Quarterly Budget and Expenditure Reporting for the ERF I, II, and III P (Eu w š.

Institution Name:	Date of Report:	Covering Quarter Ending:	W Z
Award Number(s): P425E z z z z z z z z z z z z P425F z z	z z z z 2425.1z z z z z z z z z z z z z z z z z	z zzzP425k zzzzzzzzzW ð î ñ >	> Z Z Z Z Z Z Z
W425M z z z z z z z z z z z z z z z z z z z	zzzzzzzzP425Qzzzz P4 251	8 z z z z z z z z z z z z z z z 2 z 2 z z 2 z 2 z z 2 z z 2 z z 2 z z z z z z z z z z	ZZZZZZZ
Final Report? • (Only if you have exhausted ALL HEERF Grants)			
Total Amount of InstitutionaFunds Awarded: Section (a)(1):	^ š]}v~ •~î•W	Section (a)(3):	
Total Amount of Student Funds Awarded: Section (a)(1):	Section (a)(4):		

1) Please provide a link to your annual report located on the Entransparency portal so the upolic can review the full details of your HEER grant usage over the last calendar year including methodologies used to award HEER to students, academic success of HEER recipients, and other details:

î What percentage of students received emergency grants and how much did students receive by student type and fund type?

How much of your HEERF student funds remain left to be disbursed at the end of the reporting period?

Complete the following table.

	3				
Emergencyjinai	nciaAid GrantsAwardedtoStuder	nts this qua	rtreeport only dis	bursements related to Emergency Financial Aid	
including using	those grants to satisfy outs	standing acc	counts. Any disbu	ursements unrelated to Emergency Financial Aic	Grants s
included in the	e reporte o lemaditures	J	•	9	
		Total	Undergraduates	Graduates	
		students			

Number of HEERF Student Recipients Emergency Grants to Students What was the amount of Emergency Financial Aid

student s outstanding account balance upon receiving affirmative writtemonsent from students to do so? If funds were not used for this purpose, report \$0. Include only amounts that

benefited students who b ic 0.003 3.44 re f EMC BT /P <r propolu cy Financial Aid

OMBControNumber 184@499

c) Estimate

OMBControNumber 184@409 Expires 3/31/2024

Leaseevenue	
Royalties	

 $Other operatin {\bf g} evenue\\$

FormInstructions

Completing the Forom each form, fill out the institution of higher education (IHE or institution) name, the date of the report, the appropriate report cover3/(31226/30/22, 9/30/22, 1222) 1the 1digit PR/Award Number (number is found in Box 2 of your Grant Awar(GANd)) for etion HEERF grant fundings treams applicable the total mount of funds awarded by the Departmen (tincluding eserve funds fawarded) and check the box if the report is a final report. Institutions that expended HEERF grant funds during the calendar quartle from 3 Dan 2021 are required the quarterly report that involved the expenditure of HEERF II CRRSAA and HEERF I CARES Act funds. The Department was in place for HEERF II CRRSAA sund, institutions may have until the end of the second calendar quartle flat and 2012 2 dit of the postthese etroactive ports they have notal ready doneso.

In the chartan institution ust specify the amount of expended HEERF I, II, and funding category: (a)(1) Institutional Portion; (a)(2), and if applicable(a)(2) fundinclude Assistance is tingly lumbers (ALNs)84.425 (Historically lack with the lack with the

OMBControl Number 1840-0849 Expires 3/31/202 (1) The OTO Set 1840-0849 Expired (19) With Control With Control Number 1840-0849 Expires 3/31/2020 (19) With Control Number 1840-0849 Expires 3/31/2020 (19)