 12/17/2021                        |
| Expenditure End    | 12/17/2021                        |
| Expenditure Amount | \$1,054,509.00                    |

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0034252                         |
| Subaward No        | 099079725                           |
| Subaward Amount    | \$561,034.00                        |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | The Mary Campbell Center            |
| Expenditure Start  | 12/20/2021                          |
| Expenditure End    | 12/20/2021                          |
| Expenditure Amount | \$561,034.00                        |

# Expenditure: EN-00333103

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND   |
|--------------------|---------------------------------------|
| Subaward ID        | SUB-0034253                           |
| Subaward No        | 809774644                             |
| Subaward Amount    | \$1,104,975.00                        |
| Subaward Type      | Grant: Lump Sum Payment(s)            |
| Subrecipient Name  | Regal Heights Health Rehab Center LLC |
| Expenditure Start  | 12/14/2021                            |
| Expenditure End    | 12/14/2021                            |
| Expenditure Amount | \$1,104,975.00                        |

| Project Name      | DELAWARE HEALTHCARE FACILITIES FUND  |
|-------------------|--------------------------------------|
| Subaward ID       | SUB-0034254                          |
| Subaward No       | 016212287                            |
| Subaward Amount   | \$971,953.00                         |
| Subaward Type     | Grant: Lump Sum Payment(s)           |
| Subrecipient Name | Atlantic Shore Rehab & Health Center |
| Expenditure Start | 12/16/2021                           |
| Expenditure End   | 12/16/2021                           |
| <br>I             |                                      |

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0034265                         |
| Subaward No        | 088799291                           |
| Subaward Amount    | \$758,396.00                        |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | Gilpin Hall                         |
| Expenditure Start  | 12/14/2021                          |
| Expenditure End    | 12/14/2021                          |
| Expenditure Amount | \$758,396.00                        |

#### Expenditure: EN-00445223

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND  |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0344816                          |
| Subaward No        | 18206-104427                         |
| Subaward Amount    | \$831,130.00                         |
| Subaward Type      | Grant: Lump Sum Payment(s)           |
| Subrecipient Name  | HARRISON SENIOR LIVING OF GEORGETOWN |
| Expenditure Start  | 4/1/2022                             |
| Expenditure End    | 6/30/2022                            |
| Expenditure Amount | \$831,130.00                         |

#### Expenditure: EN-00445235

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0345729                         |
| Subaward No        | 18205-Foulk                         |
| Subaward Amount    | \$0.00                              |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | Foulk Manor North                   |
| Expenditure Start  | 4/1/2022                            |
| Expenditure End    | 6/30/2022                           |
| Expenditure Amount | \$134,414.00                        |

| Project Name | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------|-------------------------------------|

| Subaward ID        | SUB-0344911                    |
|--------------------|--------------------------------|
| Subaward No        | 18206-205753                   |
| Subaward Amount    | \$780,962.00                   |
| Subaward Type      | Grant: Lump Sum Payment(s)     |
| Subrecipient Name  | 700 MARVEL ROAD OPERATIONS LLC |
| Expenditure Start  | 4/1/2022                       |
| Expenditure End    | 6/30/2022                      |
| Expenditure Amount | \$780,962.00                   |

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0345726                         |
| Subaward No        | 18205-Millcroft                     |
| Subaward Amount    | \$0.00                              |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | Millcroft                           |
| Expenditure Start  | 4/1/2022                            |
| Expenditure End    | 6/30/2022                           |
| Expenditure Amount | \$299,892.00                        |

## Expenditure: EN-00445241

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0344915                         |
| Subaward No        | 18206-19849                         |
| Subaward Amount    | \$769,070.00                        |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | MANOR CARE - PIKE CREEK             |
| Expenditure Start  | 4/1/2022                            |
| Expenditure End    | 6/30/2022                           |
| Expenditure Amount | \$769,070.00                        |

| Project Name    | DELAWARE HEALTHCARE FACILITIES FUND |
|-----------------|-------------------------------------|
| Subaward ID     | SUB-0345102                         |
| Subaward No     | 18206-607565                        |
| Subaward Amount | \$742,424.00                        |
| Subaward Type   | Grant: Lump Sum Payment(s)          |
|                 |                                     |

| Subrecipient Name  | COMPLETE CARE AT SILVER LAKE LLC |
|--------------------|----------------------------------|
| Expenditure Start  | 4/1/2022                         |
| Expenditure End    | 6/30/2022                        |
| Expenditure Amount | \$742,424.00                     |

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0345245                         |
| Subaward No        | 18205-149872                        |
| Subaward Amount    | \$740,453.00                        |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | 1100 NORMAN ESKRIDGE HIGHWAY LLC    |
| Expenditure Start  | 4/1/2022                            |
| Expenditure End    | 6/30/2022                           |
| Expenditure Amount | \$740,453.00                        |

## Expenditure: EN-00445255

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0345248                         |
| Subaward No        | 18206-56917                         |
| Subaward Amount    | \$738,597.00                        |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | CAPITOL HEALTHCARE                  |
| Expenditure Start  | 4/1/2022                            |
| Expenditure End    | 6/30/2022                           |
| Expenditure Amount | \$738,597.00                        |

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0345572                         |
| Subaward No        | 18206-607002                        |
| Subaward Amount    | \$198,967.00                        |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | PEACHTREE HEALTH GROUP              |
| Expenditure Start  | 4/1/2022                            |
| Expenditure End    | 6/30/2022                           |
| Expenditure Amount | \$198,967.00                        |

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0345251                         |
| Subaward No        | 18205-582771                        |
| Subaward Amount    | \$720,981.00                        |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | MANOR CARE OF WILMINGTON DE LLC     |
| Expenditure Start  | 4/1/2022                            |
| Expenditure End    | 6/30/2022                           |
| Expenditure Amount | \$720,981.00                        |

## Expenditure: EN-00445262

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0345382                         |
| Subaward No        | 18206-6670                          |
| Subaward Amount    | \$704,874.00                        |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | PENINSULA HEALTHCARE LLC            |
| Expenditure Start  | 4/1/2022                            |
| Expenditure End    | 6/30/2022                           |
| Expenditure Amount | \$704,874.00                        |

#### Expenditure: EN-00445260

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0345287                         |
| Subaward No        | 18206-185132                        |
| Subaward Amount    | \$716,138.00                        |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | 715 EAST KING STREET OPERATIONS LLC |
| Expenditure Start  | 4/1/2022                            |
| Expenditure End    | 6/30/2022                           |
| Expenditure Amount | \$716,138.00                        |

| Project Name | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------|-------------------------------------|
| Subaward ID  | SUB-0345715                         |
|              |                                     |

| Subaward No        | 18203-607564                  |
|--------------------|-------------------------------|
| Subaward Amount    | \$697,237.00                  |
| Subaward Type      | Grant: Lump Sum Payment(s)    |
| Subrecipient Name  | COMPLETE CARE AT HILLSIDE LLC |
| Expenditure Start  | 4/1/2022                      |
| Expenditure End    | 6/30/2022                     |
| Expenditure Amount | \$697,237.00                  |

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0345384                         |
| Subaward No        | 18206-220637                        |
| Subaward Amount    | \$609,830.00                        |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | ONIX SILVERSIDE LLC                 |
| Expenditure Start  | 4/1/2022                            |
| Expenditure End    | 6/30/2022                           |
| Expenditure Amount | \$609,830.00                        |

## Expenditure: EN-00445272

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0345385                         |
| Subaward No        | 18206-56916                         |
| Subaward Amount    | \$609,064.00                        |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | BROADMEADOW HEALTHCARE              |
| Expenditure Start  | 4/1/2022                            |
| Expenditure End    | 6/30/2022                           |
| Expenditure Amount | \$609,064.00                        |

| Project Name      | DELAWARE HEALTHCARE FACILITIES FUND  |
|-------------------|--------------------------------------|
| Subaward ID       | SUB-0345388                          |
| Subaward No       | 18206-554978                         |
| Subaward Amount   | \$604,892.00                         |
| Subaward Type     | Grant: Lump Sum Payment(s)           |
| Subrecipient Name | 101 E DELAWARE AVENUE OPERATIONS LLC |
|                   |                                      |

| Expenditure Start  | 4/1/2022     |
|--------------------|--------------|
| Expenditure End    | 6/30/2022    |
| Expenditure Amount | \$604,892.00 |

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0345439                         |
| Subaward No        | 18206-606004                        |
| Subaward Amount    | \$539,659.00                        |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | COMPLETE CARE AT BRACKENVILLE LLC   |
| Expenditure Start  | 4/1/2022                            |
| Expenditure End    | 6/30/2022                           |
| Expenditure Amount | \$539,659.00                        |

#### Expenditure: EN-00445539

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0345441                         |
| Subaward No        | 18206-7689                          |
| Subaward Amount    | \$532,456.00                        |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | PIKE CREEK HEALTHCARE SVCS LLC      |
| Expenditure Start  | 4/1/2022                            |
| Expenditure End    | 6/30/2022                           |
| Expenditure Amount | \$532,456.00                        |

## Expenditure: EN-00445543

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0345539                         |
| Subaward No        | 18206-24796                         |
| Subaward Amount    | \$430,438.00                        |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | Courtland Manor Inc.                |
| Expenditure Start  | 4/1/2022                            |
| Expenditure End    | 6/30/2022                           |
| Expenditure Amount | \$430,438.00                        |

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0345540                         |
| Subaward No        | 18206-258050                        |
| Subaward Amount    | \$318,000.00                        |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | EXCEPTIONAL CARE FOR CHILDREN INC   |
| Expenditure Start  | 4/1/2022                            |
| Expenditure End    | 6/30/2022                           |
| Expenditure Amount | \$318,000.00                        |

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0345541                         |
| Subaward No        | 18206-494561                        |
| Subaward Amount    | \$293,356.00                        |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | LITTLE SISTERS OF THE POOR INC      |
| Expenditure Start  | 4/1/2022                            |
| Expenditure End    | 6/30/2022                           |
| Expenditure Amount | \$293,356.00                        |

## Expenditure: EN-00445548

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0345555                         |
| Subaward No        | 18206-52504                         |
| Subaward Amount    | \$259,615.00                        |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | PRESBYTERIAN HOMES INC              |
| Expenditure Start  | 4/1/2022                            |
| Expenditure End    | 6/30/2022                           |
| Expenditure Amount | \$259,615.00                        |

| Project Name | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------|-------------------------------------|
| Subaward ID  | SUB-0345570                         |
| Subaward No  | 18206-582192                        |
|              |                                     |

| Subaward Amount    | \$228,021.00               |
|--------------------|----------------------------|
| Subaward Type      | Grant: Lump Sum Payment(s) |
| Subrecipient Name  | POLARIS HEALTHCARE         |
| Expenditure Start  | 4/1/2022                   |
| Expenditure End    | 6/30/2022                  |
| Expenditure Amount | \$228,021.00               |

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0345586                         |
| Subaward No        | 18205-21                            |
| Subaward Amount    | \$159,177.00                        |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | INGLESIDE HOMES INC                 |
| Expenditure Start  | 4/1/2022                            |
| Expenditure End    | 6/30/2022                           |
| Expenditure Amount | \$159,177.00                        |

## Expenditure: EN-00446062

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0345601                         |
| Subaward No        | 18206-580584                        |
| Subaward Amount    | \$89,797.00                         |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | MADELINE CARE CENTER LLC            |
| Expenditure Start  | 4/1/2022                            |
| Expenditure End    | 6/30/2022                           |
| Expenditure Amount | \$89,797.00                         |

| Project Name      | DELAWARE HEALTHCARE FACILITIES FUND |
|-------------------|-------------------------------------|
| Subaward ID       | SUB-0345615                         |
| Subaward No       | 18206-551251                        |
| Subaward Amount   | \$73,903.00                         |
| Subaward Type     | Grant: Lump Sum Payment(s)          |
| Subrecipient Name | EMERITUS CORPORATION                |
| Expenditure Start | 4/1/2022                            |
|                   |                                     |

| Expenditure End    | 6/30/2022   |
|--------------------|-------------|
| Expenditure Amount | \$73,903.00 |

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0345616                         |
| Subaward No        | 18205-583910                        |
| Subaward Amount    | \$51,161.00                         |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | MILFORD AID II OPCO LLC             |
| Expenditure Start  | 4/1/2022                            |
| Expenditure End    | 6/30/2022                           |
| Expenditure Amount | \$51,161.00                         |

## Expenditure: EN-00446685

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0221714                         |
| Subaward No        | 550719                              |
| Subaward Amount    | \$728,699.00                        |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | SNH DEL TENANT LLC- SHIPLEY MANOR   |
| Expenditure Start  | 4/1/2022                            |
| Expenditure End    | 6/30/2022                           |
| Expenditure Amount | (\$434,306.00)                      |

#### Expenditure: EN-00446709

| Project Name       | DELAWARE HEALTHCARE FACILITIES FUND |
|--------------------|-------------------------------------|
| Subaward ID        | SUB-0034258                         |
| Subaward No        | 075501627                           |
| Subaward Amount    | \$0.00                              |
| Subaward Type      | Grant: Lump Sum Payment(s)          |
| Subrecipient Name  | Manor House - ACTS                  |
| Expenditure Start  | 4/1/2022                            |
| Expenditure End    | 6/30/2022                           |
| Expenditure Amount | (\$108,320.00)                      |

| Project Name       | OGOV RODEL Career Pathways 2.0 |
|--------------------|--------------------------------|
| Subaward ID        | SUB-0183922                    |
| Subaward No        | 18437                          |
| Subaward Amount    | \$7,300,000.00                 |
| Subaward Type      | Grant: Lump Sum Payment(s)     |
| Subrecipient Name  | Delaware Community Foundation  |
| Expenditure Start  | 10/1/2022                      |
| Expenditure End    | 12/31/2022                     |
| Expenditure Amount | \$152,857.00                   |

| Project Name       | OGOV RODEL Career Pathways 2.0 |
|--------------------|--------------------------------|
| Subaward ID        | SUB-0183922                    |
| Subaward No        | 18437                          |
| Subaward Amount    | \$7,300,000.00                 |
| Subaward Type      | Grant: Lump Sum Payment(s)     |
| Subrecipient Name  | Delaware Community Foundation  |
| Expenditure Start  | 1/1/2023                       |
| Expenditure End    | 3/31/2023                      |
| Expenditure Amount | \$1,119,524.00                 |

# Expenditure: EN-01916705

| Project Name       | OGOV RODEL Career Pathways 2.0 |
|--------------------|--------------------------------|
| Subaward ID        | SUB-0183922                    |
| Subaward No        | 18437                          |
| Subaward Amount    | \$7,300,000.00                 |
| Subaward Type      | Grant: Lump Sum Payment(s)     |
| Subrecipient Name  | Delaware Community Foundation  |
| Expenditure Start  | 10/1/2023                      |
| Expenditure End    | 12/31/2023                     |
| Expenditure Amount | \$2,500,000.00                 |

| Project Name    | OGOV RODEL Career Pathways 2.0 |
|-----------------|--------------------------------|
| Subaward ID     | SUB-0183922                    |
| Subaward No     | 18437                          |
| Subaward Amount | \$7,300,000.00                 |
|                 |                                |

| Subaward Type      | Grant: Lump Sum Payment(s)    |
|--------------------|-------------------------------|
| Subrecipient Name  | Delaware Community Foundation |
| Expenditure Start  | 7/1/2022                      |
| Expenditure End    | 9/30/2022                     |
| Expenditure Amount | \$477,635.00                  |

| Project Name       | OGOV RODEL Career Pathways 2.0 |
|--------------------|--------------------------------|
| Subaward ID        | SUB-0183922                    |
| Subaward No        | 18437                          |
| Subaward Amount    | \$7,300,000.00                 |
| Subaward Type      | Grant: Lump Sum Payment(s)     |
| Subrecipient Name  | Delaware Community Foundation  |
| Expenditure Start  | 4/1/2022                       |
| Expenditure End    | 6/30/2022                      |
| Expenditure Amount | \$749,984.00                   |

#### Expenditure: EN-00840503

| Project Name       | OGOV DE Sustainable Energy                                |
|--------------------|---|
| Subaward ID        | SUB-0184834   |
| Subaward No        | 18448   |
| Subaward Amount    | \$2,500,000.00  |
| Subaward Type      | Grant: Lump Sum Payment(s)                                |
| Subrecipient Name  | Delaware Sustainable Energy Utility DBA Energize Delaware |
| Expenditure Start  | 10/1/2022   |
| Expenditure End    | 12/31/2022  |
| Expenditure Amount | \$226,542.31  |

| Project Name      | OGOV DE Sustainable Energy                                   |
|-------------------|--|
| Subaward ID       | SUB-0184834  |
| Subaward No       | 18448  |
| Subaward Amount   | \$2,500,000.00   |
| Subaward Type     | Grant: Lump Sum Payment(s)                                   |
| Subrecipient Name | Delaware Sustainable Energy Utility DBA Energize<br>Delaware |
| Expenditure Start | 1/1/2023   |
|                   |  |

| Expenditure End    | 3/31/2023      |
|--------------------|----------------|
| Expenditure Amount | \$1,832,699.97 |

| Project Name       | OGOV DE Sustainable Energy                                   |
|--------------------|--|
| Subaward ID        | SUB-0184834  |
| Subaward No        | 18448  |
| Subaward Amount    | \$2,500,000.00   |
| Subaward Type      | Grant: Lump Sum Payment(s)                                   |
| Subrecipient Name  | Delaware Sustainable Energy Utility DBA Energize<br>Delaware |
| Expenditure Start  | 1/18/2022  |
| Expenditure End    | 1/18/2022  |
| Expenditure Amount | \$79,865.72  |

## Expenditure: EN-00441359

| Project Name       | OGOV DE Sustainable Energy                                   |
|--------------------|--|
| Subaward ID        | SUB-0184834  |
| Subaward No        | 18448  |
| Subaward Amount    | \$2,500,000.00   |
| Subaward Type      | Grant: Lump Sum Payment(s)                                   |
| Subrecipient Name  | Delaware Sustainable Energy Utility DBA Energize<br>Delaware |
| Expenditure Start  | 4/1/2022   |
| Expenditure End    | 6/30/2022  |
| Expenditure Amount | \$360,892.00   |

## Expenditure: EN-01770484

| Project Name       | DDA Local Food Loan System |
|--------------------|----------------------------|
| Subaward ID        | SUB-0782560                |
| Subaward No        | 18394-455714               |
| Subaward Amount    | \$60,000.00                |
| Subaward Type      | Contract: Purchase Order   |
| Subrecipient Name  | SHANE MARVEL               |
| Expenditure Start  | 7/1/2023                   |
| Expenditure End    | 9/30/2023                  |
| Expenditure Amount | \$60,000.00                |

| Project Name       | DDA Local Food Loan System |
|--------------------|----------------------------|
| Subaward ID        | SUB-0782555                |
| Subaward No        | 18394-639147               |
| Subaward Amount    | \$62,350.00                |
| Subaward Type      | Contract: Purchase Order   |
| Subrecipient Name  | DITTMAR FAMILY FARMS LLC   |
| Expenditure Start  | 7/1/2023                   |
| Expenditure End    | 9/30/2023                  |
| Expenditure Amount | \$62,350.00                |
|                    |                            |

| Project Name       | DDA Local Food Loan System |
|--------------------|----------------------------|
| Subaward ID        | SUB-0782556                |
| Subaward No        | 18394-696972               |
| Subaward Amount    | \$63,794.00                |
| Subaward Type      | Contract: Purchase Order   |
| Subrecipient Name  | WILLIAM E POWERS JR        |
| Expenditure Start  | 7/1/2023                   |
| Expenditure End    | 9/30/2023                  |
| Expenditure Amount | \$63,794.00                |

# Expenditure: EN-01770450

| Project Name       | DDA Local Food Loan System |
|--------------------|----------------------------|
| Subaward ID        | SUB-0782557                |
| Subaward No        | 18394-20811                |
| Subaward Amount    | \$106,790.00               |
| Subaward Type      | Contract: Purchase Order   |
| Subrecipient Name  | BENNETT ORCHARDS LLC       |
| Expenditure Start  | 7/1/2023                   |
| Expenditure End    | 9/30/2023                  |
| Expenditure Amount | \$106,790.00               |

| Project Name | DDA Local Food Loan System |
|--------------|----------------------------|
| Subaward ID  | SUB-0782558                |
| Subaward No  | 18394-24731                |
| I            | 1 1                        |

| Subaward Amount    | \$139,000.00             |
|--------------------|--------------------------|
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | FIFER ORCHARDS INC       |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$139,000.00             |

| Project Name       | DDA Local Food Loan System |  |
|--------------------|----------------------------|--|
| Subaward ID        | SUB-0782559                |  |
| Subaward No        | 18394-15404                |  |
| Subaward Amount    | \$140,000.00               |  |
| Subaward Type      | Contract: Purchase Order   |  |
| Subrecipient Name  | DYLAN J NICKERSON          |  |
| Expenditure Start  | 7/1/2023                   |  |
| Expenditure End    | 9/30/2023                  |  |
| Expenditure Amount | \$140,000.00               |  |

## Expenditure: EN-01770495

| Project Name       | DDA Local Food Loan System |
|--------------------|----------------------------|
| Subaward ID        | SUB-0443047                |
| Subaward No        | 18394-25567                |
| Subaward Amount    | \$70,000.00                |
| Subaward Type      | Grant: Lump Sum Payment(s) |
| Subrecipient Name  | T A FARMS LLC              |
| Expenditure Start  | 7/1/2023                   |
| Expenditure End    | 9/30/2023                  |
| Expenditure Amount | \$20,000.00                |

| Project Name      | DDA Local Food Loan System    |
|-------------------|-------------------------------|
| Subaward ID       | SUB-0443040                   |
| Subaward No       | 18394-48                      |
| Subaward Amount   | \$100,000.00                  |
| Subaward Type     | Grant: Lump Sum Payment(s)    |
| Subrecipient Name | BOYS & GIRLS CLUB OF DELAWARE |
| Expenditure Start | 7/1/2022                      |
|                   |                               |

| Expenditure End    | 9/30/2022    |
|--------------------|--------------|
| Expenditure Amount | \$100,000.00 |

| Project Name       | DDA Local Food Loan System |
|--------------------|----------------------------|
| Subaward ID        | SUB-0443042                |
| Subaward No        | 18394-179479               |
| Subaward Amount    | \$75,000.00                |
| Subaward Type      | Grant: Lump Sum Payment(s) |
| Subrecipient Name  | CONSCIOUS CONNECTIONS INC  |
| Expenditure Start  | 7/1/2022                   |
| Expenditure End    | 9/30/2022                  |
| Expenditure Amount | \$75,000.00                |

#### Expenditure: EN-00628557

| Project Name       | DDA Local Food Loan System     |
|--------------------|--------------------------------|
| Subaward ID        | SUB-0443043                    |
| Subaward No        | 18394-9523000000               |
| Subaward Amount    | \$73,033.48                    |
| Subaward Type      | Grant: Lump Sum Payment(s)     |
| Subrecipient Name  | SEAFORD SCHOOL DISTRICT OFFICE |
| Expenditure Start  | 7/1/2022                       |
| Expenditure End    | 9/30/2022                      |
| Expenditure Amount | \$73,033.48                    |

#### Expenditure: EN-00628558

| Project Name       | DDA Local Food Loan System     |
|--------------------|--------------------------------|
| Subaward ID        | SUB-0443046                    |
| Subaward No        | 18394-21040                    |
| Subaward Amount    | \$60,000.00                    |
| Subaward Type      | Grant: Lump Sum Payment(s)     |
| Subrecipient Name  | HEALTHY FOODS FOR HEALTHY KIDS |
| Expenditure Start  | 7/1/2022                       |
| Expenditure End    | 9/30/2022                      |
| Expenditure Amount | \$60,000.00                    |

| Project Name       | DDA Local Food Loan System |
|--------------------|----------------------------|
| Subaward ID        | SUB-0443047                |
| Subaward No        | 18394-25567                |
| Subaward Amount    | \$70,000.00                |
| Subaward Type      | Grant: Lump Sum Payment(s) |
| Subrecipient Name  | T A FARMS LLC              |
| Expenditure Start  | 7/1/2022                   |
| Expenditure End    | 9/3/2022                   |
| Expenditure Amount | \$50,000.00                |

| Project Name       | DDA Local Food Loan System |
|--------------------|----------------------------|
| Subaward ID        | SUB-0454419                |
| Subaward No        | 18394-648642               |
| Subaward Amount    | \$100,000.00               |
| Subaward Type      | Grant: Lump Sum Payment(s) |
| Subrecipient Name  | DYLAN J NICKERSON          |
| Expenditure Start  | 7/1/2022                   |
| Expenditure End    | 9/30/2022                  |
| Expenditure Amount | \$100,000.00               |

## Expenditure: EN-01174177

| Project Name       | DOL WORKFORCE DEVELOPMENT INITIATIVE |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0043188                          |
| Subaward No        | 0000034426                           |
| Subaward Amount    | \$1,232,063.75                       |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | Amer Driver Training ACAD            |
| Expenditure Start  | 1/1/2023                             |
| Expenditure End    | 3/31/2023                            |
| Expenditure Amount | \$2,298.75                           |

| Project Name    | DOL WORKFORCE DEVELOPMENT INITIATIVE |
|-----------------|--------------------------------------|
| Subaward ID     | SUB-0332426                          |
| Subaward No     | 18050-9004010000                     |
| Subaward Amount | \$490,877.05                         |
|                 |                                      |

| Subaward Type      | Direct Payment                  |
|--------------------|---------------------------------|
| Subrecipient Name  | Delaware Tech Community College |
| Expenditure Start  | 1/1/2023                        |
| Expenditure End    | 3/31/2023                       |
| Expenditure Amount | (\$300,627.95)                  |

| Project Name       | DOL WORKFORCE DEVELOPMENT INITIATIVE |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0332426                          |
| Subaward No        | 18050-9004010000                     |
| Subaward Amount    | \$490,877.05                         |
| Subaward Type      | Direct Payment                       |
| Subrecipient Name  | Delaware Tech Community College      |
| Expenditure Start  | 4/1/2022                             |
| Expenditure End    | 6/30/2022                            |
| Expenditure Amount | \$791,505.00                         |

# Expenditure: EN-00432096

| Project Name       | DOL WORKFORCE DEVELOPMENT INITIATIVE |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0332428                          |
| Subaward No        | 18050-9539000040                     |
| Subaward Amount    | \$93,706.00                          |
| Subaward Type      | Direct Payment                       |
| Subrecipient Name  | POLYTECH ADULT EDUCATION             |
| Expenditure Start  | 4/1/2022                             |
| Expenditure End    | 6/30/2022                            |
| Expenditure Amount | \$93,706.00                          |

| Project Name      | DOL WORKFORCE DEVELOPMENT INITIATIVE           |
|-------------------|--|
| Subaward ID       | SUB-0043179                                    |
| Subaward No       | 0000473032                                     |
| Subaward Amount   | \$287,194.00                                   |
| Subaward Type     | Contract: Purchase Order                       |
| Subrecipient Name | LEEP Inc Labor Economics Education emPowerment |
| Expenditure Start | 11/1/2021                                      |
| Expenditure End   | 12/31/2021                                     |
| <br>I             |  |

| Project Name       | DOL WORKFORCE DEVELOPMENT INITIATIVE |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0043188                          |
| Subaward No        | 0000034426                           |
| Subaward Amount    | \$1,232,063.75                       |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | Amer Driver Training ACAD            |
| Expenditure Start  | 11/1/2021                            |
| Expenditure End    | 12/31/2021                           |
| Expenditure Amount | \$1,229,765.00                       |

#### Expenditure: EN-00840499

| Project Name       | OGOV Zip Code Wilmington   |
|--------------------|----------------------------|
| Subaward ID        | SUB-0184898                |
| Subaward No        | 18444                      |
| Subaward Amount    | \$1,500,000.00             |
| Subaward Type      | Grant: Lump Sum Payment(s) |
| Subrecipient Name  | Zip Code Wilmington        |
| Expenditure Start  | 10/1/2022                  |
| Expenditure End    | 12/31/2022                 |
| Expenditure Amount | \$84,730.00                |

#### Expenditure: EN-01174077

| Project Name       | OGOV Zip Code Wilmington   |
|--------------------|----------------------------|
| Subaward ID        | SUB-0184898                |
| Subaward No        | 18444                      |
| Subaward Amount    | \$1,500,000.00             |
| Subaward Type      | Grant: Lump Sum Payment(s) |
| Subrecipient Name  | Zip Code Wilmington        |
| Expenditure Start  | 1/1/2023                   |
| Expenditure End    | 3/31/2023                  |
| Expenditure Amount | \$1,063,652.49             |

|  | Project Name | OGOV Zip Code Wilmington |
|--|--------------|--------------------------|
|--|--------------|--------------------------|

| Subaward ID        | SUB-0184898                |
|--------------------|----------------------------|
| Subaward No        | 18444                      |
| Subaward Amount    | \$1,500,000.00             |
| Subaward Type      | Grant: Lump Sum Payment(s) |
| Subrecipient Name  | Zip Code Wilmington        |
| Expenditure Start  | 7/1/2022                   |
| Expenditure End    | 9/30/2022                  |
| Expenditure Amount | \$147,420.00               |

| Project Name       | OGOV Zip Code Wilmington   |
|--------------------|----------------------------|
| Subaward ID        | SUB-0184898                |
| Subaward No        | 18444                      |
| Subaward Amount    | \$1,500,000.00             |
| Subaward Type      | Grant: Lump Sum Payment(s) |
| Subrecipient Name  | Zip Code Wilmington        |
| Expenditure Start  | 1/3/2022                   |
| Expenditure End    | 3/31/2022                  |
| Expenditure Amount | \$79,560.00                |

## Expenditure: EN-00462178

| Project Name       | OGOV Zip Code Wilmington   |
|--------------------|----------------------------|
| Subaward ID        | SUB-0184898                |
| Subaward No        | 18444                      |
| Subaward Amount    | \$1,500,000.00             |
| Subaward Type      | Grant: Lump Sum Payment(s) |
| Subrecipient Name  | Zip Code Wilmington        |
| Expenditure Start  | 4/1/2022                   |
| Expenditure End    | 6/30/2022                  |
| Expenditure Amount | \$124,637.51               |

| Project Name    | OGOV Delaware Restaurant Association |
|-----------------|--------------------------------------|
| Subaward ID     | SUB-0184876                          |
| Subaward No     | 18446                                |
| Subaward Amount | \$900,000.00                         |
| Subaward Type   | Grant: Lump Sum Payment(s)           |
|                 |                                      |

| Subrecipient Name  | Delaware Restaurant Association |
|--------------------|---------------------------------|
| Expenditure Start  | 10/1/2022                       |
| Expenditure End    | 12/31/2022                      |
| Expenditure Amount | \$144,743.57                    |

| Project Name       | OGOV Delaware Restaurant Association |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0184876                          |
| Subaward No        | 18446                                |
| Subaward Amount    | \$900,000.00                         |
| Subaward Type      | Grant: Lump Sum Payment(s)           |
| Subrecipient Name  | Delaware Restaurant Association      |
| Expenditure Start  | 1/1/2023                             |
| Expenditure End    | 3/31/2023                            |
| Expenditure Amount | \$155,256.43                         |

## Expenditure: EN-01780608

| Project Name       | OGOV Delaware Restaurant Association |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0184876                          |
| Subaward No        | 18446                                |
| Subaward Amount    | \$900,000.00                         |
| Subaward Type      | Grant: Lump Sum Payment(s)           |
| Subrecipient Name  | Delaware Restaurant Association      |
| Expenditure Start  | 7/1/2023                             |
| Expenditure End    | 9/30/2023                            |
| Expenditure Amount | \$300,000.00                         |

| Project Name       | OGOV Delaware Restaurant Association |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0184876                          |
| Subaward No        | 18446                                |
| Subaward Amount    | \$900,000.00                         |
| Subaward Type      | Grant: Lump Sum Payment(s)           |
| Subrecipient Name  | Delaware Restaurant Association      |
| Expenditure Start  | 7/1/2022                             |
| Expenditure End    | 9/30/2022                            |
| Expenditure Amount | \$40,073.90                          |

| Project Name       | OGOV Delaware Restaurant Association |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0184876                          |
| Subaward No        | 18446                                |
| Subaward Amount    | \$900,000.00                         |
| Subaward Type      | Grant: Lump Sum Payment(s)           |
| Subrecipient Name  | Delaware Restaurant Association      |
| Expenditure Start  | 4/1/2022                             |
| Expenditure End    | 6/30/2022                            |
| Expenditure Amount | \$167,371.00                         |

## Expenditure: EN-00042925

| Project Name       | OGOV Delaware Restaurant Association |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0184876                          |
| Subaward No        | 18446                                |
| Subaward Amount    | \$900,000.00                         |
| Subaward Type      | Grant: Lump Sum Payment(s)           |
| Subrecipient Name  | Delaware Restaurant Association      |
| Expenditure Start  | 12/8/2021                            |
| Expenditure End    | 12/8/2021                            |
| Expenditure Amount | \$92,555.10                          |

#### Expenditure: EN-01173876

| Project Name       | OGOV REACH Riverside       |
|--------------------|----------------------------|
| Subaward ID        | SUB-0184812                |
| Subaward No        | 18447                      |
| Subaward Amount    | \$26,400,000.00            |
| Subaward Type      | Grant: Lump Sum Payment(s) |
| Subrecipient Name  | REACH Riverside            |
| Expenditure Start  | 1/1/2023                   |
| Expenditure End    | 3/31/2023                  |
| Expenditure Amount | \$26,400,000.00            |

| Project Name | OGOV Legal Counsel for NEUs |
|--------------|-----------------------------|
| Subaward ID  | SUB-0618001                 |
|              |                             |

| Subaward No        | 18436-613098             |
|--------------------|--------------------------|
| Subaward Amount    | \$0.00                   |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | BARNES & THORNBURG LLP   |
| Expenditure Start  | 11/1/2021                |
| Expenditure End    | 3/31/2023                |
| Expenditure Amount | \$170,000.00             |

| Project Name       | OGOV Legal Counsel for NEUs |
|--------------------|-----------------------------|
| Subaward ID        | SUB-0618001                 |
| Subaward No        | 18436-613098                |
| Subaward Amount    | \$0.00                      |
| Subaward Type      | Contract: Purchase Order    |
| Subrecipient Name  | BARNES & THORNBURG LLP      |
| Expenditure Start  | 4/1/2023                    |
| Expenditure End    | 6/30/2023                   |
| Expenditure Amount | \$10,000.00                 |

# Expenditure: EN-01777482

| Project Name       | OGOV Legal Counsel for NEUs |
|--------------------|-----------------------------|
| Subaward ID        | SUB-0618001                 |
| Subaward No        | 18436-613098                |
| Subaward Amount    | \$0.00                      |
| Subaward Type      | Contract: Purchase Order    |
| Subrecipient Name  | BARNES & THORNBURG LLP      |
| Expenditure Start  | 7/1/2023                    |
| Expenditure End    | 9/30/2023                   |
| Expenditure Amount | (\$180,000.00)              |

| Project Name      | OGOV Wilmington Parking Garage Relief |
|-------------------|---------------------------------------|
| Subaward ID       | SUB-0184867                           |
| Subaward No       | 18471                                 |
| Subaward Amount   | \$5,000,000.00                        |
| Subaward Type     | Grant: Lump Sum Payment(s)            |
| Subrecipient Name | City of Wilmington                    |
|                   |                                       |

| Expenditure Start  | 1/10/2022      |
|--------------------|----------------|
| Expenditure End    | 1/10/2022      |
| Expenditure Amount | \$5,000,000.00 |

| Project Name       | DTI Broadband Infrastructure     |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0213472                      |
| Subaward No        | 17850-17022                      |
| Subaward Amount    | \$4,161,523.27                   |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | VERIZON WIRELESS SERVICES CELLCO |
| Expenditure Start  | 10/1/2022                        |
| Expenditure End    | 12/31/2022                       |
| Expenditure Amount | \$421,712.92                     |

#### Expenditure: EN-00781962

| Project Name       | DTI Broadband Infrastructure |
|--------------------|------------------------------|
| Subaward ID        | SUB-0336071                  |
| Subaward No        | 17850-35084                  |
| Subaward Amount    | \$664,619.26                 |
| Subaward Type      | Direct Payment               |
| Subrecipient Name  | AT&T MOBILITY                |
| Expenditure Start  | 10/1/2022                    |
| Expenditure End    | 12/31/2022                   |
| Expenditure Amount | \$2,632.99                   |

## Expenditure: EN-00781963

| Project Name       | DTI Broadband Infrastructure |
|--------------------|------------------------------|
| Subaward ID        | SUB-0213356                  |
| Subaward No        | 17850-399993                 |
| Subaward Amount    | \$14,574,490.99              |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | COMCAST HOLDINGS CORPORATION |
| Expenditure Start  | 10/1/2022                    |
| Expenditure End    | 12/31/2022                   |
| Expenditure Amount | \$1,188,148.64               |

| Project Name       | DTI Broadband Infrastructure  |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0213738                   |
| Subaward No        | 17850-27226                   |
| Subaward Amount    | \$336,362.50                  |
| Subaward Type      | Contract: Purchase Order      |
| Subrecipient Name  | PROGRESSIVE SOFTWARE COMP INC |
| Expenditure Start  | 10/1/2022                     |
| Expenditure End    | 12/31/2022                    |
| Expenditure Amount | \$66,220.00                   |

| Project Name       | DTI Broadband Infrastructure               |
|--------------------|--|
| Subaward ID        | SUB-0442409                                |
| Subaward No        | 17850-568419                               |
| Subaward Amount    | \$109,141.73                               |
| Subaward Type      | Contract: Purchase Order                   |
| Subrecipient Name  | COLUMBIA TELECOMMUNICATIONS<br>CORPORATION |
| Expenditure Start  | 10/1/2022                                  |
| Expenditure End    | 12/31/2022                                 |
| Expenditure Amount | \$44,092.50                                |

## Expenditure: EN-00781983

| Project Name       | DTI Broadband Infrastructure |
|--------------------|------------------------------|
| Subaward ID        | SUB-0336175                  |
| Subaward No        | 17850-26171                  |
| Subaward Amount    | \$0.00                       |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | Versalign                    |
| Expenditure Start  | 10/1/2022                    |
| Expenditure End    | 12/31/2022                   |
| Expenditure Amount | \$5,400.00                   |

| Project Name | DTI Broadband Infrastructure |
|--------------|------------------------------|
| Subaward ID  | SUB-0505890                  |
| Subaward No  | 17850-630238                 |

| Subaward Amount    | \$484,710.00                         |
|--------------------|--------------------------------------|
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | GUIDESOFT INC DBA KNOWLEDGE SERVICES |
| Expenditure Start  | 12/1/2022                            |
| Expenditure End    | 12/31/2022                           |
| Expenditure Amount | \$57,345.00                          |

| Project Name       | DTI Broadband Infrastructure     |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0213472                      |
| Subaward No        | 17850-17022                      |
| Subaward Amount    | \$4,161,523.27                   |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | VERIZON WIRELESS SERVICES CELLCO |
| Expenditure Start  | 1/1/2023                         |
| Expenditure End    | 3/31/2023                        |
| Expenditure Amount | \$182,181.87                     |

## Expenditure: EN-01184481

| Project Name       | DTI Broadband Infrastructure |
|--------------------|------------------------------|
| Subaward ID        | SUB-0336071                  |
| Subaward No        | 17850-35084                  |
| Subaward Amount    | \$664,619.26                 |
| Subaward Type      | Direct Payment               |
| Subrecipient Name  | AT&T MOBILITY                |
| Expenditure Start  | 1/1/2023                     |
| Expenditure End    | 3/31/2023                    |
| Expenditure Amount | \$13,961.53                  |

| Project Name      | DTI Broadband Infrastructure |
|-------------------|------------------------------|
| Subaward ID       | SUB-0213356                  |
| Subaward No       | 17850-399993                 |
| Subaward Amount   | \$14,574,490.99              |
| Subaward Type     | Contract: Purchase Order     |
| Subrecipient Name | COMCAST HOLDINGS CORPORATION |
| Expenditure Start | 1/1/2023                     |
|                   |                              |

| Expenditure End    | 3/31/2023      |
|--------------------|----------------|
| Expenditure Amount | \$3,706,186.39 |

| Project Name       | DTI Broadband Infrastructure  |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0213738                   |
| Subaward No        | 17850-27226                   |
| Subaward Amount    | \$336,362.50                  |
| Subaward Type      | Contract: Purchase Order      |
| Subrecipient Name  | PROGRESSIVE SOFTWARE COMP INC |
| Expenditure Start  | 1/1/2023                      |
| Expenditure End    | 3/31/2023                     |
| Expenditure Amount | (\$54,086.25)                 |

#### Expenditure: EN-01184513

| Project Name       | DTI Broadband Infrastructure |
|--------------------|------------------------------|
| Subaward ID        | SUB-0442410                  |
| Subaward No        | 17850-1425                   |
| Subaward Amount    | \$7,738,848.23               |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | MEDIACOM DELAWARE LLC        |
| Expenditure Start  | 1/1/2023                     |
| Expenditure End    | 3/31/2023                    |
| Expenditure Amount | \$1,547,769.65               |

#### Expenditure: EN-01184523

| Project Name       | DTI Broadband Infrastructure         |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0505890                          |
| Subaward No        | 17850-630238                         |
| Subaward Amount    | \$484,710.00                         |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | GUIDESOFT INC DBA KNOWLEDGE SERVICES |
| Expenditure Start  | 1/1/2023                             |
| Expenditure End    | 3/31/2023                            |
| Expenditure Amount | (\$12,975.00)                        |

| Project Name       | DTI Broadband Infrastructure |
|--------------------|------------------------------|
| Subaward ID        | SUB-0607978                  |
| Subaward No        | 17850-18162                  |
| Subaward Amount    | \$6,705,839.00               |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | VERIZON Communications       |
| Expenditure Start  | 1/1/2023                     |
| Expenditure End    | 3/31/2023                    |
| Expenditure Amount | \$1,676,459.75               |

| Project Name       | DTI Broadband Infrastructure     |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0213472                      |
| Subaward No        | 17850-17022                      |
| Subaward Amount    | \$4,161,523.27                   |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | VERIZON WIRELESS SERVICES CELLCO |
| Expenditure Start  | 4/1/2023                         |
| Expenditure End    | 6/30/2023                        |
| Expenditure Amount | \$128,716.47                     |

## Expenditure: EN-01615657

| Project Name       | DTI Broadband Infrastructure |
|--------------------|------------------------------|
| Subaward ID        | SUB-0336071                  |
| Subaward No        | 17850-35084                  |
| Subaward Amount    | \$664,619.26                 |
| Subaward Type      | Direct Payment               |
| Subrecipient Name  | AT&T MOBILITY                |
| Expenditure Start  | 4/1/2023                     |
| Expenditure End    | 6/30/2023                    |
| Expenditure Amount | \$10,395.76                  |

| Project Name    | DTI Broadband Infrastructure |
|-----------------|------------------------------|
| Subaward ID     | SUB-0213356                  |
| Subaward No     | 17850-399993                 |
| Subaward Amount | \$14,574,490.99              |
|                 |                              |

| Subaward Type      | Contract: Purchase Order     |
|--------------------|------------------------------|
| Subrecipient Name  | COMCAST HOLDINGS CORPORATION |
| Expenditure Start  | 4/1/2023                     |
| Expenditure End    | 6/30/2023                    |
| Expenditure Amount | \$161,352.88                 |

| Project Name       | DTI Broadband Infrastructure |
|--------------------|------------------------------|
| Subaward ID        | SUB-0442410                  |
| Subaward No        | 17850-1425                   |
| Subaward Amount    | \$7,738,848.23               |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | MEDIACOM DELAWARE LLC        |
| Expenditure Start  | 4/1/2023                     |
| Expenditure End    | 6/30/2023                    |
| Expenditure Amount | \$1,552,969.65               |

## Expenditure: EN-01615661

| Project Name       | DTI Broadband Infrastructure         |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0505890                          |
| Subaward No        | 17850-630238                         |
| Subaward Amount    | \$484,710.00                         |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | GUIDESOFT INC DBA KNOWLEDGE SERVICES |
| Expenditure Start  | 4/1/2023                             |
| Expenditure End    | 6/30/2023                            |
| Expenditure Amount | \$100,121.00                         |

| Project Name      | DTI Broadband Infrastructure |
|-------------------|------------------------------|
| Subaward ID       | SUB-0336175                  |
| Subaward No       | 17850-26171                  |
| Subaward Amount   | \$0.00                       |
| Subaward Type     | Contract: Purchase Order     |
| Subrecipient Name | Versalign                    |
| Expenditure Start | 7/1/2023                     |
| Expenditure End   | 9/30/2023                    |
|                   |                              |

| Project Name       | DTI Broadband Infrastructure |
|--------------------|------------------------------|
| Subaward ID        | SUB-0607978                  |
| Subaward No        | 17850-18162                  |
| Subaward Amount    | \$6,705,839.00               |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | VERIZON Communications       |
| Expenditure Start  | 7/1/2023                     |
| Expenditure End    | 9/30/2023                    |
| Expenditure Amount | \$3,352,919.50               |

#### Expenditure: EN-01770629

| Project Name       | DTI Broadband Infrastructure |
|--------------------|------------------------------|
| Subaward ID        | SUB-0213356                  |
| Subaward No        | 17850-399993                 |
| Subaward Amount    | \$14,574,490.99              |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | COMCAST HOLDINGS CORPORATION |
| Expenditure Start  | 7/1/2023                     |
| Expenditure End    | 9/30/2023                    |
| Expenditure Amount | \$57,385.14                  |

#### Expenditure: EN-01770630

| Project Name       | DTI Broadband Infrastructure         |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0505890                          |
| Subaward No        | 17850-630238                         |
| Subaward Amount    | \$484,710.00                         |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | GUIDESOFT INC DBA KNOWLEDGE SERVICES |
| Expenditure Start  | 7/1/2023                             |
| Expenditure End    | 9/30/2023                            |
| Expenditure Amount | \$50,271.00                          |

| Project Name | DTI Broadband Infrastructure |
|--------------|------------------------------|
|              |                              |

| Subaward ID        | SUB-0442410              |
|--------------------|--------------------------|
| Subaward No        | 17850-1425               |
| Subaward Amount    | \$7,738,848.23           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | MEDIACOM DELAWARE LLC    |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | \$1,350.00               |

| Project Name       | DTI Broadband Infrastructure     |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0213472                      |
| Subaward No        | 17850-17022                      |
| Subaward Amount    | \$4,161,523.27                   |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | VERIZON WIRELESS SERVICES CELLCO |
| Expenditure Start  | 7/1/2023                         |
| Expenditure End    | 9/30/2023                        |
| Expenditure Amount | \$103,532.90                     |

## Expenditure: EN-01916515

| Project Name       | DTI Broadband Infrastructure |
|--------------------|------------------------------|
| Subaward ID        | SUB-0213356                  |
| Subaward No        | 17850-399993                 |
| Subaward Amount    | \$14,574,490.99              |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | COMCAST HOLDINGS CORPORATION |
| Expenditure Start  | 10/1/2023                    |
| Expenditure End    | 12/31/2023                   |
| Expenditure Amount | \$8,902,793.75               |

| Project Name    | DTI Broadband Infrastructure |
|-----------------|------------------------------|
| Subaward ID     | SUB-0607978                  |
| Subaward No     | 17850-18162                  |
| Subaward Amount | \$6,705,839.00               |
| Subaward Type   | Contract: Purchase Order     |
|                 |                              |

| Subrecipient Name  | VERIZON Communications |
|--------------------|------------------------|
| Expenditure Start  | 10/1/2023              |
| Expenditure End    | 12/31/2023             |
| Expenditure Amount | \$1,676,459.75         |

| Project Name       | DTI Broadband Infrastructure |
|--------------------|------------------------------|
| Subaward ID        | SUB-0336071                  |
| Subaward No        | 17850-35084                  |
| Subaward Amount    | \$664,619.26                 |
| Subaward Type      | Direct Payment               |
| Subrecipient Name  | AT&T MOBILITY                |
| Expenditure Start  | 10/1/2023                    |
| Expenditure End    | 12/31/2023                   |
| Expenditure Amount | \$20,086.65                  |

## Expenditure: EN-01916516

| Project Name       | DTI Broadband Infrastructure         |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0505890                          |
| Subaward No        | 17850-630238                         |
| Subaward Amount    | \$484,710.00                         |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | GUIDESOFT INC DBA KNOWLEDGE SERVICES |
| Expenditure Start  | 10/1/2023                            |
| Expenditure End    | 12/31/2023                           |
| Expenditure Amount | \$33,684.00                          |

| Project Name       | DTI Broadband Infrastructure |
|--------------------|------------------------------|
| Subaward ID        | SUB-0442410                  |
| Subaward No        | 17850-1425                   |
| Subaward Amount    | \$7,738,848.23               |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | MEDIACOM DELAWARE LLC        |
| Expenditure Start  | 10/1/2023                    |
| Expenditure End    | 12/31/2023                   |
| Expenditure Amount | \$3,102,519.30               |

| Project Name       | DTI Broadband Infrastructure     |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0213472                      |
| Subaward No        | 17850-17022                      |
| Subaward Amount    | \$4,161,523.27                   |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | VERIZON WIRELESS SERVICES CELLCO |
| Expenditure Start  | 10/1/2023                        |
| Expenditure End    | 12/31/2023                       |
| Expenditure Amount | \$121,210.14                     |

## Expenditure: EN-00628042

| Project Name       | DTI Broadband Infrastructure     |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0213472                      |
| Subaward No        | 17850-17022                      |
| Subaward Amount    | \$4,161,523.27                   |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | VERIZON WIRELESS SERVICES CELLCO |
| Expenditure Start  | 7/1/2022                         |
| Expenditure End    | 9/30/2022                        |
| Expenditure Amount | \$356,161.98                     |

#### Expenditure: EN-00628047

| Project Name       | DTI Broadband Infrastructure               |
|--------------------|--|
| Subaward ID        | SUB-0442409                                |
| Subaward No        | 17850-568419                               |
| Subaward Amount    | \$109,141.73                               |
| Subaward Type      | Contract: Purchase Order                   |
| Subrecipient Name  | COLUMBIA TELECOMMUNICATIONS<br>CORPORATION |
| Expenditure Start  | 7/1/2022                                   |
| Expenditure End    | 9/30/2022                                  |
| Expenditure Amount | \$65,049.23                                |

| Project Name | DTI Broadband Infrastructure |
|--------------|------------------------------|
| Subaward ID  | SUB-0213738                  |

| Subaward No        | 17850-27226                   |
|--------------------|-------------------------------|
| Subaward Amount    | \$336,362.50                  |
| Subaward Type      | Contract: Purchase Order      |
| Subrecipient Name  | PROGRESSIVE SOFTWARE COMP INC |
| Expenditure Start  | 7/1/2022                      |
| Expenditure End    | 9/30/2022                     |
| Expenditure Amount | \$70,792.50                   |

| Project Name       | DTI Broadband Infrastructure |
|--------------------|------------------------------|
| Subaward ID        | SUB-0213356                  |
| Subaward No        | 17850-399993                 |
| Subaward Amount    | \$14,574,490.99              |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | COMCAST HOLDINGS CORPORATION |
| Expenditure Start  | 7/1/2022                     |
| Expenditure End    | 9/30/2022                    |
| Expenditure Amount | \$136,287.74                 |

# Expenditure: EN-00628045

| Project Name       | DTI Broadband Infrastructure |
|--------------------|------------------------------|
| Subaward ID        | SUB-0336071                  |
| Subaward No        | 17850-35084                  |
| Subaward Amount    | \$664,619.26                 |
| Subaward Type      | Direct Payment               |
| Subrecipient Name  | AT&T MOBILITY                |
| Expenditure Start  | 7/1/2022                     |
| Expenditure End    | 9/30/2022                    |
| Expenditure Amount | \$105,647.08                 |

| Project Name      | DTI Broadband Infrastructure |
|-------------------|------------------------------|
| Subaward ID       | SUB-0336175                  |
| Subaward No       | 17850-26171                  |
| Subaward Amount   | \$0.00                       |
| Subaward Type     | Contract: Purchase Order     |
| Subrecipient Name | Versalign                    |
|                   |                              |

| Expenditure Start  | 7/1/2022    |
|--------------------|-------------|
| Expenditure End    | 9/30/2022   |
| Expenditure Amount | \$13,100.00 |

| Project Name       | DTI Broadband Infrastructure     |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0213472                      |
| Subaward No        | 17850-17022                      |
| Subaward Amount    | \$4,161,523.27                   |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | VERIZON WIRELESS SERVICES CELLCO |
| Expenditure Start  | 10/15/2021                       |
| Expenditure End    | 4/30/2025                        |
| Expenditure Amount | \$1,424,504.21                   |

#### Expenditure: EN-00324922

| Project Name       | DTI Broadband Infrastructure  |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0213738                   |
| Subaward No        | 17850-27226                   |
| Subaward Amount    | \$336,362.50                  |
| Subaward Type      | Contract: Purchase Order      |
| Subrecipient Name  | PROGRESSIVE SOFTWARE COMP INC |
| Expenditure Start  | 10/15/2021                    |
| Expenditure End    | 4/30/2025                     |
| Expenditure Amount | \$86,955.00                   |

## Expenditure: EN-00324944

| Project Name       | DTI Broadband Infrastructure |
|--------------------|------------------------------|
| Subaward ID        | SUB-0213356                  |
| Subaward No        | 17850-399993                 |
| Subaward Amount    | \$14,574,490.99              |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | COMCAST HOLDINGS CORPORATION |
| Expenditure Start  | 10/1/2021                    |
| Expenditure End    | 4/30/2025                    |
| Expenditure Amount | \$112,652.43                 |

| Project Name       | DTI Broadband Infrastructure |
|--------------------|------------------------------|
| Subaward ID        | SUB-0336071                  |
| Subaward No        | 17850-35084                  |
| Subaward Amount    | \$664,619.26                 |
| Subaward Type      | Direct Payment               |
| Subrecipient Name  | AT&T MOBILITY                |
| Expenditure Start  | 4/1/2022                     |
| Expenditure End    | 6/30/2022                    |
| Expenditure Amount | \$511,895.25                 |

| Project Name       | DTI Broadband Infrastructure |
|--------------------|------------------------------|
| Subaward ID        | SUB-0336175                  |
| Subaward No        | 17850-26171                  |
| Subaward Amount    | \$0.00                       |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | Versalign                    |
| Expenditure Start  | 4/1/2022                     |
| Expenditure End    | 12/31/2024                   |
| Expenditure Amount | \$9,230.00                   |

## Expenditure: EN-00435111

| Project Name       | DTI Broadband Infrastructure     |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0213472                      |
| Subaward No        | 17850-17022                      |
| Subaward Amount    | \$4,161,523.27                   |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | VERIZON WIRELESS SERVICES CELLCO |
| Expenditure Start  | 4/1/2022                         |
| Expenditure End    | 6/30/2022                        |
| Expenditure Amount | \$1,423,502.78                   |

| Project Name | DTI Broadband Infrastructure |
|--------------|------------------------------|
| Subaward ID  | SUB-0213738                  |
| Subaward No  | 17850-27226                  |
|              |                              |

| Subaward Amount    | \$336,362.50                  |
|--------------------|-------------------------------|
| Subaward Type      | Contract: Purchase Order      |
| Subrecipient Name  | PROGRESSIVE SOFTWARE COMP INC |
| Expenditure Start  | 4/1/2022                      |
| Expenditure End    | 6/30/2022                     |
| Expenditure Amount | \$121,940.00                  |

| Project Name       | DTI Broadband Infrastructure |
|--------------------|------------------------------|
| Subaward ID        | SUB-0213356                  |
| Subaward No        | 17850-399993                 |
| Subaward Amount    | \$14,574,490.99              |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | COMCAST HOLDINGS CORPORATION |
| Expenditure Start  | 4/1/2022                     |
| Expenditure End    | 6/30/2022                    |
| Expenditure Amount | \$309,684.02                 |

## Expenditure: EN-00840638

| Project Name       | OGOV Delaware Coalition Against Domestic Violence |
|--------------------|---|
| Subaward ID        | SUB-0435742                                       |
| Subaward No        | 19460_27599                                       |
| Subaward Amount    | \$125,000.00                                      |
| Subaward Type      | Grant: Lump Sum Payment(s)                        |
| Subrecipient Name  | Delaware Coalition Against Domestic Violence      |
| Expenditure Start  | 10/1/2022   |
| Expenditure End    | 12/31/2022  |
| Expenditure Amount | \$4,687.59  |

| Project Name      | OGOV Delaware Coalition Against Domestic Violence |
|-------------------|---|
| Subaward ID       | SUB-0435742                                       |
| Subaward No       | 19460_27599                                       |
| Subaward Amount   | \$125,000.00                                      |
| Subaward Type     | Grant: Lump Sum Payment(s)                        |
| Subrecipient Name | Delaware Coalition Against Domestic Violence      |
| Expenditure Start | 1/1/2023  |
|                   |   |

| Expenditure End    | 3/31/2023    |
|--------------------|--------------|
| Expenditure Amount | \$120,312.41 |

| Project Name       | OGOV Delaware Coalition Against Domestic Violence |
|--------------------|---|
| Subaward ID        | SUB-0435742                                       |
| Subaward No        | 19460_27599                                       |
| Subaward Amount    | \$125,000.00                                      |
| Subaward Type      | Grant: Lump Sum Payment(s)                        |
| Subrecipient Name  | Delaware Coalition Against Domestic Violence      |
| Expenditure Start  | 6/14/2022   |
| Expenditure End    | 6/14/2022   |
| Expenditure Amount | \$0.00  |

#### Expenditure: EN-00840630

| Project Name       | OGOV Perinatal Prana Mental Health |
|--------------------|------------------------------------|
| Subaward ID        | SUB-0435747                        |
| Subaward No        | 19463_645838                       |
| Subaward Amount    | \$200,000.00                       |
| Subaward Type      | Grant: Lump Sum Payment(s)         |
| Subrecipient Name  | Perinatal Prana                    |
| Expenditure Start  | 10/1/2022                          |
| Expenditure End    | 12/31/2022                         |
| Expenditure Amount | \$46,930.53                        |

#### Expenditure: EN-01173873

| Project Name       | OGOV Perinatal Prana Mental Health |
|--------------------|------------------------------------|
| Subaward ID        | SUB-0435747                        |
| Subaward No        | 19463_645838                       |
| Subaward Amount    | \$200,000.00                       |
| Subaward Type      | Grant: Lump Sum Payment(s)         |
| Subrecipient Name  | Perinatal Prana                    |
| Expenditure Start  | 1/1/2023                           |
| Expenditure End    | 3/31/2023                          |
| Expenditure Amount | \$115,362.64                       |

| Project Name       | OGOV Perinatal Prana Mental Health |
|--------------------|------------------------------------|
| Subaward ID        | SUB-0435747                        |
| Subaward No        | 19463_645838                       |
| Subaward Amount    | \$200,000.00                       |
| Subaward Type      | Grant: Lump Sum Payment(s)         |
| Subrecipient Name  | Perinatal Prana                    |
| Expenditure Start  | 7/6/2022                           |
| Expenditure End    | 9/30/2022                          |
| Expenditure Amount | \$37,706.83                        |

| Project Name       | DOL Forward Delaware Program |
|--------------------|------------------------------|
| Subaward ID        | SUB-0722291                  |
| Subaward No        | 19769-24324                  |
| Subaward Amount    | \$126,970.65                 |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | Goodwill DE and DE County    |
| Expenditure Start  | 4/1/2023                     |
| Expenditure End    | 6/30/2023                    |
| Expenditure Amount | \$61,611.88                  |

# Expenditure: EN-01799726

| Project Name       | DOL Forward Delaware Program |
|--------------------|------------------------------|
| Subaward ID        | SUB-0722298                  |
| Subaward No        | 19769-9538000080             |
| Subaward Amount    | \$1,203,946.00               |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | Delaware Skills Center       |
| Expenditure Start  | 7/1/2023                     |
| Expenditure End    | 9/30/2023                    |
| Expenditure Amount | \$11,302.03                  |

| Project Name    | DOL Forward Delaware Program |
|-----------------|------------------------------|
| Subaward ID     | SUB-0722291                  |
| Subaward No     | 19769-24324                  |
| Subaward Amount | \$126,970.65                 |
|                 |                              |

| Subaward Type      | Contract: Purchase Order  |
|--------------------|---------------------------|
| Subrecipient Name  | Goodwill DE and DE County |
| Expenditure Start  | 7/1/2023                  |
| Expenditure End    | 9/30/2023                 |
| Expenditure Amount | \$32,928.43               |

| Project Name       | DOL Forward Delaware Program |
|--------------------|------------------------------|
| Subaward ID        | SUB-0722294                  |
| Subaward No        | 19769-34426                  |
| Subaward Amount    | \$148,700.00                 |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | Amer Driver Training ACAD    |
| Expenditure Start  | 7/1/2023                     |
| Expenditure End    | 9/30/2023                    |
| Expenditure Amount | \$89,220.00                  |

## Expenditure: EN-01799723

| Project Name       | DOL Forward Delaware Program |
|--------------------|------------------------------|
| Subaward ID        | SUB-0722299                  |
| Subaward No        | 19769-58                     |
| Subaward Amount    | \$311,119.00                 |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | Food Bank of Delaware Inc    |
| Expenditure Start  | 7/1/2023                     |
| Expenditure End    | 9/30/2023                    |
| Expenditure Amount | \$15,914.87                  |

| Project Name      | DOL Forward Delaware Program |
|-------------------|------------------------------|
| Subaward ID       | SUB-0722291                  |
| Subaward No       | 19769-24324                  |
| Subaward Amount   | \$126,970.65                 |
| Subaward Type     | Contract: Purchase Order     |
| Subrecipient Name | Goodwill DE and DE County    |
| Expenditure Start | 10/1/2023                    |
| Expenditure End   | 12/31/2023                   |
|                   |                              |

| Project Name       | DOL Forward Delaware Program |
|--------------------|------------------------------|
| Subaward ID        | SUB-0722300                  |
| Subaward No        | 19769-9539000040             |
| Subaward Amount    | \$142,920.00                 |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | POLYTECH ADULT EDUCATION     |
| Expenditure Start  | 10/1/2023                    |
| Expenditure End    | 12/31/2023                   |
| Expenditure Amount | \$24,440.28                  |

#### Expenditure: EN-01912881

| Project Name       | DOL Forward Delaware Program |
|--------------------|------------------------------|
| Subaward ID        | SUB-0722294                  |
| Subaward No        | 19769-34426                  |
| Subaward Amount    | \$148,700.00                 |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | Amer Driver Training ACAD    |
| Expenditure Start  | 10/1/2023                    |
| Expenditure End    | 12/31/2023                   |
| Expenditure Amount | \$29,740.00                  |

#### Expenditure: EN-01912893

| Project Name       | DOL Forward Delaware Program   |
|--------------------|--------------------------------|
| Subaward ID        | SUB-0722302                    |
| Subaward No        | 19769-9540000000               |
| Subaward Amount    | \$178,729.00                   |
| Subaward Type      | Contract: Purchase Order       |
| Subrecipient Name  | Sussex Technical Schl District |
| Expenditure Start  | 10/1/2023                      |
| Expenditure End    | 12/31/2023                     |
| Expenditure Amount | \$24,476.80                    |

| Project Name DOL Forward Delaware Program |
|---|
|---|

| Subaward ID        | SUB-0722296                         |
|--------------------|-------------------------------------|
| Subaward No        | 19769-676680                        |
| Subaward Amount    | \$210,000.00                        |
| Subaward Type      | Contract: Purchase Order            |
| Subrecipient Name  | BLINDSIGHT DELAWARE ENTERPRISES INC |
| Expenditure Start  | 10/1/2023                           |
| Expenditure End    | 12/31/2023                          |
| Expenditure Amount | \$68,515.00                         |

| Project Name       | DOL Forward Delaware Program |
|--------------------|------------------------------|
| Subaward ID        | SUB-0722299                  |
| Subaward No        | 19769-58                     |
| Subaward Amount    | \$311,119.00                 |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | Food Bank of Delaware Inc    |
| Expenditure Start  | 10/1/2023                    |
| Expenditure End    | 12/31/2023                   |
| Expenditure Amount | \$33,968.99                  |

## Expenditure: EN-01912911

| Project Name       | DOL Forward Delaware Program |
|--------------------|------------------------------|
| Subaward ID        | SUB-0722298                  |
| Subaward No        | 19769-9538000080             |
| Subaward Amount    | \$1,203,946.00               |
| Subaward Type      | Contract: Purchase Order     |
| Subrecipient Name  | Delaware Skills Center       |
| Expenditure Start  | 10/1/2023                    |
| Expenditure End    | 12/31/2023                   |
| Expenditure Amount | \$239,527.88                 |

| Project Name    | DOL DWDB Business Liaisons |
|-----------------|----------------------------|
| Subaward ID     | SUB-0448536                |
| Subaward No     | 19771-655253               |
| Subaward Amount | \$126,000.00               |
| Subaward Type   | Contract: Purchase Order   |
|                 |                            |

| Subrecipient Name  | GEORGE S FRANKEL |
|--------------------|------------------|
| Expenditure Start  | 1/1/2023         |
| Expenditure End    | 3/31/2023        |
| Expenditure Amount | \$25,640.90      |

| Project Name       | DOL DWDB Business Liaisons |
|--------------------|----------------------------|
| Subaward ID        | SUB-0605482                |
| Subaward No        | 19771-675320               |
| Subaward Amount    | \$60,000.00                |
| Subaward Type      | Contract: Purchase Order   |
| Subrecipient Name  | KATHERINE HOSEY CONSULTING |
| Expenditure Start  | 2/1/2023                   |
| Expenditure End    | 3/31/2023                  |
| Expenditure Amount | \$5,110.63                 |

## Expenditure: EN-01614973

| Project Name       | DOL DWDB Business Liaisons |
|--------------------|----------------------------|
| Subaward ID        | SUB-0605478                |
| Subaward No        | 19771-676612               |
| Subaward Amount    | \$0.00                     |
| Subaward Type      | Contract: Purchase Order   |
| Subrecipient Name  | PENNI ENAMA                |
| Expenditure Start  | 4/1/2023                   |
| Expenditure End    | 6/30/2023                  |
| Expenditure Amount | \$15,000.00                |

| Project Name       | DOL DWDB Business Liaisons |
|--------------------|----------------------------|
| Subaward ID        | SUB-0448536                |
| Subaward No        | 19771-655253               |
| Subaward Amount    | \$126,000.00               |
| Subaward Type      | Contract: Purchase Order   |
| Subrecipient Name  | GEORGE S FRANKEL           |
| Expenditure Start  | 4/1/2023                   |
| Expenditure End    | 6/30/2023                  |
| Expenditure Amount | \$15,316.00                |

| Project Name       | DOL DWDB Business Liaisons |
|--------------------|----------------------------|
| Subaward ID        | SUB-0605482                |
| Subaward No        | 19771-675320               |
| Subaward Amount    | \$60,000.00                |
| Subaward Type      | Contract: Purchase Order   |
| Subrecipient Name  | KATHERINE HOSEY CONSULTING |
| Expenditure Start  | 4/1/2023                   |
| Expenditure End    | 6/30/2023                  |
| Expenditure Amount | \$15,228.69                |

## Expenditure: EN-01799727

| Project Name       | DOL DWDB Business Liaisons |
|--------------------|----------------------------|
| Subaward ID        | SUB-0605482                |
| Subaward No        | 19771-675320               |
| Subaward Amount    | \$60,000.00                |
| Subaward Type      | Contract: Purchase Order   |
| Subrecipient Name  | KATHERINE HOSEY CONSULTING |
| Expenditure Start  | 7/1/2023                   |
| Expenditure End    | 9/30/2023                  |
| Expenditure Amount | \$15,216.38                |

#### Expenditure: EN-01799728

| Project Name       | DOL DWDB Business Liaisons |
|--------------------|----------------------------|
| Subaward ID        | SUB-0448536                |
| Subaward No        | 19771-655253               |
| Subaward Amount    | \$126,000.00               |
| Subaward Type      | Contract: Purchase Order   |
| Subrecipient Name  | GEORGE S FRANKEL           |
| Expenditure Start  | 7/1/2023                   |
| Expenditure End    | 9/30/2023                  |
| Expenditure Amount | \$15,327.82                |

| Project Name | DOL DWDB Business Liaisons |
|--------------|----------------------------|
| Subaward ID  | SUB-0605478                |
|              |                            |

| Subaward No        | 19771-676612             |
|--------------------|--------------------------|
| Subaward Amount    | \$0.00                   |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | PENNI ENAMA              |
| Expenditure Start  | 7/1/2023                 |
| Expenditure End    | 9/30/2023                |
| Expenditure Amount | (\$15,000.00)            |

| Project Name       | DOL DWDB Business Liaisons |
|--------------------|----------------------------|
| Subaward ID        | SUB-0605482                |
| Subaward No        | 19771-675320               |
| Subaward Amount    | \$60,000.00                |
| Subaward Type      | Contract: Purchase Order   |
| Subrecipient Name  | KATHERINE HOSEY CONSULTING |
| Expenditure Start  | 10/1/2023                  |
| Expenditure End    | 12/31/2023                 |
| Expenditure Amount | \$15,254.38                |

# Expenditure: EN-01912919

| Project Name       | DOL DWDB Business Liaisons |
|--------------------|----------------------------|
| Subaward ID        | SUB-0448536                |
| Subaward No        | 19771-655253               |
| Subaward Amount    | \$126,000.00               |
| Subaward Type      | Contract: Purchase Order   |
| Subrecipient Name  | GEORGE S FRANKEL           |
| Expenditure Start  | 10/1/2023                  |
| Expenditure End    | 12/31/2023                 |
| Expenditure Amount | \$16,258.89                |

| Project Name      | DOL Pre-Apprenticeship Program |
|-------------------|--------------------------------|
| Subaward ID       | SUB-0722284                    |
| Subaward No       | 19867-28428                    |
| Subaward Amount   | \$222,480.00                   |
| Subaward Type     | Contract: Purchase Order       |
| Subrecipient Name | CHALLENGE PROGRAM              |
|                   |                                |

| Expenditure Start  | 7/1/2023   |
|--------------------|------------|
| Expenditure End    | 9/30/2023  |
| Expenditure Amount | \$3,819.90 |

| Project Name       | DOL Pre-Apprenticeship Program |
|--------------------|--------------------------------|
| Subaward ID        | SUB-0722287                    |
| Subaward No        | 19867-9539000040               |
| Subaward Amount    | \$160,880.00                   |
| Subaward Type      | Contract: Purchase Order       |
| Subrecipient Name  | POLYTECH ADULT EDUCATION       |
| Expenditure Start  | 7/1/2023                       |
| Expenditure End    | 9/30/2023                      |
| Expenditure Amount | \$28,000.00                    |

### Expenditure: EN-01800219

| Project Name       | DOL Pre-Apprenticeship Program |
|--------------------|--------------------------------|
| Subaward ID        | SUB-0722290                    |
| Subaward No        | 19867-9538000080               |
| Subaward Amount    | \$298,390.00                   |
| Subaward Type      | Contract: Purchase Order       |
| Subrecipient Name  | Delaware Skills Center         |
| Expenditure Start  | 7/1/2023                       |
| Expenditure End    | 9/30/2023                      |
| Expenditure Amount | \$11,202.68                    |

# Expenditure: EN-01800221

| Project Name       | DOL Pre-Apprenticeship Program                 |
|--------------------|--|
| Subaward ID        | SUB-0722285                                    |
| Subaward No        | 19867-473032                                   |
| Subaward Amount    | \$780,340.00                                   |
| Subaward Type      | Contract: Purchase Order                       |
| Subrecipient Name  | LEEP Inc Labor Economics Education emPowerment |
| Expenditure Start  | 7/1/2023                                       |
| Expenditure End    | 9/30/2023                                      |
| Expenditure Amount | \$161,228.82                                   |

| Project Name       | DOL Pre-Apprenticeship Program |
|--------------------|--------------------------------|
| Subaward ID        | SUB-0722284                    |
| Subaward No        | 19867-28428                    |
| Subaward Amount    | \$222,480.00                   |
| Subaward Type      | Contract: Purchase Order       |
| Subrecipient Name  | CHALLENGE PROGRAM              |
| Expenditure Start  | 10/1/2023                      |
| Expenditure End    | 12/31/2023                     |
| Expenditure Amount | \$37,382.02                    |

| Project Name       | DOL Pre-Apprenticeship Program                 |
|--------------------|--|
| Subaward ID        | SUB-0722285                                    |
| Subaward No        | 19867-473032                                   |
| Subaward Amount    | \$780,340.00                                   |
| Subaward Type      | Contract: Purchase Order                       |
| Subrecipient Name  | LEEP Inc Labor Economics Education emPowerment |
| Expenditure Start  | 10/1/2023                                      |
| Expenditure End    | 12/31/2023                                     |
| Expenditure Amount | \$141,288.63                                   |

# Expenditure: EN-01912928

| Project Name       | DOL Pre-Apprenticeship Program |
|--------------------|--------------------------------|
| Subaward ID        | SUB-0722286                    |
| Subaward No        | 19867-652006                   |
| Subaward Amount    | \$115,396.00                   |
| Subaward Type      | Contract: Purchase Order       |
| Subrecipient Name  | Nerdit Now LLC                 |
| Expenditure Start  | 10/1/2023                      |
| Expenditure End    | 12/31/2023                     |
| Expenditure Amount | \$7,000.00                     |

| Project Name | DOL Pre-Apprenticeship Program |
|--------------|--------------------------------|
| Subaward ID  | SUB-0722290                    |
| Subaward No  | 19867-9538000080               |
|              |                                |

| Subaward Amount    | \$298,390.00             |
|--------------------|--------------------------|
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | Delaware Skills Center   |
| Expenditure Start  | 10/1/2023                |
| Expenditure End    | 12/31/2023               |
| Expenditure Amount | \$22,046.63              |

| Project Name       | DSAMH Psychiatric Center Study |
|--------------------|--------------------------------|
| Subaward ID        | SUB-0722218                    |
| Subaward No        | 19186-30078                    |
| Subaward Amount    | \$200,000.00                   |
| Subaward Type      | Contract: Purchase Order       |
| Subrecipient Name  | Davis Bowen & Friedel Inc      |
| Expenditure Start  | 7/1/2023                       |
| Expenditure End    | 9/30/2023                      |
| Expenditure Amount | \$60,000.00                    |

## Expenditure: EN-01920675

| Project Name       | DSAMH Psychiatric Center Study |
|--------------------|--------------------------------|
| Subaward ID        | SUB-0722218                    |
| Subaward No        | 19186-30078                    |
| Subaward Amount    | \$200,000.00                   |
| Subaward Type      | Contract: Purchase Order       |
| Subrecipient Name  | Davis Bowen & Friedel Inc      |
| Expenditure Start  | 10/1/2023                      |
| Expenditure End    | 12/31/2023                     |
| Expenditure Amount | \$36,000.00                    |

| Project Name      | OGOV MH Boys & Girls Clubs DE |
|-------------------|-------------------------------|
| Subaward ID       | SUB-0548846                   |
| Subaward No       | 19865                         |
| Subaward Amount   | \$650,000.00                  |
| Subaward Type     | Contract: Purchase Order      |
| Subrecipient Name | BOYS & GIRLS CLUB OF DELAWARE |
| Expenditure Start | 10/1/2022                     |
|                   |                               |

| Expenditure End    | 12/31/2022  |
|--------------------|-------------|
| Expenditure Amount | \$13,019.63 |

| Project Name       | OGOV MH Boys & Girls Clubs DE |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0548846                   |
| Subaward No        | 19865                         |
| Subaward Amount    | \$650,000.00                  |
| Subaward Type      | Contract: Purchase Order      |
| Subrecipient Name  | BOYS & GIRLS CLUB OF DELAWARE |
| Expenditure Start  | 1/1/2023                      |
| Expenditure End    | 3/31/2023                     |
| Expenditure Amount | \$39,376.37                   |

## Expenditure: EN-01614203

| Project Name       | OGOV MH Boys & Girls Clubs DE |
|--------------------|-------------------------------|
| Subaward ID        | SUB-0548846                   |
| Subaward No        | 19865                         |
| Subaward Amount    | \$650,000.00                  |
| Subaward Type      | Contract: Purchase Order      |
| Subrecipient Name  | BOYS & GIRLS CLUB OF DELAWARE |
| Expenditure Start  | 4/1/2023                      |
| Expenditure End    | 6/30/2023                     |
| Expenditure Amount | \$294,626.00                  |

## Expenditure: EN-01614211

| Project Name       | OGOV MH Gaudenzia        |
|--------------------|--------------------------|
| Subaward ID        | SUB-0722280              |
| Subaward No        | 19462-17797              |
| Subaward Amount    | \$3,000,000.00           |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | GAUDENZIA INC            |
| Expenditure Start  | 5/1/2023                 |
| Expenditure End    | 6/30/2023                |
| Expenditure Amount | \$3,000,000.00           |

| Project Name       | OGOV MH Latin American          |
|--------------------|---------------------------------|
| Subaward ID        | SUB-0620516                     |
| Subaward No        | 19954-11                        |
| Subaward Amount    | \$171,949.00                    |
| Subaward Type      | Contract: Purchase Order        |
| Subrecipient Name  | Latin American Community Center |
| Expenditure Start  | 1/1/2023                        |
| Expenditure End    | 3/31/2023                       |
| Expenditure Amount | \$85,974.50                     |

| Project Name       | OGOV MH NAMI  |
|--------------------|---|
| Subaward ID        | SUB-0452463   |
| Subaward No        | 19851-14930   |
| Subaward Amount    | \$208,110.00  |
| Subaward Type      | Grant: Lump Sum Payment(s)                              |
| Subrecipient Name  | National Alliance on Mental Illness Delaware Foundation |
| Expenditure Start  | 10/1/2022   |
| Expenditure End    | 12/31/2022  |
| Expenditure Amount | \$15,403.44   |

# Expenditure: EN-01173844

| Project Name       | OGOV MH NAMI  |
|--------------------|---|
| Subaward ID        | SUB-0452463   |
| Subaward No        | 19851-14930   |
| Subaward Amount    | \$208,110.00  |
| Subaward Type      | Grant: Lump Sum Payment(s)                              |
| Subrecipient Name  | National Alliance on Mental Illness Delaware Foundation |
| Expenditure Start  | 1/1/2023  |
| Expenditure End    | 3/31/2023   |
| Expenditure Amount | \$184,431.78  |

| Project Name    | OGOV MH NAMI |
|-----------------|--------------|
| Subaward ID     | SUB-0452463  |
| Subaward No     | 19851-14930  |
| Subaward Amount | \$208,110.00 |
|                 |              |

| Subaward Type      | Grant: Lump Sum Payment(s)                              |
|--------------------|---|
| Subrecipient Name  | National Alliance on Mental Illness Delaware Foundation |
| Expenditure Start  | 7/1/2022  |
| Expenditure End    | 9/30/2022   |
| Expenditure Amount | \$8,274.78  |

| Project Name       | OGOV MH Saint Francis      |
|--------------------|----------------------------|
| Subaward ID        | SUB-0452510                |
| Subaward No        | 19878-24330                |
| Subaward Amount    | \$2,500,000.00             |
| Subaward Type      | Grant: Lump Sum Payment(s) |
| Subrecipient Name  | St. Francis Hospital, Inc  |
| Expenditure Start  | 10/1/2022                  |
| Expenditure End    | 12/31/2022                 |
| Expenditure Amount | \$78,015.00                |

# Expenditure: EN-01174042

| Project Name       | OGOV MH Saint Francis      |
|--------------------|----------------------------|
| Subaward ID        | SUB-0452510                |
| Subaward No        | 19878-24330                |
| Subaward Amount    | \$2,500,000.00             |
| Subaward Type      | Grant: Lump Sum Payment(s) |
| Subrecipient Name  | St. Francis Hospital, Inc  |
| Expenditure Start  | 1/1/2023                   |
| Expenditure End    | 3/31/2023                  |
| Expenditure Amount | \$1,171,985.00             |

| Project Name      | OGOV MH Saint Francis      |
|-------------------|----------------------------|
| Subaward ID       | SUB-0452510                |
| Subaward No       | 19878-24330                |
| Subaward Amount   | \$2,500,000.00             |
| Subaward Type     | Grant: Lump Sum Payment(s) |
| Subrecipient Name | St. Francis Hospital, Inc  |
| Expenditure Start | 10/1/2023                  |
| Expenditure End   | 12/31/2023                 |
|                   |                            |

| Project Name       | OGOV MH Tabitha Medical Care                      |
|--------------------|---|
| Subaward ID        | SUB-0452561                                       |
| Subaward No        | 19950-558592                                      |
| Subaward Amount    | \$250,000.00                                      |
| Subaward Type      | Grant: Lump Sum Payment(s)                        |
| Subrecipient Name  | Tabitha Medical Care- Dorcas Salvation Foundation |
| Expenditure Start  | 10/1/2022   |
| Expenditure End    | 12/31/2022  |
| Expenditure Amount | \$4,128.65  |

## Expenditure: EN-01174060

| Project Name       | OGOV MH Tabitha Medical Care                      |
|--------------------|---|
| Subaward ID        | SUB-0452561                                       |
| Subaward No        | 19950-558592                                      |
| Subaward Amount    | \$250,000.00                                      |
| Subaward Type      | Grant: Lump Sum Payment(s)                        |
| Subrecipient Name  | Tabitha Medical Care- Dorcas Salvation Foundation |
| Expenditure Start  | 1/1/2023  |
| Expenditure End    | 3/31/2023   |
| Expenditure Amount | \$120,871.35                                      |

## Expenditure: EN-00841590

| Project Name       | OGOV MH Telehelp 247       |
|--------------------|----------------------------|
| Subaward ID        | SUB-0452567                |
| Subaward No        | 19949-599820               |
| Subaward Amount    | \$400,000.00               |
| Subaward Type      | Grant: Lump Sum Payment(s) |
| Subrecipient Name  | TeleHelp 24/7              |
| Expenditure Start  | 10/1/2022                  |
| Expenditure End    | 12/31/2022                 |
| Expenditure Amount | \$96,106.41                |

| Project Name | OGOV MH Telehelp 247 |
|--------------|----------------------|
|              |                      |

| Subaward ID        | SUB-0452567                |
|--------------------|----------------------------|
| Subaward No        | 19949-599820               |
| Subaward Amount    | \$400,000.00               |
| Subaward Type      | Grant: Lump Sum Payment(s) |
| Subrecipient Name  | TeleHelp 24/7              |
| Expenditure Start  | 10/1/2022                  |
| Expenditure End    | 3/31/2023                  |
| Expenditure Amount | \$103,893.59               |

| Project Name       | OGOV MH Telehelp 247       |
|--------------------|----------------------------|
| Subaward ID        | SUB-0452567                |
| Subaward No        | 19949-599820               |
| Subaward Amount    | \$400,000.00               |
| Subaward Type      | Grant: Lump Sum Payment(s) |
| Subrecipient Name  | TeleHelp 24/7              |
| Expenditure Start  | 7/1/2023                   |
| Expenditure End    | 9/30/2023                  |
| Expenditure Amount | \$200,000.00               |

# Expenditure: EN-00841634

| Project Name       | OGOV MH Trauma Matters DE  |
|--------------------|----------------------------|
| Subaward ID        | SUB-0452624                |
| Subaward No        | 19939                      |
| Subaward Amount    | \$250,000.00               |
| Subaward Type      | Grant: Lump Sum Payment(s) |
| Subrecipient Name  | Trauma Matters Delaware    |
| Expenditure Start  | 10/1/2022                  |
| Expenditure End    | 12/31/2022                 |
| Expenditure Amount | \$38,074.54                |

| Project Name    | OGOV MH Trauma Matters DE  |
|-----------------|----------------------------|
| Subaward ID     | SUB-0452624                |
| Subaward No     | 19939                      |
| Subaward Amount | \$250,000.00               |
| Subaward Type   | Grant: Lump Sum Payment(s) |
|                 |                            |

| Subrecipient Name  | Trauma Matters Delaware |
|--------------------|-------------------------|
| Expenditure Start  | 10/1/2022               |
| Expenditure End    | 3/31/2023               |
| Expenditure Amount | \$86,925.46             |

| Project Name       | OGOV MH Trauma Matters DE  |
|--------------------|----------------------------|
| Subaward ID        | SUB-0452624                |
| Subaward No        | 19939                      |
| Subaward Amount    | \$250,000.00               |
| Subaward Type      | Grant: Lump Sum Payment(s) |
| Subrecipient Name  | Trauma Matters Delaware    |
| Expenditure Start  | 7/1/2023                   |
| Expenditure End    | 9/30/2023                  |
| Expenditure Amount | \$62,500.00                |

# Expenditure: EN-00841693

| Project Name       | OGOV MH Trauma Specialists DE  |
|--------------------|--------------------------------|
| Subaward ID        | SUB-0452678                    |
| Subaward No        | 19881-592959                   |
| Subaward Amount    | \$75,000.00                    |
| Subaward Type      | Grant: Lump Sum Payment(s)     |
| Subrecipient Name  | Trauma Specialists of Delaware |
| Expenditure Start  | 10/1/2022                      |
| Expenditure End    | 12/31/2022                     |
| Expenditure Amount | \$7,000.00                     |

| Project Name       | OGOV MH Trauma Specialists DE  |
|--------------------|--------------------------------|
| Subaward ID        | SUB-0452678                    |
| Subaward No        | 19881-592959                   |
| Subaward Amount    | \$75,000.00                    |
| Subaward Type      | Grant: Lump Sum Payment(s)     |
| Subrecipient Name  | Trauma Specialists of Delaware |
| Expenditure Start  | 1/1/2023                       |
| Expenditure End    | 3/31/2023                      |
| Expenditure Amount | \$43,000.00                    |

| Project Name       | OGOV MH DE Pediatrics    |
|--------------------|--------------------------|
| Subaward ID        | SUB-0545409              |
| Subaward No        | 19461                    |
| Subaward Amount    | \$350,000.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | Delaware Pediatrics      |
| Expenditure Start  | 10/1/2022                |
| Expenditure End    | 12/31/2022               |
| Expenditure Amount | \$14,352.00              |

# Expenditure: EN-01173799

| Project Name       | OGOV MH DE Pediatrics    |
|--------------------|--------------------------|
| Subaward ID        | SUB-0545409              |
| Subaward No        | 19461                    |
| Subaward Amount    | \$350,000.00             |
| Subaward Type      | Contract: Purchase Order |
| Subrecipient Name  | Delaware Pediatrics      |
| Expenditure Start  | 1/1/2023                 |
| Expenditure End    | 3/31/2023                |
| Expenditure Amount | \$182,132.00             |

## Expenditure: EN-00840418

| Project Name       | OGOV Dover Interfaith Mission              |
|--------------------|--|
| Subaward ID        | SUB-0454152                                |
| Subaward No        | 19521-23357                                |
| Subaward Amount    | \$5,000,000.00                             |
| Subaward Type      | Grant: Lump Sum Payment(s)                 |
| Subrecipient Name  | Dover Interfaith Mission for Housing, Inc. |
| Expenditure Start  | 10/1/2022                                  |
| Expenditure End    | 12/31/2022                                 |
| Expenditure Amount | \$27,116.04                                |

| Project Name | OGOV Dover Interfaith Mission |
|--------------|-------------------------------|
| Subaward ID  | SUB-0454152                   |
|              |                               |

| Subaward No        | 19521-23357                                |
|--------------------|--|
| Subaward Amount    | \$5,000,000.00                             |
| Subaward Type      | Grant: Lump Sum Payment(s)                 |
| Subrecipient Name  | Dover Interfaith Mission for Housing, Inc. |
| Expenditure Start  | 1/1/2023                                   |
| Expenditure End    | 3/31/2023                                  |
| Expenditure Amount | \$1,651,883.96                             |

| Project Name       | OGOV Dover Interfaith Mission              |
|--------------------|--|
| Subaward ID        | SUB-0454152                                |
| Subaward No        | 19521-23357                                |
| Subaward Amount    | \$5,000,000.00                             |
| Subaward Type      | Grant: Lump Sum Payment(s)                 |
| Subrecipient Name  | Dover Interfaith Mission for Housing, Inc. |
| Expenditure Start  | 4/1/2023                                   |
| Expenditure End    | 6/30/2023                                  |
| Expenditure Amount | \$850,000.00                               |

# Expenditure: EN-01916710

| Project Name       | OGOV Dover Interfaith Mission              |
|--------------------|--|
| Subaward ID        | SUB-0454152                                |
| Subaward No        | 19521-23357                                |
| Subaward Amount    | \$5,000,000.00                             |
| Subaward Type      | Grant: Lump Sum Payment(s)                 |
| Subrecipient Name  | Dover Interfaith Mission for Housing, Inc. |
| Expenditure Start  | 10/1/2023                                  |
| Expenditure End    | 12/31/2023                                 |
| Expenditure Amount | \$1,700,000.00                             |

| Project Name      | OGOV Dover Interfaith Mission              |
|-------------------|--|
| Subaward ID       | SUB-0454152                                |
| Subaward No       | 19521-23357                                |
| Subaward Amount   | \$5,000,000.00                             |
| Subaward Type     | Grant: Lump Sum Payment(s)                 |
| Subrecipient Name | Dover Interfaith Mission for Housing, Inc. |
|                   |  |

| Expenditure Start  | 8/2/2022    |
|--------------------|-------------|
| Expenditure End    | 9/30/2022   |
| Expenditure Amount | \$21,000.00 |

| Project Name       | DTI Service Now Modernization    |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0505672                      |
| Subaward No        | 19840-133149                     |
| Subaward Amount    | \$4,756,633.32                   |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | CARAHSOFT TECHNOLOGY CORPORATION |
| Expenditure Start  | 1/1/2023                         |
| Expenditure End    | 3/31/2023                        |
| Expenditure Amount | \$538,012.74                     |

### Expenditure: EN-01616460

| Project Name       | DTI Service Now Modernization    |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0505672                      |
| Subaward No        | 19840-133149                     |
| Subaward Amount    | \$4,756,633.32                   |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | CARAHSOFT TECHNOLOGY CORPORATION |
| Expenditure Start  | 4/1/2023                         |
| Expenditure End    | 6/30/2023                        |
| Expenditure Amount | \$115,453.80                     |

# Expenditure: EN-01771220

| Project Name       | DTI Service Now Modernization    |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0505672                      |
| Subaward No        | 19840-133149                     |
| Subaward Amount    | \$4,756,633.32                   |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | CARAHSOFT TECHNOLOGY CORPORATION |
| Expenditure Start  | 7/1/2023                         |
| Expenditure End    | 9/30/2023                        |
| Expenditure Amount | \$244,414.50                     |

| Project Name       | DTI Service Now Modernization    |
|--------------------|----------------------------------|
| Subaward ID        | SUB-0505672                      |
| Subaward No        | 19840-133149                     |
| Subaward Amount    | \$4,756,633.32                   |
| Subaward Type      | Contract: Purchase Order         |
| Subrecipient Name  | CARAHSOFT TECHNOLOGY CORPORATION |
| Expenditure Start  | 10/1/2023                        |
| Expenditure End    | 12/31/2023                       |
| Expenditure Amount | \$153,950.80                     |

| Project Name       | DTI Service Now Modernization        |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0836530                          |
| Subaward No        | 19840-630238                         |
| Subaward Amount    | \$95,760.00                          |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | GUIDESOFT INC DBA KNOWLEDGE SERVICES |
| Expenditure Start  | 10/1/2023                            |
| Expenditure End    | 12/31/2023                           |
| Expenditure Amount | \$34,230.00                          |

# Expenditure: EN-01771231

| Project Name       | DTI Network Modernization            |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0722835                          |
| Subaward No        | 19704-630238                         |
| Subaward Amount    | \$109,050.00                         |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | GUIDESOFT INC DBA KNOWLEDGE SERVICES |
| Expenditure Start  | 7/1/2023                             |
| Expenditure End    | 9/30/2023                            |
| Expenditure Amount | \$64,300.00                          |

| Project Name | DTI Network Modernization |
|--------------|---------------------------|
| Subaward ID  | SUB-0783482               |
| Subaward No  | 19704-35850               |
|              |                           |

| Subaward Amount    | \$2,321,941.00                          |
|--------------------|---|
| Subaward Type      | Contract: Purchase Order                |
| Subrecipient Name  | PRESIDIO NETWORKED SOLUTIONS GROUP, LLC |
| Expenditure Start  | 7/1/2023                                |
| Expenditure End    | 9/30/2023                               |
| Expenditure Amount | \$1,115,078.75                          |

| Project Name       | DTI Network Modernization |  |
|--------------------|---------------------------|--|
| Subaward ID        | SUB-0783481               |  |
| Subaward No        | 19704-49758               |  |
| Subaward Amount    | \$408,345.25              |  |
| Subaward Type      | Contract: Purchase Order  |  |
| Subrecipient Name  | Info Solutions LLC        |  |
| Expenditure Start  | 7/1/2023                  |  |
| Expenditure End    | 9/30/2023                 |  |
| Expenditure Amount | \$36,617.25               |  |

## Expenditure: EN-01916535

| Project Name       | DTI Network Modernization            |
|--------------------|--------------------------------------|
| Subaward ID        | SUB-0722835                          |
| Subaward No        | 19704-630238                         |
| Subaward Amount    | \$109,050.00                         |
| Subaward Type      | Contract: Purchase Order             |
| Subrecipient Name  | GUIDESOFT INC DBA KNOWLEDGE SERVICES |
| Expenditure Start  | 10/1/2023                            |
| Expenditure End    | 12/31/2023                           |
| Expenditure Amount | \$44,750.00                          |

| Project Name      | DTI Network Modernization |
|-------------------|---------------------------|
| Subaward ID       | SUB-0783481               |
| Subaward No       | 19704-49758               |
| Subaward Amount   | \$408,345.25              |
| Subaward Type     | Contract: Purchase Order  |
| Subrecipient Name | Info Solutions LLC        |
| Expenditure Start | 10/1/2023                 |
|                   |                           |

| Expenditure End    | 12/31/2023   |
|--------------------|--------------|
| Expenditure Amount | \$371,728.00 |

| Project Name       | DTI Network Modernization               |
|--------------------|---|
| Subaward ID        | SUB-0783482                             |
| Subaward No        | 19704-35850                             |
| Subaward Amount    | \$2,321,941.00                          |
| Subaward Type      | Contract: Purchase Order                |
| Subrecipient Name  | PRESIDIO NETWORKED SOLUTIONS GROUP, LLC |
| Expenditure Start  | 10/1/2023                               |
| Expenditure End    | 12/31/2023                              |
| Expenditure Amount | \$60,000.00                             |

## Expenditure: EN-00646014

| Project Name       | DTI Network Modernization |
|--------------------|---------------------------|
| Subaward ID        | SUB-0454189               |
| Subaward No        | 19704-16884               |
| Subaward Amount    | \$214,185.36              |
| Subaward Type      | Contract: Purchase Order  |
| Subrecipient Name  | SHI INTERNATIONAL CORP    |
| Expenditure Start  | 7/1/2022                  |
| Expenditure End    | 9/30/2022                 |
| Expenditure Amount | \$214,185.36              |

## Expenditure: EN-01231264

| Project Name       | OGOV NeighborGood Partners (NCALL) Farmworkers |
|--------------------|--|
| Subaward ID        | SUB-0621079                                    |
| Subaward No        | 19736  |
| Subaward Amount    | \$2,900,000.00                                 |
| Subaward Type      | Contract: Purchase Order                       |
| Subrecipient Name  | NeighborGood Partners (NCALL)                  |
| Expenditure Start  | 1/1/2023                                       |
| Expenditure End    | 3/31/2023                                      |
| Expenditure Amount | \$1,500,000.00                                 |

| Project Name       | OGOV NeighborGood Partners (NCALL) Land Bank |
|--------------------|--|
| Subaward ID        | SUB-0454256                                  |
| Subaward No        | 19739  |
| Subaward Amount    | \$4,000,000.00                               |
| Subaward Type      | Grant: Lump Sum Payment(s)                   |
| Subrecipient Name  | NeighborGood Partners (NCALL)                |
| Expenditure Start  | 10/1/2022                                    |
| Expenditure End    | 12/31/2022                                   |
| Expenditure Amount | \$10,875.00                                  |

| Project Name       | OGOV NeighborGood Partners (NCALL) Land Bank |
|--------------------|--|
| Subaward ID        | SUB-0454256                                  |
| Subaward No        | 19739  |
| Subaward Amount    | \$4,000,000.00                               |
| Subaward Type      | Grant: Lump Sum Payment(s)                   |
| Subrecipient Name  | NeighborGood Partners (NCALL)                |
| Expenditure Start  | 1/1/2023                                     |
| Expenditure End    | 3/31/2023                                    |
| Expenditure Amount | \$1,979,125.00                               |

# Expenditure: EN-00646140

| Project Name       | OGOV NeighborGood Partners (NCALL) Land Bank |
|--------------------|--|
| Subaward ID        | SUB-0454256                                  |
| Subaward No        | 19739  |
| Subaward Amount    | \$4,000,000.00                               |
| Subaward Type      | Grant: Lump Sum Payment(s)                   |
| Subrecipient Name  | NeighborGood Partners (NCALL)                |
| Expenditure Start  | 8/1/2022                                     |
| Expenditure End    | 9/30/2022                                    |
| Expenditure Amount | \$10,000.00                                  |

| Project Name    | OGOV Southbridge Beautification |
|-----------------|---------------------------------|
| Subaward ID     | SUB-0605402                     |
| Subaward No     | 19924-29171                     |
| Subaward Amount | \$1,000,000.00                  |
|                 |                                 |

| Subaward Type      | Contract: Purchase Order                                |
|--------------------|---|
| Subrecipient Name  | NEIGHBORHOOD HOUSE COMMUNITY<br>DEVELOPMENT CORPORATION |
| Expenditure Start  | 1/1/2023  |
| Expenditure End    | 3/31/2023   |
| Expenditure Amount | \$350,000.00  |

| Project Name       | OGOV Southbridge Beautification                         |
|--------------------|---|
| Subaward ID        | SUB-0605402   |
| Subaward No        | 19924-29171   |
| Subaward Amount    | \$1,000,000.00  |
| Subaward Type      | Contract: Purchase Order                                |
| Subrecipient Name  | NEIGHBORHOOD HOUSE COMMUNITY<br>DEVELOPMENT CORPORATION |
| Expenditure Start  | 10/1/2023   |
| Expenditure End    | 12/31/2023  |
| Expenditure Amount | \$350,000.00  |

# Expenditure: EN-00842809

| Project Name       | OGOV Sussex Habitat Humanity |
|--------------------|------------------------------|
| Subaward ID        | SUB-0454250                  |
| Subaward No        | 19522                        |
| Subaward Amount    | \$3,000,000.00               |
| Subaward Type      | Grant: Lump Sum Payment(s)   |
| Subrecipient Name  | Sussex Habitat for Humanity  |
| Expenditure Start  | 10/1/2022                    |
| Expenditure End    | 12/31/2022                   |
| Expenditure Amount | \$211,090.40                 |

| Project Name      | OGOV Sussex Habitat Humanity |
|-------------------|------------------------------|
| Subaward ID       | SUB-0454250                  |
| Subaward No       | 19522                        |
| Subaward Amount   | \$3,000,000.00               |
| Subaward Type     | Grant: Lump Sum Payment(s)   |
| Subrecipient Name | Sussex Habitat for Humanity  |
| Expenditure Start | 1/1/2023                     |
|                   |                              |

| Expenditure End    | 3/31/2023    |
|--------------------|--------------|
| Expenditure Amount | \$459,798.83 |

| Project Name       | OGOV Sussex Habitat Humanity |
|--------------------|------------------------------|
| Subaward ID        | SUB-0454250                  |
| Subaward No        | 19522                        |
| Subaward Amount    | \$3,000,000.00               |
| Subaward Type      | Grant: Lump Sum Payment(s)   |
| Subrecipient Name  | Sussex Habitat for Humanity  |
| Expenditure Start  | 7/1/2023                     |
| Expenditure End    | 9/30/2023                    |
| Expenditure Amount | \$1,000,000.00               |

## Expenditure: EN-00646123

| Project Name       | OGOV Sussex Habitat Humanity |  |
|--------------------|------------------------------|--|
| Subaward ID        | SUB-0454250                  |  |
| Subaward No        | 19522                        |  |
| Subaward Amount    | \$3,000,000.00               |  |
| Subaward Type      | Grant: Lump Sum Payment(s)   |  |
| Subrecipient Name  | Sussex Habitat for Humanity  |  |
| Expenditure Start  | 7/1/2022                     |  |
| Expenditure End    | 9/30/2022                    |  |
| Expenditure Amount | \$329,110.77                 |  |

## Expenditure: EN-00842924

| Project Name       | OGOV Wilmington Housing Authority |
|--------------------|-----------------------------------|
| Subaward ID        | SUB-0454314                       |
| Subaward No        | 19783                             |
| Subaward Amount    | \$1,500,000.00                    |
| Subaward Type      | Grant: Lump Sum Payment(s)        |
| Subrecipient Name  | Wilmington Housing Authority      |
| Expenditure Start  | 10/1/2022                         |
| Expenditure End    | 12/31/2022                        |
| Expenditure Amount | \$202,856.00                      |

| Project Name       | OGOV Wilmington Housing Authority |
|--------------------|-----------------------------------|
| Subaward ID        | SUB-0454314                       |
| Subaward No        | 19783                             |
| Subaward Amount    | \$1,500,000.00                    |
| Subaward Type      | Grant: Lump Sum Payment(s)        |
| Subrecipient Name  | Wilmington Housing Authority      |
| Expenditure Start  | 1/1/2023                          |
| Expenditure End    | 3/31/2023                         |
| Expenditure Amount | \$488,644.00                      |

| Project Name       | OGOV Wilmington Housing Authority |
|--------------------|-----------------------------------|
| Subaward ID        | SUB-0454314                       |
| Subaward No        | 19783                             |
| Subaward Amount    | \$1,500,000.00                    |
| Subaward Type      | Grant: Lump Sum Payment(s)        |
| Subrecipient Name  | Wilmington Housing Authority      |
| Expenditure Start  | 7/1/2023                          |
| Expenditure End    | 9/30/2023                         |
| Expenditure Amount | \$750,000.00                      |

## Expenditure: EN-00646192

| Project Name       | OGOV Wilmington Housing Authority |
|--------------------|-----------------------------------|
| Subaward ID        | SUB-0454314                       |
| Subaward No        | 19783                             |
| Subaward Amount    | \$1,500,000.00                    |
| Subaward Type      | Grant: Lump Sum Payment(s)        |
| Subrecipient Name  | Wilmington Housing Authority      |
| Expenditure Start  | 7/19/2022                         |
| Expenditure End    | 9/30/2022                         |
| Expenditure Amount | \$58,500.00                       |

### Aggregate Expenditures for Awards less than \$50,000

| Project Name                    | DOJ GVI Safer Delaware         |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$26,807.57                    |
|                                 |                                |

| Project Name                    | DOJ GVI Safer Delaware       |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$16,485.53                  |
| Total Period Obligation Amount  | \$16,485.53                  |

#### Expenditure: EN-01601463

| Project Name                    | DOJ GVI Safer Delaware         |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | (\$26,807.57)                  |
| Total Period Obligation Amount  | (\$26,807.57)                  |

#### Expenditure: EN-01601464

| Project Name                    | DOJ GVI Safer Delaware       |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | (\$16,485.53)                |
| Total Period Obligation Amount  | (\$16,485.53)                |

#### Expenditure: EN-01602685

| Project Name                    | DOC GVI Safer Delaware       |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$22,814.10                  |
| Total Period Obligation Amount  | \$22,814.10                  |

#### Expenditure: EN-01783582

| Project Name                    | DOC GVI Safer Delaware       |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$11,321.70                  |
| Total Period Obligation Amount  | \$11,321.70                  |

#### Expenditure: EN-01917285

| Project Name                    | DOC GVI Safer Delaware         |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$15,039.80                    |
| Total Period Obligation Amount  | \$15,039.80                    |

| Project Name                    | DSCYF GVI Safer Delaware       |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$2,396.73                     |
| Total Period Obligation Amount  | \$2,396.73                     |

| Project Name                    | DHSS Emer Housing Adams St.  |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$30,580.00                  |
| Total Period Obligation Amount  | \$30,580.00                  |

#### Expenditure: EN-01912965

| Project Name                    | DOL Marketing & Communications |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments   |
| Total Period Expenditure Amount | \$15,400.00                    |
| Total Period Obligation Amount  | \$15,400.00                    |

### Expenditure: EN-01614052

| Project Name                    | DHSS Gun Violence Safer Delaware |
|---------------------------------|----------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments     |
| Total Period Expenditure Amount | \$20,870.21                      |
| Total Period Obligation Amount  | \$20,870.21                      |

#### Expenditure: EN-01796318

| Project Name                    | DHSS Gun Violence Safer Delaware |
|---------------------------------|----------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments     |
| Total Period Expenditure Amount | \$6,962.44                       |
| Total Period Obligation Amount  | \$6,962.44                       |

#### Expenditure: EN-01946364

| Project Name                    | DHSS Gun Violence Safer Delaware |
|---------------------------------|----------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded   |
| Total Period Expenditure Amount | \$48,893.50                      |
| Total Period Obligation Amount  | \$48,893.50                      |

| Project Name                    | DTI Email Phishing Tools       |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$7,950.00                     |
|                                 |                                |

| Project Name                    | OGOV DDL MH Libraries          |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$4,500.00                     |
| Total Period Obligation Amount  | \$4,500.00                     |

#### Expenditure: EN-01783622

| Project Name                    | OGOV DDL MH Libraries        |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$9,000.00                   |
| Total Period Obligation Amount  | \$9,000.00                   |

#### Expenditure: EN-01917025

| Project Name                    | OGOV DDL MH Libraries        |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$11,500.00                  |
| Total Period Obligation Amount  | \$11,500.00                  |

#### Expenditure: EN-01651790

| Project Name                    | OGOV LTG Stop the Violence     |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$35,000.00                    |
| Total Period Obligation Amount  | \$35,000.00                    |

#### Expenditure: EN-01784384

| Project Name                    | OGOV LTG Beautiful Gate Outreach |
|---------------------------------|----------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded   |
| Total Period Expenditure Amount | \$35,000.00                      |
| Total Period Obligation Amount  | \$35,000.00                      |

#### Expenditure: EN-01791498

| Project Name                    | OGOV LTG BlackMothers In Power |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$20,000.00                    |
| Total Period Obligation Amount  | \$40,000.00                    |

| Project Name                    | OMB DEMA EOC Upgrades        |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$9,923.63                   |
| Total Period Obligation Amount  | \$9,923.63                   |

| Project Name                    | OGOV LTG Life Community Church |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$30,000.00                    |
| Total Period Obligation Amount  | \$30,000.00                    |

#### Expenditure: EN-01791519

| Project Name                    | OGOV LTG Limen                 |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$30,000.00                    |
| Total Period Obligation Amount  | \$30,000.00                    |

### Expenditure: EN-01791526

| Project Name                    | OGOV LTG Dover Interfaith      |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$40,000.00                    |
| Total Period Obligation Amount  | \$40,000.00                    |

#### Expenditure: EN-01912966

| Project Name                    | OGOV DOL DWDB                |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$728.19                     |
| Total Period Obligation Amount  | \$728.19                     |

#### Expenditure: EN-01804118

| Project Name                    | OGOV MH Cancer Support Com Ext |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$30,000.00                    |
| Total Period Obligation Amount  | \$30,000.00                    |

| Project Name                    | OMB HVAC Upgrades CSOB 8th Floor |
|---------------------------------|----------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments     |
| Total Period Expenditure Amount | \$640.00                         |
|                                 |                                  |

| Project Name                    | DTCC Child Care Center       |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$2,878.32                   |
| Total Period Obligation Amount  | \$0.00                       |

#### Expenditure: EN-00793103

| Project Name                    | DTCC Child Care Center       |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$0.00                       |
| Total Period Obligation Amount  | (\$9,066.34)                 |

#### Expenditure: EN-00793104

| Project Name                    | DTCC Child Care Center       |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$0.00                       |
| Total Period Obligation Amount  | \$10,033.14                  |

#### Expenditure: EN-01171261

| Project Name                    | DTCC Child Care Center         |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$1,979.57                     |
| Total Period Obligation Amount  | \$1,979.57                     |

#### Expenditure: EN-01637272

| Project Name                    | DTCC Child Care Center       |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$2,195.73                   |
| Total Period Obligation Amount  | \$2,195.74                   |

#### Expenditure: EN-01776685

| Project Name                    | DTCC Child Care Center       |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$8,368.14                   |
| Total Period Obligation Amount  | \$8,368.14                   |

| Project Name                    | DTCC Child Care Center         |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$1,183.18                     |
| Total Period Obligation Amount  | \$1,183.17                     |

| Project Name                    | DTCC Child Care Center         |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$3,128.59                     |
| Total Period Obligation Amount  | \$3,128.59                     |

#### Expenditure: EN-00301846

| Project Name                    | DTCC Child Care Center         |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$829.37                       |
| Total Period Obligation Amount  | \$5,937.75                     |

### Expenditure: EN-00452314

| Project Name                    | DTCC Child Care Center         |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$3,196.86                     |
| Total Period Obligation Amount  | \$0.00                         |

#### Expenditure: EN-00301855

| Project Name                    | DTCC CNAs                    |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$241,335.00                 |
| Total Period Obligation Amount  | \$241,335.00                 |

#### Expenditure: EN-00447181

| Project Name                    | DTCC CNAs                    |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | (\$194,625.00)               |
| Total Period Obligation Amount  | (\$194,625.00)               |

| Project Name                    | DTCC Allied Health Center      |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$17,480.67                    |
|                                 |                                |

| Project Name                    | DTCC Allied Health Center      |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$28,400.22                    |
| Total Period Obligation Amount  | \$28,400.22                    |

#### Expenditure: EN-01645993

| Project Name                    | DTCC Allied Health Center    |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$10,722.09                  |
| Total Period Obligation Amount  | \$10,722.10                  |

#### Expenditure: EN-01776977

| Project Name                    | DTCC Allied Health Center    |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | (\$41,755.75)                |
| Total Period Obligation Amount  | (\$41,755.76)                |

#### Expenditure: EN-01920790

| Project Name                    | DTCC Allied Health Center      |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$16,900.68                    |
| Total Period Obligation Amount  | \$16,900.68                    |

#### Expenditure: EN-00647650

| Project Name                    | DTCC Allied Health Center      |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$7,210.06                     |
| Total Period Obligation Amount  | \$7,210.06                     |

#### Expenditure: EN-00648778

| Project Name                    | DTCC Allied Health Center    |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | (\$7,500.00)                 |
| Total Period Obligation Amount  | (\$7,500.00)                 |

| Project Name                    | DTCC Allied Health Center    |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$0.00                       |
| Total Period Obligation Amount  | (\$27,423.79)                |

| Project Name                    | DTCC Allied Health Center      |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$1,911.33                     |
| Total Period Obligation Amount  | \$13,702.50                    |

#### Expenditure: EN-00452294

| Project Name                    | DTCC Allied Health Center      |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$14,867.38                    |
| Total Period Obligation Amount  | \$30,500.00                    |

### Expenditure: EN-00793235

| Project Name                    | DTCC HVAC Upgrades             |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$1,065.65                     |
| Total Period Obligation Amount  | (\$9,876.70)                   |

#### Expenditure: EN-01171760

| Project Name                    | DTCC HVAC Upgrades             |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$2,381.51                     |
| Total Period Obligation Amount  | \$2,381.51                     |

#### Expenditure: EN-01646055

| Project Name                    | DTCC HVAC Upgrades           |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$2,641.55                   |
| Total Period Obligation Amount  | \$2,641.55                   |

| Project Name                    | DTCC HVAC Upgrades           |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$2,148.82                   |
|                                 |                              |

| Project Name                    | DTCC HVAC Upgrades             |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$1,334.90                     |
| Total Period Obligation Amount  | \$1,334.90                     |

#### Expenditure: EN-00634103

| Project Name                    | DTCC HVAC Upgrades             |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$4,812.04                     |
| Total Period Obligation Amount  | \$4,812.04                     |

#### Expenditure: EN-00301871

| Project Name                    | DTCC HVAC Upgrades             |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$1,275.63                     |
| Total Period Obligation Amount  | \$9,135.00                     |

#### Expenditure: EN-00452310

| Project Name                    | DTCC HVAC Upgrades             |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$4,917.02                     |
| Total Period Obligation Amount  | \$8,000.00                     |

#### Expenditure: EN-00793120

| Project Name                    | DTCC Culinary Program        |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$37,276.09                  |
| Total Period Obligation Amount  | \$36,846.01                  |

#### Expenditure: EN-01171410

| Project Name                    | DTCC Culinary Program          |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | (\$36,141.79)                  |
| Total Period Obligation Amount  | (\$36,141.79)                  |

| Project Name                    | DTCC Culinary Program        |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$512.68                     |
| Total Period Obligation Amount  | \$512.68                     |

| Project Name                    | DTCC Culinary Program        |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$417.08                     |
| Total Period Obligation Amount  | \$417.08                     |

#### Expenditure: EN-01920789

| Project Name                    | DTCC Culinary Program          |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$22,076.05                    |
| Total Period Obligation Amount  | \$22,076.05                    |

### Expenditure: EN-00634123

| Project Name                    | DTCC Culinary Program          |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$730.56                       |
| Total Period Obligation Amount  | \$730.56                       |

#### Expenditure: EN-00301875

| Project Name                    | DTCC Culinary Program          |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$193.67                       |
| Total Period Obligation Amount  | \$1,370.25                     |

#### Expenditure: EN-00452309

| Project Name                    | DTCC Culinary Program          |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$746.50                       |
| Total Period Obligation Amount  | \$0.00                         |

| Project Name                    | DSU Early Childhood Innovation |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments   |
| Total Period Expenditure Amount | \$11,120.00                    |
|                                 |                                |

| Project Name                    | DSU Early Childhood Innovation |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments   |
| Total Period Expenditure Amount | \$2,780.00                     |
| Total Period Obligation Amount  | \$2,780.00                     |

#### Expenditure: EN-01921938

| Project Name                    | DSU Early Childhood Innovation |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | (\$7,863.00)                   |
| Total Period Obligation Amount  | (\$7,863.00)                   |

#### Expenditure: EN-00783090

| Project Name                    | DSU HVAC Upgrades            |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$6,219.09                   |
| Total Period Obligation Amount  | \$6,219.09                   |

#### Expenditure: EN-01231336

| Project Name                    | DSU HVAC Upgrades            |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$32,572.04                  |
| Total Period Obligation Amount  | \$32,572.04                  |

#### Expenditure: EN-01601836

| Project Name                    | DSU HVAC Upgrades            |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$12,692.14                  |
| Total Period Obligation Amount  | \$12,692.14                  |

#### Expenditure: EN-01776508

| Project Name                    | DSU HVAC Upgrades              |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | (\$16,890.27)                  |
| Total Period Obligation Amount  | (\$16,890.27)                  |

| Project Name                    | DSU HVAC Upgrades              |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$24,757.09                    |
| Total Period Obligation Amount  | \$24,757.09                    |

| Project Name                    | DSU HVAC Upgrades              |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$4,882.50                     |
| Total Period Obligation Amount  | \$4,882.50                     |

### Expenditure: EN-00779907

| Project Name                    | DVCC Family Justice Center   |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$17,500.00                  |
| Total Period Obligation Amount  | \$17,500.00                  |

### Expenditure: EN-01210847

| Project Name                    | DVCC Family Justice Center   |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$43,226.52                  |
| Total Period Obligation Amount  | \$43,226.52                  |

#### Expenditure: EN-01601455

| Project Name                    | DVCC Family Justice Center     |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | (\$22,534.29)                  |
| Total Period Obligation Amount  | (\$22,534.29)                  |

#### Expenditure: EN-01770506

| Project Name                    | DVCC Family Justice Center   |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | (\$48,501.46)                |
| Total Period Obligation Amount  | (\$48,501.46)                |

| Project Name                    | DVCC Family Justice Center   |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$26,282.75                  |
|                                 |                              |

| Project Name                    | DOJ Backlog Assistance         |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$3,959.95                     |
| Total Period Obligation Amount  | \$3,959.95                     |

#### Expenditure: EN-01172363

| Project Name                    | DOJ Backlog Assistance       |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$2,498.81                   |
| Total Period Obligation Amount  | \$2,498.81                   |

#### Expenditure: EN-01601459

| Project Name                    | DOJ Backlog Assistance         |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | (\$3,959.95)                   |
| Total Period Obligation Amount  | (\$3,959.95)                   |

#### Expenditure: EN-01601460

| Project Name                    | DOJ Backlog Assistance       |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | (\$2,498.81)                 |
| Total Period Obligation Amount  | (\$2,498.81)                 |

#### Expenditure: EN-01810325

| Project Name                    | Lake Forest SD COVID Leave Extension |
|---------------------------------|--------------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments         |
| Total Period Expenditure Amount | \$4,402.20                           |
| Total Period Obligation Amount  | \$4,402.20                           |

#### Expenditure: EN-01810332

| Project Name                    | Colonial SD COVID Leave Extension |
|---------------------------------|-----------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments      |
| Total Period Expenditure Amount | \$36,474.10                       |
| Total Period Obligation Amount  | \$36,474.10                       |

| Project Name                    | Woodbridge SD COVID Leave Extension |
|---------------------------------|-------------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments        |
| Total Period Expenditure Amount | (\$12,882.95)                       |
| Total Period Obligation Amount  | (\$12,882.95)                       |

| Project Name                    | Eastside Charter School COVID Leave Extension |
|---------------------------------|---|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments                  |
| Total Period Expenditure Amount | \$3,618.24                                    |
| Total Period Obligation Amount  | \$3,618.24                                    |

#### Expenditure: EN-01810384

| Project Name                    | Eastside Charter School COVID Leave Extension |
|---------------------------------|---|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments                  |
| Total Period Expenditure Amount | \$8,690.40                                    |
| Total Period Obligation Amount  | \$8,690.40                                    |

### Expenditure: EN-01934160

| Project Name                    | Newark Charter COVID Leave Extension |
|---------------------------------|--------------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments         |
| Total Period Expenditure Amount | \$6,681.97                           |
| Total Period Obligation Amount  | \$6,681.97                           |

#### Expenditure: EN-01810390

| Project Name                    | Providence Creek COVID Leave Extension |
|---------------------------------|--|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments           |
| Total Period Expenditure Amount | \$1,648.50                             |
| Total Period Obligation Amount  | \$1,648.50                             |

#### Expenditure: EN-01810392

| Project Name                    | Las Americas ASPIRAS COVID Leave Extension |
|---------------------------------|--|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments               |
| Total Period Expenditure Amount | \$17,754.00                                |
| Total Period Obligation Amount  | \$17,754.00                                |

| Project Name                    | DTI Anchor Rooms Remote Work   |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$22,200.00                    |
|                                 |                                |

| Project Name                    | DTI Anchor Rooms Remote Work |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$5,226.00                   |
| Total Period Obligation Amount  | \$5,226.00                   |

#### Expenditure: EN-00781927

| Project Name                    | DTI Digital Government Platform Foundation |
|---------------------------------|--|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded             |
| Total Period Expenditure Amount | \$39,580.27                                |
| Total Period Obligation Amount  | \$39,580.27                                |

#### Expenditure: EN-01186526

| Project Name                    | DTI Digital Government Platform Foundation |
|---------------------------------|--|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments               |
| Total Period Expenditure Amount | \$46,000.00                                |
| Total Period Obligation Amount  | \$46,000.00                                |

#### Expenditure: EN-01616333

| Project Name                    | DTI Digital Government Platform Foundation |
|---------------------------------|--|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments               |
| Total Period Expenditure Amount | (\$39,580.27)                              |
| Total Period Obligation Amount  | (\$39,580.27)                              |

#### Expenditure: EN-01916543

| Project Name                    | DTI Digital Government Platform Foundation |
|---------------------------------|--|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments               |
| Total Period Expenditure Amount | \$4,755.00                                 |
| Total Period Obligation Amount  | \$4,755.00                                 |

#### Expenditure: EN-00627753

| Project Name                    | DTI Digital Government Platform Foundation |
|---------------------------------|--|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments               |
| Total Period Expenditure Amount | (\$9,360.00)                               |
| Total Period Obligation Amount  | \$0.00                                     |

| Project Name                    | DTI Digital Government Platform Foundation |
|---------------------------------|--|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments               |
| Total Period Expenditure Amount | \$0.00                                     |
| Total Period Obligation Amount  | (\$9,360.00)                               |

| Project Name                    | DTI Digital Government Platform Foundation |
|---------------------------------|--|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments               |
| Total Period Expenditure Amount | \$9,360.00                                 |
| Total Period Obligation Amount  | \$9,360.00                                 |

#### Expenditure: EN-00799233

| Project Name                    | DHSS Emergency Housing       |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$71,808.00                  |
| Total Period Obligation Amount  | \$7,018.00                   |

### Expenditure: EN-01180367

| Project Name                    | DHSS Emergency Housing       |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | (\$24,120.00)                |
| Total Period Obligation Amount  | (\$24,120.00)                |

#### Expenditure: EN-00627669

| Project Name                    | DHSS Emergency Housing       |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | (\$120,350.14)               |
| Total Period Obligation Amount  | (\$120,350.14)               |

#### Expenditure: EN-00627679

| Project Name                    | DHSS Emergency Housing       |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | (\$32,395.00)                |
| Total Period Obligation Amount  | \$32,395.00                  |

| Project Name                    | DHSS Emergency Housing       |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$1,923,199.82               |
|                                 |                              |

| Project Name                    | DHSS Emergency Housing       |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | (\$1,538,136.58)             |
| Total Period Obligation Amount  | (\$1,538,136.58)             |

Expenditure: EN-00799426

| Project Name                    | DHSS Emergency Housing       |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$350.00                     |
| Total Period Obligation Amount  | \$19,043.66                  |

#### Expenditure: EN-01181213

| Project Name                    | DHSS Emergency Housing       |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | (\$6,460.00)                 |
| Total Period Obligation Amount  | (\$6,460.00)                 |

#### Expenditure: EN-00627689

| Project Name                    | DHSS Emergency Housing       |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$18,693.66                  |
| Total Period Obligation Amount  | \$18,693.66                  |

#### Expenditure: EN-00627692

| Project Name                    | DHSS Emergency Housing       |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$0.00                       |
| Total Period Obligation Amount  | (\$18,693.66)                |

#### Expenditure: EN-00333565

| Project Name                    | DHSS Emergency Housing       |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$82,612.96                  |
| Total Period Obligation Amount  | \$82,612.96                  |

| Project Name                    | DHSS Emergency Housing       |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | (\$76,152.96)                |
| Total Period Obligation Amount  | (\$76,152.96)                |

| Project Name                    | DHSS Vaccine Booster for Homebound Adults |
|---------------------------------|---|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded            |
| Total Period Expenditure Amount | \$4,350.75                                |
| Total Period Obligation Amount  | \$4,350.75                                |

## Expenditure: EN-01181224

| Project Name                    | DHSS Vaccine Booster for Homebound Adults |
|---------------------------------|---|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded            |
| Total Period Expenditure Amount | \$32,346.75                               |
| Total Period Obligation Amount  | \$32,346.75                               |

# Expenditure: EN-01614029

| Project Name                    | DHSS Vaccine Booster for Homebound Adults |
|---------------------------------|---|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments              |
| Total Period Expenditure Amount | \$2,934.63                                |
| Total Period Obligation Amount  | \$2,934.63                                |

Expenditure: EN-00624827

| Project Name                    | DHSS Vaccine Booster for Homebound Adults |
|---------------------------------|---|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments              |
| Total Period Expenditure Amount | \$2,478.75                                |
| Total Period Obligation Amount  | \$6,849.75                                |

## Expenditure: EN-00441322

| Project Name                    | DHSS Vaccine Booster for Homebound Adults |
|---------------------------------|---|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments              |
| Total Period Expenditure Amount | \$17,615.91                               |
| Total Period Obligation Amount  | \$13,244.91                               |

| Project Name                    | DHSS Emergency Supplies      |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$13,068.39                  |
|                                 |                              |

| Project Name                    | DHSS Emergency Supplies      |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$0.00                       |
| Total Period Obligation Amount  | (\$49,000.00)                |

## Expenditure: EN-01614030

| Project Name                    | DHSS Emergency Supplies      |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$5,194.74                   |
| Total Period Obligation Amount  | \$5,194.74                   |

## Expenditure: EN-01796315

| Project Name                    | DHSS Emergency Supplies      |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$2,071.37                   |
| Total Period Obligation Amount  | \$2,071.37                   |

## Expenditure: EN-01920728

| Project Name                    | DHSS Emergency Supplies      |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$15,270.21                  |
| Total Period Obligation Amount  | \$15,270.21                  |

## Expenditure: EN-00624622

| Project Name                    | DHSS Emergency Supplies        |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$0.00                         |
| Total Period Obligation Amount  | \$49,000.00                    |

## Expenditure: EN-00840579

| Project Name                    | OGOV Administrative Costs & Overhead |
|---------------------------------|--------------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments         |
| Total Period Expenditure Amount | (\$33,191.42)                        |
| Total Period Obligation Amount  | (\$33,191.42)                        |

| Project Name                    | OGOV Administrative Costs & Overhead |
|---------------------------------|--------------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments         |
| Total Period Expenditure Amount | \$50,413.16                          |
| Total Period Obligation Amount  | \$50,413.16                          |

| Project Name                    | OGOV Administrative Costs & Overhead |
|---------------------------------|--------------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments         |
| Total Period Expenditure Amount | \$1,389.98                           |
| Total Period Obligation Amount  | \$1,389.98                           |

## Expenditure: EN-01777618

| Project Name                    | OGOV Administrative Costs & Overhead |
|---------------------------------|--------------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments         |
| Total Period Expenditure Amount | \$1,591.40                           |
| Total Period Obligation Amount  | \$1,591.40                           |

# Expenditure: EN-01917126

| Project Name                    | OGOV Administrative Costs & Overhead |
|---------------------------------|--------------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded       |
| Total Period Expenditure Amount | \$12,628.86                          |
| Total Period Obligation Amount  | \$12,628.86                          |

## Expenditure: EN-00332066

| Project Name                    | OGOV Administrative Costs & Overhead |
|---------------------------------|--------------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments         |
| Total Period Expenditure Amount | \$12,249.42                          |
| Total Period Obligation Amount  | \$12,249.42                          |

## Expenditure: EN-00383653

| Project Name                    | OGOV Administrative Costs & Overhead |
|---------------------------------|--------------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments         |
| Total Period Expenditure Amount | \$53,968.14                          |
| Total Period Obligation Amount  | \$53,968.14                          |

| Project Name                    | DHSS Meals, Meal Delivery, Case Management |
|---------------------------------|--|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments               |
| Total Period Expenditure Amount | \$3,657.55                                 |
|                                 |  |

| Project Name                    | DHSS Meals, Meal Delivery, Case Management |
|---------------------------------|--|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments               |
| Total Period Expenditure Amount | \$5,594.06                                 |
| Total Period Obligation Amount  | \$5,594.06                                 |

## Expenditure: EN-00624556

| Project Name                    | DHSS Meals, Meal Delivery, Case Management |
|---------------------------------|--|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments               |
| Total Period Expenditure Amount | \$26,647.09                                |
| Total Period Obligation Amount  | \$26,647.09                                |

## Expenditure: EN-00809679

| Project Name                    | DOL Operational Expenses     |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | (\$5,854.89)                 |
| Total Period Obligation Amount  | \$75,399.03                  |

## Expenditure: EN-01174241

| Project Name                    | DOL Operational Expenses     |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$14,312.35                  |
| Total Period Obligation Amount  | \$14,312.35                  |

## Expenditure: EN-01615333

| Project Name                    | DOL Operational Expenses     |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | (\$6,254.09)                 |
| Total Period Obligation Amount  | (\$6,254.09)                 |

## Expenditure: EN-01799741

| Project Name                    | DOL Operational Expenses     |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | (\$66,607.73)                |
| Total Period Obligation Amount  | (\$66,607.73)                |

| Project Name                    | DOL Operational Expenses     |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | (\$175,810.66)               |
| Total Period Obligation Amount  | (\$175,810.66)               |

| Project Name                    | DOL Operational Expenses     |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$0.00                       |
| Total Period Obligation Amount  | (\$81,253.92)                |

## Expenditure: EN-00333625

| Project Name                    | DOL Operational Expenses     |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$297,750.86                 |
| Total Period Obligation Amount  | \$297,750.86                 |

# Expenditure: EN-00432717

| Project Name                    | DOL Operational Expenses     |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | (\$25,862.13)                |
| Total Period Obligation Amount  | (\$25,862.13)                |

## Expenditure: EN-00812632

| Project Name                    | DOL FAST Program             |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | (\$733.07)                   |
| Total Period Obligation Amount  | (\$733.07)                   |

## Expenditure: EN-01174287

| Project Name                    | DOL FAST Program             |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$5,223.23                   |
| Total Period Obligation Amount  | \$5,223.23                   |

| Project Name                    | DOL FAST Program             |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | (\$5,223.23)                 |
|                                 |                              |

| Project Name                    | DOL FAST Program             |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$4,260.67                   |
| Total Period Obligation Amount  | \$4,260.67                   |

## Expenditure: EN-01912953

| Project Name                    | DOL FAST Program             |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$209.33                     |
| Total Period Obligation Amount  | \$209.33                     |

## Expenditure: EN-00629216

| Project Name                    | DOL FAST Program             |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$7,160.06                   |
| Total Period Obligation Amount  | \$7,160.06                   |

## Expenditure: EN-00432731

| Project Name                    | DOL FAST Program             |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$1,338.28                   |
| Total Period Obligation Amount  | \$1,338.28                   |

## Expenditure: EN-00812649

| Project Name                    | DOL Tableau Software         |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | (\$733.07)                   |
| Total Period Obligation Amount  | (\$733.07)                   |

## Expenditure: EN-01799740

| Project Name                    | DOL Tableau Software         |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$140.67                     |
| Total Period Obligation Amount  | \$140.67                     |

| Project Name                    | DOL Tableau Software         |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$209.33                     |
| Total Period Obligation Amount  | \$209.33                     |

| Project Name                    | DOL Tableau Software         |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$7,160.06                   |
| Total Period Obligation Amount  | \$7,160.06                   |

## Expenditure: EN-00432584

| Project Name                    | DOL Tableau Software         |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$1,778.70                   |
| Total Period Obligation Amount  | \$1,778.70                   |

# Expenditure: EN-01810397

| Project Name                    | Brandywine SD COVID Leave    |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$17,919.12                  |
| Total Period Obligation Amount  | \$17,919.12                  |

## Expenditure: EN-01810404

| Project Name                    | Odyssey Charter COVID Leave  |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$7,937.28                   |
| Total Period Obligation Amount  | \$7,937.28                   |

## Expenditure: EN-00778789

| Project Name                    | DE NG Pandemic Readiness Center |
|---------------------------------|---------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments    |
| Total Period Expenditure Amount | \$7,575.38                      |
| Total Period Obligation Amount  | \$7,575.38                      |

| Project Name                    | DE NG Pandemic Readiness Center |
|---------------------------------|---------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments    |
| Total Period Expenditure Amount | \$11,097.75                     |
|                                 |                                 |

| Project Name                    | DE NG Pandemic Readiness Center |
|---------------------------------|---------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded  |
| Total Period Expenditure Amount | \$0.00                          |
| Total Period Obligation Amount  | \$19,241.51                     |

## Expenditure: EN-00435746

| Project Name                    | DE NG Pandemic Readiness Center |
|---------------------------------|---------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded  |
| Total Period Expenditure Amount | \$7,335.50                      |
| Total Period Obligation Amount  | \$7,335.50                      |

## Expenditure: EN-00840432

| Project Name                    | OGOV PAWS for People           |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$1,970.00                     |
| Total Period Obligation Amount  | \$5,520.00                     |

## Expenditure: EN-01211835

| Project Name                    | OGOV PAWS for People           |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$3,550.00                     |
| Total Period Obligation Amount  | \$0.00                         |

## Expenditure: EN-00613552

| Project Name                    | OGOV PAWS for People         |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$4,230.00                   |
| Total Period Obligation Amount  | \$4,230.00                   |

## Expenditure: EN-00627698

| Project Name                    | OGOV PAWS for People         |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$0.00                       |
| Total Period Obligation Amount  | (\$9,750.00)                 |

| Project Name                    | OGOV PAWS for People        |
|---------------------------------|-----------------------------|
| Subaward Type (Aggregates)      | Aggregate of Grants Awarded |
| Total Period Expenditure Amount | \$0.00                      |
| Total Period Obligation Amount  | \$9,750.00                  |

| Project Name                    | OGOV Brandywine Counseling   |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$17,285.00                  |
| Total Period Obligation Amount  | \$17,285.00                  |

## Expenditure: EN-00613573

| Project Name                    | OGOV Brandywine Counseling  |
|---------------------------------|-----------------------------|
| Subaward Type (Aggregates)      | Aggregate of Grants Awarded |
| Total Period Expenditure Amount | \$15,412.50                 |
| Total Period Obligation Amount  | \$0.00                      |

# Expenditure: EN-00441462

| Project Name                    | OGOV Brandywine Counseling  |
|---------------------------------|-----------------------------|
| Subaward Type (Aggregates)      | Aggregate of Grants Awarded |
| Total Period Expenditure Amount | \$0.00                      |
| Total Period Obligation Amount  | \$15,412.50                 |

## Expenditure: EN-00812659

| Project Name                    | DOL DET On the Job Training  |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$38,950.07                  |
| Total Period Obligation Amount  | \$38,950.07                  |

## Expenditure: EN-01615163

| Project Name                    | DOL DET On the Job Training  |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | (\$37,783.76)                |
| Total Period Obligation Amount  | (\$37,783.76)                |

| Project Name                    | DOL DET On the Job Training  |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$264.90                     |
|                                 |                              |

| Project Name                    | DOL DET On the Job Training  |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$29,021.20                  |
| Total Period Obligation Amount  | \$29,021.20                  |

## Expenditure: EN-00631893

| Project Name                    | DOL DET On the Job Training  |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$8,533.04                   |
| Total Period Obligation Amount  | \$8,533.04                   |

## Expenditure: EN-00432750

| Project Name                    | DOL DET On the Job Training  |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$1,378.84                   |
| Total Period Obligation Amount  | \$1,378.84                   |

## Expenditure: EN-00781327

| Project Name                    | DTI Data Center Modernization |
|---------------------------------|-------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments  |
| Total Period Expenditure Amount | \$25,415.00                   |
| Total Period Obligation Amount  | \$0.00                        |

## Expenditure: EN-00434357

| Project Name                    | DTI Data Center Modernization  |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$10,890.00                    |
| Total Period Obligation Amount  | \$36,305.00                    |

## Expenditure: EN-00780493

| Project Name                    | DTI Mainframe                |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$946.40                     |
| Total Period Obligation Amount  | \$946.40                     |

| Project Name                    | DTI Mainframe                |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$11,910.40                  |
| Total Period Obligation Amount  | \$11,910.40                  |

| Project Name                    | DTI Mainframe                |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$2,839.20                   |
| Total Period Obligation Amount  | \$2,839.20                   |

## Expenditure: EN-01770758

| Project Name                    | DTI Mainframe                |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$2,839.20                   |
| Total Period Obligation Amount  | \$2,839.20                   |

## Expenditure: EN-01916545

| Project Name                    | DTI Mainframe                  |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$18,026.28                    |
| Total Period Obligation Amount  | \$18,026.28                    |

## Expenditure: EN-01655523

| Project Name                    | DTI Digital Accessibility    |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$268.71                     |
| Total Period Obligation Amount  | \$268.71                     |

## Expenditure: EN-01210639

| Project Name                    | OMB DSCYF Wharton Hall         |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$0.00                         |
| Total Period Obligation Amount  | \$56,331.00                    |

| Project Name                    | OMB DSCYF Wharton Hall         |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$7,125.00                     |
|                                 |                                |

| Project Name                    | OMB DSCYF Wharton Hall       |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$35,183.00                  |
| Total Period Obligation Amount  | \$35,183.00                  |

## Expenditure: EN-01914782

| Project Name                    | DEMA Emergency Operations Center Upgrades |
|---------------------------------|---|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments              |
| Total Period Expenditure Amount | \$36,237.14                               |
| Total Period Obligation Amount  | \$36,237.14                               |

## Expenditure: EN-01174590

| Project Name                    | DSP Mobile Command Unit Vehicle |
|---------------------------------|---------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments    |
| Total Period Expenditure Amount | \$2,863.35                      |
| Total Period Obligation Amount  | \$2,863.35                      |

## Expenditure: EN-01600943

| Project Name                    | DSP Mobile Command Unit Vehicle |
|---------------------------------|---------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded  |
| Total Period Expenditure Amount | \$26,659.84                     |
| Total Period Obligation Amount  | \$26,659.84                     |

#### Expenditure: EN-01770298

| Project Name                    | DSP Mobile Command Unit Vehicle |
|---------------------------------|---------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments    |
| Total Period Expenditure Amount | \$4,903.12                      |
| Total Period Obligation Amount  | \$4,903.12                      |

## Expenditure: EN-01917313

| Project Name                    | DSP Mobile Command Unit Vehicle |
|---------------------------------|---------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded  |
| Total Period Expenditure Amount | \$3,283.75                      |
| Total Period Obligation Amount  | \$3,283.75                      |

| Project Name                    | OMB DHCI Project             |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$10,000.00                  |
| Total Period Obligation Amount  | \$10,000.00                  |

| Project Name                    | DNREC Lab                      |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$16,250.00                    |
| Total Period Obligation Amount  | \$16,250.00                    |

## Expenditure: EN-00780056

| Project Name                    | Courts eCourtroom Upgrades Expansion |
|---------------------------------|--------------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments         |
| Total Period Expenditure Amount | \$5,211.00                           |
| Total Period Obligation Amount  | \$5,211.00                           |

# Expenditure: EN-01187319

| Project Name                    | Courts eCourtroom Upgrades Expansion |
|---------------------------------|--------------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded       |
| Total Period Expenditure Amount | (\$5,211.00)                         |
| Total Period Obligation Amount  | (\$5,211.00)                         |

## Expenditure: EN-01601876

| Project Name                    | Courts eCourtroom Upgrades Expansion |
|---------------------------------|--------------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments         |
| Total Period Expenditure Amount | \$35,809.00                          |
| Total Period Obligation Amount  | \$35,809.00                          |

## Expenditure: EN-00625823

| Project Name                    | Courts eCourtroom Upgrades Expansion |
|---------------------------------|--------------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded       |
| Total Period Expenditure Amount | \$6,844.00                           |
| Total Period Obligation Amount  | \$6,844.00                           |

| Project Name                    | Courts eCourtroom Upgrades Expansion |
|---------------------------------|--------------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded       |
| Total Period Expenditure Amount | \$11,399.00                          |
|                                 |                                      |

| Project Name                    | Courts Online Instructions   |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$2,614.17                   |
| Total Period Obligation Amount  | \$2,614.17                   |

## Expenditure: EN-01783029

| Project Name                    | Courts Online Instructions   |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$44,567.92                  |
| Total Period Obligation Amount  | \$44,567.92                  |

## Expenditure: EN-01917343

| Project Name                    | Courts Online Instructions     |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$8,912.00                     |
| Total Period Obligation Amount  | \$8,912.00                     |

## Expenditure: EN-00628143

| Project Name                    | Courts Online Instructions   |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$505.44                     |
| Total Period Obligation Amount  | \$505.44                     |

## Expenditure: EN-01770547

| Project Name                    | DelDOT Workforce Development |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$11,650.00                  |
| Total Period Obligation Amount  | \$11,650.00                  |

## Expenditure: EN-01917403

| Project Name                    | DelDOT Workforce Development   |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$13,173.00                    |
| Total Period Obligation Amount  | \$13,173.00                    |

| Project Name                    | DPH POINT OF CARE RAPID TESTING |
|---------------------------------|---------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments    |
| Total Period Expenditure Amount | \$1,553,877.81                  |
| Total Period Obligation Amount  | \$1,553,877.81                  |

| Project Name                    | DPH POINT OF CARE RAPID TESTING |
|---------------------------------|---------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments    |
| Total Period Expenditure Amount | \$0.00                          |
| Total Period Obligation Amount  | (\$1,535,934.61)                |

## Expenditure: EN-01230819

| Project Name                    | DPH POINT OF CARE RAPID TESTING |
|---------------------------------|---------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments    |
| Total Period Expenditure Amount | \$0.00                          |
| Total Period Obligation Amount  | (\$45,933.20)                   |

# Expenditure: EN-00624438

| Project Name                    | DPH POINT OF CARE RAPID TESTING |
|---------------------------------|---------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded  |
| Total Period Expenditure Amount | (\$1,581,867.81)                |
| Total Period Obligation Amount  | \$0.00                          |

## Expenditure: EN-00333599

| Project Name                    | DPH POINT OF CARE RAPID TESTING |
|---------------------------------|---------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments    |
| Total Period Expenditure Amount | \$1,230,118.87                  |
| Total Period Obligation Amount  | \$1,230,118.87                  |

## Expenditure: EN-00443987

| Project Name                    | DPH POINT OF CARE RAPID TESTING |
|---------------------------------|---------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments    |
| Total Period Expenditure Amount | (\$1,202,128.87)                |
| Total Period Obligation Amount  | (\$1,202,128.87)                |

| Project Name                    | DHSS Health Data System        |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | (\$31,450.00)                  |
|                                 |                                |

| Project Name                    | DHSS Health Data System      |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$25,000.00                  |
| Total Period Obligation Amount  | \$25,000.00                  |

#### Expenditure: EN-00443436

| Project Name                    | DHSS Health Data System        |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$6,450.00                     |
| Total Period Obligation Amount  | \$6,450.00                     |

## Expenditure: EN-01601457

| Project Name                    | DOJ Website                  |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$14,878.00                  |
| Total Period Obligation Amount  | \$14,878.00                  |

## Expenditure: EN-01602706

| Project Name                    | DHSS AFFORDABLE CARE ACT MARKETPLACE |
|---------------------------------|--------------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments         |
| Total Period Expenditure Amount | \$32,211.47                          |
| Total Period Obligation Amount  | \$32,211.47                          |

#### Expenditure: EN-00624475

| Project Name                    | DHSS Youth Risk Behavior Surveillance System |
|---------------------------------|--|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments                 |
| Total Period Expenditure Amount | \$10,000.00                                  |
| Total Period Obligation Amount  | \$10,000.00                                  |

## Expenditure: EN-00332092

| Project Name                    | DHSS Youth Risk Behavior Surveillance System |
|---------------------------------|--|
| Subaward Type (Aggregates)      | Aggregate of Grants Awarded                  |
| Total Period Expenditure Amount | \$230,000.00                                 |
| Total Period Obligation Amount  | \$230,000.00                                 |

| Project Name                    | DHSS Youth Risk Behavior Surveillance System |
|---------------------------------|--|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments                 |
| Total Period Expenditure Amount | \$30,000.00                                  |
| Total Period Obligation Amount  | \$30,000.00                                  |

| Project Name                    | DELAWARE HEALTHCARE FACILITIES FUND |
|---------------------------------|-------------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments        |
| Total Period Expenditure Amount | (\$22,742.00)                       |
| Total Period Obligation Amount  | (\$22,742.00)                       |

## Expenditure: EN-00332098

| Project Name                    | DELAWARE HEALTHCARE FACILITIES FUND |
|---------------------------------|-------------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Grants Awarded         |
| Total Period Expenditure Amount | \$133,902.00                        |
| Total Period Obligation Amount  | \$133,902.00                        |

# Expenditure: EN-00333140

| Project Name                    | DELAWARE HEALTHCARE FACILITIES FUND |
|---------------------------------|-------------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Grants Awarded         |
| Total Period Expenditure Amount | \$12,377,358.00                     |
| Total Period Obligation Amount  | \$12,377,358.00                     |

## Expenditure: EN-00446081

| Project Name                    | DELAWARE HEALTHCARE FACILITIES FUND |
|---------------------------------|-------------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments        |
| Total Period Expenditure Amount | (\$12,268,272.00)                   |
| Total Period Obligation Amount  | (\$12,268,272.00)                   |

## Expenditure: EN-00446690

| Project Name                    | DELAWARE HEALTHCARE FACILITIES FUND |
|---------------------------------|-------------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments        |
| Total Period Expenditure Amount | \$22,742.00                         |
| Total Period Obligation Amount  | \$22,742.00                         |

| Project Name                    | DDA Local Food Loan System     |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$5,000.00                     |
|                                 |                                |

| Project Name                    | DDA Local Food Loan System     |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$72,767.00                    |
| Total Period Obligation Amount  | \$72,767.00                    |

## Expenditure: EN-01917433

| Project Name                    | DDA Local Food Loan System     |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$1,171.00                     |
| Total Period Obligation Amount  | \$1,171.00                     |

## Expenditure: EN-00628567

| Project Name                    | DDA Local Food Loan System   |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$226,966.52                 |
| Total Period Obligation Amount  | \$226,966.52                 |

## Expenditure: EN-00808744

| Project Name                    | DOL WORKFORCE DEVELOPMENT INITIATIVE |
|---------------------------------|--------------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments         |
| Total Period Expenditure Amount | (\$333.37)                           |
| Total Period Obligation Amount  | (\$333.37)                           |

#### Expenditure: EN-00628751

| Project Name                    | DOL WORKFORCE DEVELOPMENT INITIATIVE |
|---------------------------------|--------------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments         |
| Total Period Expenditure Amount | \$5,420.68                           |
| Total Period Obligation Amount  | \$5,420.68                           |

#### Expenditure: EN-00333621

| Project Name                    | DOL WORKFORCE DEVELOPMENT INITIATIVE |
|---------------------------------|--------------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments         |
| Total Period Expenditure Amount | \$905,724.00                         |
| Total Period Obligation Amount  | \$905,724.00                         |

| Project Name                    | DOL WORKFORCE DEVELOPMENT INITIATIVE |
|---------------------------------|--------------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments         |
| Total Period Expenditure Amount | (\$887,182.24)                       |
| Total Period Obligation Amount  | (\$887,182.24)                       |

| Project Name                    | DOJ Community Engagement Unit |
|---------------------------------|-------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments  |
| Total Period Expenditure Amount | \$3,565.99                    |
| Total Period Obligation Amount  | \$3,565.99                    |

## Expenditure: EN-01172356

| Project Name                    | DOJ Community Engagement Unit |
|---------------------------------|-------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments  |
| Total Period Expenditure Amount | \$555.33                      |
| Total Period Obligation Amount  | \$555.33                      |

# Expenditure: EN-01601458

| Project Name                    | DOJ Community Engagement Unit |
|---------------------------------|-------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments  |
| Total Period Expenditure Amount | \$1,787.06                    |
| Total Period Obligation Amount  | \$1,787.06                    |

## Expenditure: EN-01782981

| Project Name                    | DOJ Community Engagement Unit |
|---------------------------------|-------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments  |
| Total Period Expenditure Amount | \$19,720.85                   |
| Total Period Obligation Amount  | \$19,720.85                   |

## Expenditure: EN-01917225

| Project Name                    | DOJ Community Engagement Unit  |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$11,880.46                    |
| Total Period Obligation Amount  | \$11,880.46                    |

| Project Name                    | DOJ Community Engagement Unit  |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$13,781.91                    |
|                                 |                                |

| Project Name                    | DOJ Community Engagement Unit |
|---------------------------------|-------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments  |
| Total Period Expenditure Amount | \$3,092.68                    |
| Total Period Obligation Amount  | \$3,092.68                    |

## Expenditure: EN-01810308

| Project Name                    | DSCYF PREMIUM PAY            |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | (\$7,882.94)                 |
| Total Period Obligation Amount  | (\$7,882.94)                 |

## Expenditure: EN-00603407

| Project Name                    | DSCYF PREMIUM PAY            |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$7,882.94                   |
| Total Period Obligation Amount  | \$7,882.94                   |

## Expenditure: EN-00840552

| Project Name                    | OGOV Legal Counsel for NEUs  |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$10,000.00                  |
| Total Period Obligation Amount  | \$10,000.00                  |

#### Expenditure: EN-01215603

| Project Name                    | OGOV Legal Counsel for NEUs    |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | (\$120,000.00)                 |
| Total Period Obligation Amount  | (\$120,000.00)                 |

## Expenditure: EN-00613045

| Project Name                    | OGOV Legal Counsel for NEUs  |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$30,000.00                  |
| Total Period Obligation Amount  | \$30,000.00                  |

| Project Name                    | OGOV Legal Counsel for NEUs  |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$30,000.00                  |
| Total Period Obligation Amount  | \$30,000.00                  |

| Project Name                    | OGOV Legal Counsel for NEUs  |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$30,000.00                  |
| Total Period Obligation Amount  | \$30,000.00                  |

## Expenditure: EN-00042840

| Project Name                    | OGOV Legal Counsel for NEUs  |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$20,000.00                  |
| Total Period Obligation Amount  | \$20,000.00                  |

# Expenditure: EN-00782000

| Project Name                    | DTI Broadband Infrastructure |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$680.81                     |
| Total Period Obligation Amount  | \$680.81                     |

Expenditure: EN-01184477

| Project Name                    | DTI Broadband Infrastructure |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$11,643.08                  |
| Total Period Obligation Amount  | \$11,643.08                  |

## Expenditure: EN-01615662

| Project Name                    | DTI Broadband Infrastructure |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$110.08                     |
| Total Period Obligation Amount  | \$110.08                     |

| Project Name                    | DTI Broadband Infrastructure |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$28,941.93                  |
|                                 |                              |

| Project Name                    | DTI Broadband Infrastructure   |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$107,272.48                   |
| Total Period Obligation Amount  | \$107,272.48                   |

#### Expenditure: EN-00628089

| Project Name                    | DTI Broadband Infrastructure |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | (\$152,509.32)               |
| Total Period Obligation Amount  | (\$152,509.35)               |

## Expenditure: EN-00628090

| Project Name                    | DTI Broadband Infrastructure   |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$27,642.37                    |
| Total Period Obligation Amount  | \$27,642.40                    |

## Expenditure: EN-00323876

| Project Name                    | DTI Broadband Infrastructure |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$45,236.84                  |
| Total Period Obligation Amount  | \$45,236.84                  |

#### Expenditure: EN-01810407

| Project Name                    | Gateway Charter COVID Leave Extension |
|---------------------------------|---------------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments          |
| Total Period Expenditure Amount | \$5,641.13                            |
| Total Period Obligation Amount  | \$5,641.13                            |

## Expenditure: EN-01810413

| Project Name                    | Capital SD COVID Leave Extension |
|---------------------------------|----------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments     |
| Total Period Expenditure Amount | \$42,884.43                      |
| Total Period Obligation Amount  | \$42,884.43                      |

| Project Name                    | LTG Recovery Management Support Program |
|---------------------------------|---|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments            |
| Total Period Expenditure Amount | \$6,271.20                              |
| Total Period Obligation Amount  | \$6,271.20                              |

| Project Name                    | LTG Recovery Management Support Program |
|---------------------------------|---|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded          |
| Total Period Expenditure Amount | \$23,211.00                             |
| Total Period Obligation Amount  | \$23,211.00                             |

## Expenditure: EN-01934235

| Project Name                    | LTG Recovery Management Support Program |
|---------------------------------|---|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded          |
| Total Period Expenditure Amount | (\$4,397.40)                            |
| Total Period Obligation Amount  | (\$4,397.40)                            |

## Expenditure: EN-00812710

| Project Name                    | DOL Forward Delaware Program |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$11,315.52                  |
| Total Period Obligation Amount  | \$11,315.52                  |

## Expenditure: EN-01615027

| Project Name                    | DOL Forward Delaware Program |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | (\$19,712.35)                |
| Total Period Obligation Amount  | (\$19,712.35)                |

## Expenditure: EN-01800084

| Project Name                    | DOL Forward Delaware Program |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$3,488.44                   |
| Total Period Obligation Amount  | \$3,488.44                   |

| Project Name                    | DOL Forward Delaware Program |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$2,388.02                   |
|                                 |                              |

| Project Name                    | DOL DWDB Business Liaisons   |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$10,921.16                  |
| Total Period Obligation Amount  | \$10,921.16                  |

## Expenditure: EN-01231066

| Project Name                    | DOL DWDB Business Liaisons   |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$0.00                       |
| Total Period Obligation Amount  | (\$2,242.48)                 |

## Expenditure: EN-01615295

| Project Name                    | DOL DWDB Business Liaisons   |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$2,950.00                   |
| Total Period Obligation Amount  | \$2,950.00                   |

## Expenditure: EN-01799768

| Project Name                    | DOL DWDB Business Liaisons   |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$32,640.67                  |
| Total Period Obligation Amount  | \$32,640.67                  |

#### Expenditure: EN-01912959

| Project Name                    | DOL DWDB Business Liaisons   |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$1,552.18                   |
| Total Period Obligation Amount  | \$1,552.18                   |

## Expenditure: EN-00812784

| Project Name                    | DOL GED UI Workforce Development |
|---------------------------------|----------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments     |
| Total Period Expenditure Amount | \$176.88                         |
| Total Period Obligation Amount  | \$176.88                         |

| Project Name                    | DOL GED UI Workforce Development |
|---------------------------------|----------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments     |
| Total Period Expenditure Amount | \$140.67                         |
| Total Period Obligation Amount  | \$140.67                         |

| Project Name                    | DOL GED UI Workforce Development |
|---------------------------------|----------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments     |
| Total Period Expenditure Amount | \$358.70                         |
| Total Period Obligation Amount  | \$358.70                         |

## Expenditure: EN-00812789

| Project Name                    | DOL DWDB Mobile APP          |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$2,299.42                   |
| Total Period Obligation Amount  | \$2,299.42                   |

# Expenditure: EN-01799772

| Project Name                    | DOL DWDB Mobile APP          |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$140.67                     |
| Total Period Obligation Amount  | \$140.67                     |

## Expenditure: EN-01912963

| Project Name                    | DOL DWDB Mobile APP          |
|---------------------------------|------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments |
| Total Period Expenditure Amount | \$95.04                      |
| Total Period Obligation Amount  | \$95.04                      |

## Expenditure: EN-00812791

| Project Name                    | DOL Pre-Apprenticeship Program |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments   |
| Total Period Expenditure Amount | \$3,714.45                     |
| Total Period Obligation Amount  | \$3,714.45                     |

| Project Name                    | DOL Pre-Apprenticeship Program |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments   |
| Total Period Expenditure Amount | \$140.67                       |
|                                 |                                |

| Project Name                    | DOL Pre-Apprenticeship Program |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments   |
| Total Period Expenditure Amount | \$666.47                       |
| Total Period Obligation Amount  | \$666.47                       |

#### Expenditure: EN-00840722

| Project Name                    | OGOV MH Cancer Support Community |
|---------------------------------|----------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded   |
| Total Period Expenditure Amount | \$1,376.38                       |
| Total Period Obligation Amount  | \$1,376.38                       |

## Expenditure: EN-01211879

| Project Name                    | OGOV MH Cancer Support Community |
|---------------------------------|----------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded   |
| Total Period Expenditure Amount | \$9,253.30                       |
| Total Period Obligation Amount  | \$9,253.30                       |

## Expenditure: EN-00644936

| Project Name                    | OGOV MH Cancer Support Community |
|---------------------------------|----------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Grants Awarded      |
| Total Period Expenditure Amount | \$4,370.32                       |
| Total Period Obligation Amount  | \$4,370.32                       |

#### Expenditure: EN-01211911

| Project Name                    | OGOV MH Mental Health Association |
|---------------------------------|-----------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded    |
| Total Period Expenditure Amount | \$36,658.50                       |
| Total Period Obligation Amount  | \$36,658.50                       |

#### Expenditure: EN-00644985

| Project Name                    | OGOV MH Mental Health Association |
|---------------------------------|-----------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Grants Awarded       |
| Total Period Expenditure Amount | \$12,219.50                       |
| Total Period Obligation Amount  | \$12,219.50                       |

| Project Name                    | DTI Service Now Modernization  |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | \$24,726.30                    |
| Total Period Obligation Amount  | \$24,726.30                    |

| Project Name                    | DTI Service Now Modernization |
|---------------------------------|-------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments  |
| Total Period Expenditure Amount | (\$12,168.30)                 |
| Total Period Obligation Amount  | (\$12,168.30)                 |

## Expenditure: EN-01616462

| Project Name                    | DTI Service Now Modernization |
|---------------------------------|-------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments  |
| Total Period Expenditure Amount | \$12,306.00                   |
| Total Period Obligation Amount  | \$12,306.00                   |

# Expenditure: EN-01771221

| Project Name                    | DTI Service Now Modernization |
|---------------------------------|-------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Direct Payments  |
| Total Period Expenditure Amount | \$7,518.00                    |
| Total Period Obligation Amount  | \$7,518.00                    |

Expenditure: EN-01916547

| Project Name                    | DTI Service Now Modernization  |
|---------------------------------|--------------------------------|
| Subaward Type (Aggregates)      | Aggregate of Contracts Awarded |
| Total Period Expenditure Amount | (\$32,382.00)                  |
| Total Period Obligation Amount  | (\$32,382.00)                  |

# **Payments To Individuals**

Expenditure: EN-01601465

| Project Name                    | DOJ GVI Safer Delaware |
|---------------------------------|------------------------|
| Total Period Expenditure Amount | \$69,100.90            |
| Total Period Obligation Amount  | \$69,100.90            |

| Project Name                    | DOJ GVI Safer Delaware |
|---------------------------------|------------------------|
| Total Period Expenditure Amount | \$26,054.88            |
| Total Period Obligation Amount  | \$26,054.88            |

| Project Name                    | DOJ GVI Safer Delaware |
|---------------------------------|------------------------|
| Total Period Expenditure Amount | \$22,041.07            |
| Total Period Obligation Amount  | \$22,041.07            |

## Expenditure: EN-01600988

| Project Name                    | DSCYF GVI Safer Delaware |
|---------------------------------|--------------------------|
| Total Period Expenditure Amount | \$71,532.80              |
| Total Period Obligation Amount  | \$71,532.80              |

## Expenditure: EN-01916684

| Project Name                    | DSCYF GVI Safer Delaware |
|---------------------------------|--------------------------|
| Total Period Expenditure Amount | \$34,749.05              |
| Total Period Obligation Amount  | \$34,749.05              |

## Expenditure: EN-01614051

| Project Name                    | DHSS ARP Admin & Oversight |
|---------------------------------|----------------------------|
| Total Period Expenditure Amount | \$186,735.25               |
| Total Period Obligation Amount  | \$186,735.25               |

## Expenditure: EN-01920648

| Project Name                    | DHSS ARP Admin & Oversight |
|---------------------------------|----------------------------|
| Total Period Expenditure Amount | \$22,366.95                |
| Total Period Obligation Amount  | \$22,366.95                |

## Expenditure: EN-01601454

| Project Name                    | DVCC Family Justice Center |
|---------------------------------|----------------------------|
| Total Period Expenditure Amount | \$35,848.27                |
| Total Period Obligation Amount  | \$35,848.27                |

## Expenditure: EN-01770507

| Project Name                    | DVCC Family Justice Center |
|---------------------------------|----------------------------|
| Total Period Expenditure Amount | \$10,064.90                |
| Total Period Obligation Amount  | \$10,064.90                |

| Project Name                    | DVCC Family Justice Center |
|---------------------------------|----------------------------|
| Total Period Expenditure Amount | \$8,869.67                 |
| Total Period Obligation Amount  | \$8,869.67                 |

| Project Name                    | DOJ Backlog Assistance |
|---------------------------------|------------------------|
| Total Period Expenditure Amount | \$11,849.53            |
| Total Period Obligation Amount  | \$11,849.53            |

## Expenditure: EN-01782961

| Project Name                    | DOJ Backlog Assistance |
|---------------------------------|------------------------|
| Total Period Expenditure Amount | \$4,064.17             |
| Total Period Obligation Amount  | \$4,064.17             |

## Expenditure: EN-01917227

| Project Name                    | DOJ Backlog Assistance |
|---------------------------------|------------------------|
| Total Period Expenditure Amount | \$4,141.17             |
| Total Period Obligation Amount  | \$4,141.17             |

## Expenditure: EN-00627696

| Project Name                    | DOJ Backlog Assistance |
|---------------------------------|------------------------|
| Total Period Expenditure Amount | \$6,452.88             |
| Total Period Obligation Amount  | \$6,452.88             |

## Expenditure: EN-00435988

| Project Name                    | DOJ Backlog Assistance |
|---------------------------------|------------------------|
| Total Period Expenditure Amount | \$6,820.99             |
| Total Period Obligation Amount  | \$6,820.99             |

## Expenditure: EN-01181319

| Project Name                    | Lake Forest SD COVID Leave Extension |
|---------------------------------|--------------------------------------|
| Total Period Expenditure Amount | \$1,520.94                           |
| Total Period Obligation Amount  | \$1,520.94                           |

## Expenditure: EN-01810324

| Project Name                    | Lake Forest SD COVID Leave Extension |
|---------------------------------|--------------------------------------|
| Total Period Expenditure Amount | (\$4,402.20)                         |
| Total Period Obligation Amount  | (\$4,402.20)                         |

| Project Name                    | Lake Forest SD COVID Leave Extension |
|---------------------------------|--------------------------------------|
| Total Period Expenditure Amount | \$3,760.30                           |
|                                 |                                      |

| Project Name                    | Cape Henlopen SD COVID Leave Extension |
|---------------------------------|--|
| Total Period Expenditure Amount | \$24,566.53                            |
| Total Period Obligation Amount  | \$24,566.53                            |

#### Expenditure: EN-00314854

| Project Name                    | Seaford SD COVID Leave Extension |
|---------------------------------|----------------------------------|
| Total Period Expenditure Amount | \$12,145.50                      |
| Total Period Obligation Amount  | \$12,145.50                      |

## Expenditure: EN-00379211

| Project Name                    | Seaford SD COVID Leave Extension |
|---------------------------------|----------------------------------|
| Total Period Expenditure Amount | \$12,884.68                      |
| Total Period Obligation Amount  | \$12,884.68                      |

#### Expenditure: EN-01181306

| Project Name                    | Colonial SD COVID Leave Extension |
|---------------------------------|-----------------------------------|
| Total Period Expenditure Amount | \$62,734.93                       |
| Total Period Obligation Amount  | \$62,734.93                       |

## Expenditure: EN-01810331

| Project Name                    | Colonial SD COVID Leave Extension |
|---------------------------------|-----------------------------------|
| Total Period Expenditure Amount | (\$36,474.10)                     |
| Total Period Obligation Amount  | (\$36,474.10)                     |

#### Expenditure: EN-01810337

| Project Name                    | Woodbridge SD COVID Leave Extension |
|---------------------------------|-------------------------------------|
| Total Period Expenditure Amount | \$12,882.95                         |
| Total Period Obligation Amount  | \$12,882.95                         |

## Expenditure: EN-00314855

| Project Name                    | Woodbridge SD COVID Leave Extension |
|---------------------------------|-------------------------------------|
| Total Period Expenditure Amount | \$819.83                            |
| Total Period Obligation Amount  | \$819.83                            |

| Project Name                    | Delmar SD COVID Leave Extension |
|---------------------------------|---------------------------------|
| Total Period Expenditure Amount | \$10,995.61                     |

|                                | 1           |
|--------------------------------|-------------|
| Total Period Obligation Amount | \$10,995.61 |

| Project Name                    | Sussex Tech COVID Leave Extension |
|---------------------------------|-----------------------------------|
| Total Period Expenditure Amount | \$4,169.73                        |
| Total Period Obligation Amount  | \$4,169.73                        |

## Expenditure: EN-01181456

| Project Name                    | Charter School of Wilmington COVID Leave Extension |
|---------------------------------|--|
| Total Period Expenditure Amount | \$296.79   |
| Total Period Obligation Amount  | \$296.79   |

## Expenditure: EN-01810366

| Project Name                    | Eastside Charter School COVID Leave Extension |
|---------------------------------|---|
| Total Period Expenditure Amount | (\$3,618.24)                                  |
| Total Period Obligation Amount  | (\$3,618.24)                                  |

## Expenditure: EN-01810383

| Project Name                    | Eastside Charter School COVID Leave Extension |
|---------------------------------|---|
| Total Period Expenditure Amount | (\$8,690.40)                                  |
| Total Period Obligation Amount  | (\$8,690.40)                                  |

## Expenditure: EN-00314859

| Project Name                    | Eastside Charter School COVID Leave Extension |
|---------------------------------|---|
| Total Period Expenditure Amount | \$3,618.24                                    |
| Total Period Obligation Amount  | \$3,618.24                                    |

## Expenditure: EN-00588525

| Project Name                    | MOT Charter COVID Leave Extension |
|---------------------------------|-----------------------------------|
| Total Period Expenditure Amount | \$2,231.21                        |
| Total Period Obligation Amount  | \$2,231.21                        |

## Expenditure: EN-00314860

| Project Name                    | MOT Charter COVID Leave Extension |
|---------------------------------|-----------------------------------|
| Total Period Expenditure Amount | \$7,079.42                        |
| Total Period Obligation Amount  | \$7,079.42                        |

| Project Name | Newark Charter COVID Leave Extension |
|--------------|--------------------------------------|
|              |                                      |

| Total Period Expenditure Amount | (\$6,681.97) |
|---------------------------------|--------------|
| Total Period Obligation Amount  | (\$6,681.97) |

| Project Name                    | Newark Charter COVID Leave Extension |
|---------------------------------|--------------------------------------|
| Total Period Expenditure Amount | \$1,883.93                           |
| Total Period Obligation Amount  | \$1,883.93                           |

Expenditure: EN-00314861

| Project Name                    | Newark Charter COVID Leave Extension |
|---------------------------------|--------------------------------------|
| Total Period Expenditure Amount | \$25,367.44                          |
| Total Period Obligation Amount  | \$25,367.44                          |

#### Expenditure: EN-00433087

| Project Name                    | Newark Charter COVID Leave Extension |
|---------------------------------|--------------------------------------|
| Total Period Expenditure Amount | \$14,104.56                          |
| Total Period Obligation Amount  | \$14,104.56                          |

## Expenditure: EN-01810389

| Project Name                    | Providence Creek COVID Leave Extension |
|---------------------------------|--|
| Total Period Expenditure Amount | (\$1,648.50)                           |
| Total Period Obligation Amount  | (\$1,648.50)                           |

#### Expenditure: EN-00314863

| Project Name                    | Providence Creek COVID Leave Extension |
|---------------------------------|--|
| Total Period Expenditure Amount | \$16,841.05                            |
| Total Period Obligation Amount  | \$16,841.05                            |

## Expenditure: EN-00457116

| Project Name                    | Providence Creek COVID Leave Extension |
|---------------------------------|--|
| Total Period Expenditure Amount | \$6,283.28                             |
| Total Period Obligation Amount  | \$6,283.28                             |

#### Expenditure: EN-00588470

| Project Name                    | Smyrna SD COVID Leave Extension |
|---------------------------------|---------------------------------|
| Total Period Expenditure Amount | \$36,987.01                     |
| Total Period Obligation Amount  | \$36,987.01                     |

| Total Period Expenditure Amount | \$5,256.70 |
|---------------------------------|------------|
| Total Period Obligation Amount  | \$5,256.70 |

| Project Name                    | Smyrna SD COVID Leave Extension |
|---------------------------------|---------------------------------|
| Total Period Expenditure Amount | \$10,543.61                     |
| Total Period Obligation Amount  | \$10,543.61                     |

Expenditure: EN-01181296

| Project Name                    | Appoquinimink SD COVID Leave Extension |
|---------------------------------|--|
| Total Period Expenditure Amount | \$2,702.43                             |
| Total Period Obligation Amount  | \$2,702.43                             |

## Expenditure: EN-01810393

| Project Name                    | Las Americas ASPIRAS COVID Leave Extension |
|---------------------------------|--|
| Total Period Expenditure Amount | (\$17,754.00)                              |
| Total Period Obligation Amount  | (\$17,754.00)                              |

## Expenditure: EN-00588594

| Project Name                    | Las Americas ASPIRAS COVID Leave Extension |
|---------------------------------|--|
| Total Period Expenditure Amount | \$2,560.00                                 |
| Total Period Obligation Amount  | \$2,560.00                                 |

Expenditure: EN-00314866

| Project Name                    | Las Americas ASPIRAS COVID Leave Extension |
|---------------------------------|--|
| Total Period Expenditure Amount | \$3,220.00                                 |
| Total Period Obligation Amount  | \$3,220.00                                 |

## Expenditure: EN-00375593

| Project Name                    | Las Americas ASPIRAS COVID Leave Extension |
|---------------------------------|--|
| Total Period Expenditure Amount | \$11,974.00                                |
| Total Period Obligation Amount  | \$11,974.00                                |

## Expenditure: EN-00322935

| Project Name                    | Milford SD COVID Leave |
|---------------------------------|------------------------|
| Total Period Expenditure Amount | \$5,861.09             |
| Total Period Obligation Amount  | \$5,861.09             |

T

| Project Name                    | Milford SD COVID Leave |
|---------------------------------|------------------------|
| Total Period Expenditure Amount | \$28,692.48            |
| Total Period Obligation Amount  | \$28,692.48            |

| Project Name                    | 1st State Montessori COVID Leave |
|---------------------------------|----------------------------------|
| Total Period Expenditure Amount | \$12,452.84                      |
| Total Period Obligation Amount  | \$12,452.84                      |

## Expenditure: EN-01215732

| Project Name                    | OGOV Administrative Costs & Overhead |
|---------------------------------|--------------------------------------|
| Total Period Expenditure Amount | (\$79,543.99)                        |
| Total Period Obligation Amount  | (\$79,543.99)                        |

## Expenditure: EN-00603594

| Project Name                    | OGOV Administrative Costs & Overhead |
|---------------------------------|--------------------------------------|
| Total Period Expenditure Amount | \$79,543.99                          |
| Total Period Obligation Amount  | \$79,543.99                          |

## Expenditure: EN-00799441

| Project Name                    | DHSS Retention Premium Pay |
|---------------------------------|----------------------------|
| Total Period Expenditure Amount | \$1,568,897.25             |
| Total Period Obligation Amount  | \$1,568,897.25             |

## Expenditure: EN-01181214

| Project Name                    | DHSS Retention Premium Pay |
|---------------------------------|----------------------------|
| Total Period Expenditure Amount | \$269,178.17               |
| Total Period Obligation Amount  | \$269,178.17               |

## Expenditure: EN-01614027

| Project Name                    | DHSS Retention Premium Pay |
|---------------------------------|----------------------------|
| Total Period Expenditure Amount | \$3,577.16                 |
| Total Period Obligation Amount  | \$3,577.16                 |

| Project Name                    | DHSS Retention Premium Pay |
|---------------------------------|----------------------------|
| Total Period Expenditure Amount | \$44,240.29                |
| Total Period Obligation Amount  | \$44,240.29                |

| Project Name                    | DHSS Retention Premium Pay |
|---------------------------------|----------------------------|
| Total Period Expenditure Amount | (\$2,500.66)               |
| Total Period Obligation Amount  | (\$2,500.66)               |

| Project Name                    | DHSS Retention Premium Pay |
|---------------------------------|----------------------------|
| Total Period Expenditure Amount | \$1,381,917.95             |
| Total Period Obligation Amount  | \$1,381,917.95             |

## Expenditure: EN-00332090

| Project Name                    | DHSS Retention Premium Pay |
|---------------------------------|----------------------------|
| Total Period Expenditure Amount | \$1,243,144.84             |
| Total Period Obligation Amount  | \$1,243,144.84             |

## Expenditure: EN-00415404

| Project Name                    | DHSS Retention Premium Pay |
|---------------------------------|----------------------------|
| Total Period Expenditure Amount | \$1,131,773.66             |
| Total Period Obligation Amount  | \$1,131,773.66             |

## Expenditure: EN-00797381

| Project Name                    | DOC Premium Pay & Overtime |
|---------------------------------|----------------------------|
| Total Period Expenditure Amount | (\$1,215,147.28)           |
| Total Period Obligation Amount  | (\$1,215,147.28)           |

## Expenditure: EN-00333662

| Project Name                    | DOC Premium Pay & Overtime |
|---------------------------------|----------------------------|
| Total Period Expenditure Amount | \$7,421,142.29             |
| Total Period Obligation Amount  | \$7,421,142.29             |

## Expenditure: EN-00333664

| Project Name                    | DOC Premium Pay & Overtime |
|---------------------------------|----------------------------|
| Total Period Expenditure Amount | \$6,964,970.74             |
| Total Period Obligation Amount  | \$6,964,970.74             |

| Project Name                    | DOC Premium Pay & Overtime |
|---------------------------------|----------------------------|
| Total Period Expenditure Amount | (\$1,218,140.79)           |
| Total Period Obligation Amount  | (\$1,218,140.79)           |

| Project Name                    | Brandywine SD COVID Leave |
|---------------------------------|---------------------------|
| Total Period Expenditure Amount | \$17,919.12               |
| Total Period Obligation Amount  | \$17,919.12               |

| Project Name                    | Brandywine SD COVID Leave |
|---------------------------------|---------------------------|
| Total Period Expenditure Amount | (\$17,919.12)             |
| Total Period Obligation Amount  | (\$17,919.12)             |

## Expenditure: EN-01181429

| Project Name                    | Odyssey Charter COVID Leave |
|---------------------------------|-----------------------------|
| Total Period Expenditure Amount | \$500.00                    |
| Total Period Obligation Amount  | \$500.00                    |

## Expenditure: EN-01810406

| Project Name                    | Odyssey Charter COVID Leave |
|---------------------------------|-----------------------------|
| Total Period Expenditure Amount | (\$7,937.28)                |
| Total Period Obligation Amount  | (\$7,937.28)                |

## Expenditure: EN-00588488

| Project Name                    | Odyssey Charter COVID Leave |
|---------------------------------|-----------------------------|
| Total Period Expenditure Amount | \$17,104.60                 |
| Total Period Obligation Amount  | \$17,104.60                 |

## Expenditure: EN-01934173

| Project Name                    | DTI Digital Accessibility |
|---------------------------------|---------------------------|
| Total Period Expenditure Amount | \$40,914.57               |
| Total Period Obligation Amount  | \$40,914.57               |

## Expenditure: EN-00628239

| Project Name                    | Courts Backlog Assistance |
|---------------------------------|---------------------------|
| Total Period Expenditure Amount | \$2,747.81                |
| Total Period Obligation Amount  | \$2,747.81                |

| Project Name                    | Courts Backlog Assistance |
|---------------------------------|---------------------------|
| Total Period Expenditure Amount | \$15,210.69               |
| Total Period Obligation Amount  | \$15,210.69               |

| Project Name                    | Courts Backlog Assistance |
|---------------------------------|---------------------------|
| Total Period Expenditure Amount | \$12,041.50               |
| Total Period Obligation Amount  | \$12,041.50               |

#### Expenditure: EN-01810309

| Project Name                    | DSCYF PREMIUM PAY |
|---------------------------------|-------------------|
| Total Period Expenditure Amount | \$7,882.94        |
| Total Period Obligation Amount  | \$7,882.94        |

#### Expenditure: EN-00318235

| Project Name                    | DSCYF PREMIUM PAY |
|---------------------------------|-------------------|
| Total Period Expenditure Amount | \$2,238,747.53    |
| Total Period Obligation Amount  | \$2,238,747.53    |

#### Expenditure: EN-00378520

| Project Name                    | DSCYF PREMIUM PAY |
|---------------------------------|-------------------|
| Total Period Expenditure Amount | \$887,548.64      |
| Total Period Obligation Amount  | \$887,548.64      |

#### Expenditure: EN-00042874

| Project Name                    | DSCYF PREMIUM PAY |
|---------------------------------|-------------------|
| Total Period Expenditure Amount | \$382,940.98      |
| Total Period Obligation Amount  | \$382,940.98      |

#### Expenditure: EN-00797390

| Project Name                    | DOC PREMIUM PAY |
|---------------------------------|-----------------|
| Total Period Expenditure Amount | \$1,935,354.59  |
| Total Period Obligation Amount  | \$1,935,354.59  |

#### Expenditure: EN-01693508

| Project Name                    | DOC PREMIUM PAY |
|---------------------------------|-----------------|
| Total Period Expenditure Amount | (\$10,058.24)   |
| Total Period Obligation Amount  | (\$10,058.24)   |

| Project Name                    | DOC PREMIUM PAY |
|---------------------------------|-----------------|
| Total Period Expenditure Amount | (\$327.95)      |
| Total Period Obligation Amount  | (\$327.95)      |

| Project Name                    | DOC PREMIUM PAY |
|---------------------------------|-----------------|
| Total Period Expenditure Amount | (\$459.13)      |
| Total Period Obligation Amount  | (\$459.13)      |

#### Expenditure: EN-00462457

| Project Name                    | DOC PREMIUM PAY |
|---------------------------------|-----------------|
| Total Period Expenditure Amount | \$2,081,379.94  |
| Total Period Obligation Amount  | \$2,081,379.94  |

#### Expenditure: EN-00042877

| Project Name                    | DOC PREMIUM PAY |
|---------------------------------|-----------------|
| Total Period Expenditure Amount | \$1,228,500.00  |
| Total Period Obligation Amount  | \$1,228,500.00  |

#### Expenditure: EN-00840557

| Project Name                    | DOF Admin & Oversight Personnel |
|---------------------------------|---------------------------------|
| Total Period Expenditure Amount | \$34,802.41                     |
| Total Period Obligation Amount  | \$34,802.41                     |

#### Expenditure: EN-01213122

| Project Name                    | DOF Admin & Oversight Personnel |
|---------------------------------|---------------------------------|
| Total Period Expenditure Amount | \$30,651.94                     |
| Total Period Obligation Amount  | \$30,651.94                     |

#### Expenditure: EN-01614336

| Project Name                    | DOF Admin & Oversight Personnel |
|---------------------------------|---------------------------------|
| Total Period Expenditure Amount | \$34,800.98                     |
| Total Period Obligation Amount  | \$34,800.98                     |

#### Expenditure: EN-01777640

| Project Name                    | DOF Admin & Oversight Personnel |
|---------------------------------|---------------------------------|
| Total Period Expenditure Amount | \$25,876.54                     |
| Total Period Obligation Amount  | \$25,876.54                     |

| Project Name                    | DOF Admin & Oversight Personnel |
|---------------------------------|---------------------------------|
| Total Period Expenditure Amount | \$32,401.25                     |
| Total Period Obligation Amount  | \$32,401.25                     |

| Project Name                    | DOF Admin & Oversight Personnel |
|---------------------------------|---------------------------------|
| Total Period Expenditure Amount | \$34,445.27                     |
| Total Period Obligation Amount  | \$34,445.27                     |

#### Expenditure: EN-00332058

| Project Name                    | DOF Admin & Oversight Personnel |
|---------------------------------|---------------------------------|
| Total Period Expenditure Amount | \$29,575.34                     |
| Total Period Obligation Amount  | \$29,575.34                     |

#### Expenditure: EN-00383627

| Project Name                    | DOF Admin & Oversight Personnel |
|---------------------------------|---------------------------------|
| Total Period Expenditure Amount | \$29,575.36                     |
| Total Period Obligation Amount  | \$29,575.36                     |

#### Expenditure: EN-00042837

| Project Name                    | DOF Admin & Oversight Personnel |
|---------------------------------|---------------------------------|
| Total Period Expenditure Amount | \$26,014.46                     |
| Total Period Obligation Amount  | \$26,014.46                     |

#### Expenditure: EN-00798464

| Project Name                    | OMB Admin & Oversight Personnel |
|---------------------------------|---------------------------------|
| Total Period Expenditure Amount | \$13,929.48                     |
| Total Period Obligation Amount  | \$13,929.48                     |

#### Expenditure: EN-01213107

| Project Name                    | OMB Admin & Oversight Personnel |
|---------------------------------|---------------------------------|
| Total Period Expenditure Amount | \$11,939.55                     |
| Total Period Obligation Amount  | \$11,939.55                     |

#### Expenditure: EN-01614337

| Project Name                    | OMB Admin & Oversight Personnel |
|---------------------------------|---------------------------------|
| Total Period Expenditure Amount | \$13,929.49                     |
| Total Period Obligation Amount  | \$13,929.49                     |

| Project Name                    | OMB Admin & Oversight Personnel |
|---------------------------------|---------------------------------|
| Total Period Expenditure Amount | \$12,624.36                     |
|                                 |                                 |

| Project Name                    | OMB Admin & Oversight Personnel |
|---------------------------------|---------------------------------|
| Total Period Expenditure Amount | \$15,513.16                     |
| Total Period Obligation Amount  | \$15,513.16                     |

#### Expenditure: EN-00603589

| Project Name                    | OMB Admin & Oversight Personnel |
|---------------------------------|---------------------------------|
| Total Period Expenditure Amount | \$13,680.79                     |
| Total Period Obligation Amount  | \$13,680.79                     |

#### Expenditure: EN-00383631

| Project Name                    | OMB Admin & Oversight Personnel |
|---------------------------------|---------------------------------|
| Total Period Expenditure Amount | \$19,584.16                     |
| Total Period Obligation Amount  | \$19,584.16                     |

#### Expenditure: EN-00798947

| Project Name                    | OMB Admin & Oversight Personnel |
|---------------------------------|---------------------------------|
| Total Period Expenditure Amount | \$27,102.05                     |
| Total Period Obligation Amount  | \$27,102.05                     |

#### Expenditure: EN-01213110

| Project Name                    | OMB Admin & Oversight Personnel |
|---------------------------------|---------------------------------|
| Total Period Expenditure Amount | \$23,230.33                     |
| Total Period Obligation Amount  | \$23,230.33                     |

#### Expenditure: EN-01614338

| Project Name                    | OMB Admin & Oversight Personnel |
|---------------------------------|---------------------------------|
| Total Period Expenditure Amount | \$121,180.25                    |
| Total Period Obligation Amount  | \$121,180.25                    |

#### Expenditure: EN-01777639

| Project Name                    | OMB Admin & Oversight Personnel |
|---------------------------------|---------------------------------|
| Total Period Expenditure Amount | \$44,649.17                     |
| Total Period Obligation Amount  | \$44,649.17                     |

| Project Name                    | OMB Admin & Oversight Personnel |
|---------------------------------|---------------------------------|
| Total Period Expenditure Amount | \$32,977.36                     |

| Total Period Obligation Amount | \$32,977.36 |
|--------------------------------|-------------|

| Project Name                    | OMB Admin & Oversight Personnel |
|---------------------------------|---------------------------------|
| Total Period Expenditure Amount | \$26,775.92                     |
| Total Period Obligation Amount  | \$26,775.92                     |

#### Expenditure: EN-00332063

| Project Name                    | OMB Admin & Oversight Personnel |
|---------------------------------|---------------------------------|
| Total Period Expenditure Amount | \$84,383.38                     |
| Total Period Obligation Amount  | \$84,383.38                     |

#### Expenditure: EN-00383633

| Project Name                    | OMB Admin & Oversight Personnel |
|---------------------------------|---------------------------------|
| Total Period Expenditure Amount | \$37,528.96                     |
| Total Period Obligation Amount  | \$37,528.96                     |

#### Expenditure: EN-00782005

| Project Name                    | DTI Broadband Infrastructure |
|---------------------------------|------------------------------|
| Total Period Expenditure Amount | \$4,941.47                   |
| Total Period Obligation Amount  | \$4,941.47                   |

#### Expenditure: EN-01183613

| Project Name                    | DTI Broadband Infrastructure |
|---------------------------------|------------------------------|
| Total Period Expenditure Amount | \$11,754.49                  |
| Total Period Obligation Amount  | \$11,754.49                  |

#### Expenditure: EN-01615666

| Project Name                    | DTI Broadband Infrastructure |
|---------------------------------|------------------------------|
| Total Period Expenditure Amount | \$12,911.70                  |
| Total Period Obligation Amount  | \$12,911.70                  |

#### Expenditure: EN-01770627

| Project Name                    | DTI Broadband Infrastructure |
|---------------------------------|------------------------------|
| Total Period Expenditure Amount | \$15,907.53                  |
| Total Period Obligation Amount  | \$15,907.53                  |

| Project Name | DTI Broadband Infrastructure |
|--------------|------------------------------|
|              |                              |

| Total Period Expenditure Amount | (\$6,139.71) |
|---------------------------------|--------------|
| Total Period Obligation Amount  | (\$6,139.71) |

| Project Name                    | DTI Broadband Infrastructure |
|---------------------------------|------------------------------|
| Total Period Expenditure Amount | \$8,692.36                   |
| Total Period Obligation Amount  | \$8,692.36                   |

Expenditure: EN-00049172

| Project Name                    | DTI Broadband Infrastructure |
|---------------------------------|------------------------------|
| Total Period Expenditure Amount | \$116,174.59                 |
| Total Period Obligation Amount  | \$116,174.59                 |

#### Expenditure: EN-01810408

| Project Name                    | Gateway Charter COVID Leave Extension |
|---------------------------------|---------------------------------------|
| Total Period Expenditure Amount | (\$5,641.13)                          |
| Total Period Obligation Amount  | (\$5,641.13)                          |

#### Expenditure: EN-00603422

| Project Name                    | Gateway Charter COVID Leave Extension |
|---------------------------------|---------------------------------------|
| Total Period Expenditure Amount | \$5,641.13                            |
| Total Period Obligation Amount  | \$5,641.13                            |

#### Expenditure: EN-01181303

| Project Name                    | Capital SD COVID Leave Extension |
|---------------------------------|----------------------------------|
| Total Period Expenditure Amount | \$50,671.55                      |
| Total Period Obligation Amount  | \$50,671.55                      |

#### Expenditure: EN-01810412

| Project Name                    | Capital SD COVID Leave Extension |
|---------------------------------|----------------------------------|
| Total Period Expenditure Amount | (\$42,884.43)                    |
| Total Period Obligation Amount  | (\$42,884.43)                    |

#### Expenditure: EN-01181315

| Project Name                    | Indian River SD COVID Leave Extension |
|---------------------------------|---------------------------------------|
| Total Period Expenditure Amount | \$92,842.64                           |
| Total Period Obligation Amount  | \$92,842.64                           |

| Total Period Expenditure Amount | \$34,888.35 |
|---------------------------------|-------------|
| Total Period Obligation Amount  | \$34,888.35 |

| Project Name                    | LTG Recovery Management Support Program |
|---------------------------------|---|
| Total Period Expenditure Amount | \$37,002.12                             |
| Total Period Obligation Amount  | \$37,002.12                             |

| Project Name                    | LTG Recovery Management Support Program |
|---------------------------------|---|
| Total Period Expenditure Amount | \$12,874.21                             |
| Total Period Obligation Amount  | \$12,874.21                             |

# Report

## **Revenue Replacement**

| Is your jurisdiction electing to use the standard allowance of<br>up to \$10 million, not to exceed your total award allocation,<br>for identifying revenue loss? | No                 |
|---|--------------------|
| Base Year General Revenue   | \$6,990,266,369.00 |
| Growth Adjustment Used  | 5.20%              |
| Base Year Fiscal Year End Date  | 6/30/2019          |
| Total Estimated Revenue Loss  | \$275,159,913.00   |
| Are you reporting Actual General Revenue using calendar year or fiscal year?  | Calendar Year      |

## 2020

| Actual General Revenue  | \$7,267,375,100.00  |
|---|---|
| Estimated Revenue Loss Due to Covid-19 Public Health<br>Emergency                                       | \$275,159,913.00  |
| Were Fiscal Recovery Funds used to make a deposit into a pension fund?                                  | No  |
| Please provide an explanation of how revenue replacement<br>funds were allocated to government services | Revenue replacement funds allocated to government<br>services amounted to \$61.3 million. This is for two projects.<br>The first project, DNREC Shoreline Protection, will<br>replenish shorelines in specific areas of the State. The<br>second project, DOL UI Modernization, will provide<br>Delaware with an updated Unemployment system to better<br>serve residents of our State. |

## 2021

| Actual General Revenue  | \$8,333,057,833.00  |
|---|---|
| Estimated Revenue Loss Due to Covid-19 Public Health<br>Emergency                                       | \$0.00  |
| Were Fiscal Recovery Funds used to make a deposit into a pension fund?                                  | No  |
| Please provide an explanation of how revenue replacement<br>funds were allocated to government services | \$1.3 million was allocated to DNREC for shoreline<br>replenishment. \$60 million was allocated to the Department<br>of Labor Unemployment Insurance project. |

## 

| Actual General Revenue  | \$8,766,376,840.00   |
|---|--|
| Estimated Revenue Loss Due to Covid-19 Public Health<br>Emergency                                       | \$0.00   |
| Were Fiscal Recovery Funds used to make a deposit into a pension fund?                                  | No   |
| Please provide an explanation of how revenue replacement<br>funds were allocated to government services | Revenue replacement funds have been used to provide<br>services for three of our projects so far. The DNREC<br>Shoreline Protection project will replenish shorelines for<br>depleted shores along some of Delaware's beaches. The UI<br>System Modernization project will develop a new<br>unemployment service to better serve citizens of the State of<br>Delaware. The Port of Wilmington project will build a sea<br>wall and enhance the Port of Wilmington in Delaware. |

## 

| Actual General Revenue  | \$9,222,228,436.00   |
|---|--|
| Estimated Revenue Loss Due to Covid-19 Public Health<br>Emergency                                       | \$0.00   |
| Were Fiscal Recovery Funds used to make a deposit into a pension fund?                                  | No   |
| Please provide an explanation of how revenue replacement<br>funds were allocated to government services | Revenue replacement funds have been used for the Port of Wilmington project to enhance the Port of Wilmington in Delaware. |

# **Ineligible Activities: Tax Offset Provision**

| Do you have revenue-reducing covered change(s) to report<br>for the requested fiscal year and for future fiscal years? | No |
|--|----|
|--|----|

#### **Baseline Revenue and De Minimis Threshold**

| Total Value of Revenue-Reducing Covered Change  | \$0.00 |
|---|--------|
| Enter Baseline Revenue  |        |
| De Minimis Threshold  | \$0.00 |
| Aggregate value of the Revenue-Reducing Covered<br>Change(s) for the requested fiscal year as a percentage of<br>Baseline Revenue |        |

### Actual Tax Revenue and Reduction in Net Tax Revenue

| Baseline Revenue   |        |
|--|--------|
| Actual Tax Revenue   |        |
| Reduction in Net Tax Revenue: Baseline Revenue minus<br>Actual Tax Revenue | \$0.00 |

## Overview

| Total Obligations            | \$571,246,058.58 |
|------------------------------|------------------|
| Total Expenditures           | \$429,698,362.69 |
| Total Adopted Budget         | \$873,874,791.66 |
| Total Number of Projects     | 258              |
| Total Number of Subawards    | 455              |
| Total Number of Expenditures | 1367             |

# Certification

| Authorized Representative Name      | WILLIAM LINDEWIRTH JR           |
|-------------------------------------|---------------------------------|
| Authorized Representative Telephone |                                 |
| Authorized Representative Title     |                                 |
| Authorized Representative Email     | william.lindewirth@delaware.gov |
| Submission Date                     | 1/31/2024 5:08 PM               |