

11h

: \_\_\_\_\_ Date of Report: 0 \_\_\_\_\_ Covering Quarter Ending: 00 \_\_\_\_\_

Funds Awarded: 000 0

Total Amount of

Category

Amount in (a)(1)  
institutional dollars

Amount in (a)(2)  
dollars, if  
applicable

Amount in (a)(3)  
dollars, if  
applicable

Wed monthly  
relief program  
Culinary progr

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## Completing the Form

1. `<input type="text" value="Name" />`  
2. `<input type="text" value="Address" />`  
3. `<input type="text" value="City" />`  
4. `<input type="text" value="State" />`  
5. `<input type="text" value="Zip" />`  
6. `<input type="text" value="Phone" />`  
7. `<input type="text" value="Email" />`  
8. `<input type="text" value="Comments" />`

## Posting the Form

1. `<input type="submit" value="Submit" />`  
2. `<input type="submit" value="Cancel" />`  
3. `<input type="submit" value="Reset" />`  
4. `<input type="submit" value="Back" />`  
5. `<input type="submit" value="Home" />`

5. `<input type="submit" value="Submit" />`  
6. `<input type="submit" value="Cancel" />`  
7. `<input type="submit" value="Reset" />`  
8. `<input type="submit" value="Back" />`

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at least three years after the submission of the final report per 2 CFR § 200.333. Any changes or updates after initial posting must be conspicuously noted after initial posting and the date of the ~~update~~

#### Paperwork Burden Statement

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