

SLFRF Compliance Report - 2029 - P&E Report - Q3 2023

Report Period : Quarter 3 2023 (July-September)

Recipient Profile

Recipient Information

Recipient UEI	QRL4RNF9E5L8
Recipient TIN	056000115
Recipient Legal Entity Name	Cumberland, Rhode Island
Recipient Type	Metro City or County
FAIN	
CFDA No./Assistance Listing	
Recipient Address	45 Broad Street
Recipient Address 2	
Recipient Address 3	
Recipient City	Cumberland
Recipient State/Territory	RI
Recipient Zip5	02864
Recipient Zip+4	8388
Recipient Reporting Tier	Tier 2. Metropolitan cities and counties with a population below 250,000 residents that are allocated more than \$10 million in SLFRF funding, and NEUs that are allocated more than \$10 million in SLFRF funding
Base Year Fiscal Year End Date	6/30/2023
Discrepancies Explanation	
Is the Recipient Registered in SAM.Gov?	Yes

Project Overview

Project Name: Admin Support

Project Identification Number	HCH
Project Expenditure Category	7-Administrative
Project Expenditure Subcategory	7.1-Administrative Expenses
Status To Completion	Completed 50% or more
Adopted Budget	\$20,250.00
Total Cumulative Obligations	\$14,150.00
Total Cumulative Expenditures	\$14,150.00
Current Period Obligations	\$725.00
Current Period Expenditures	\$725.00
Project Description	Admin support

Project Name: Stormwater System

Project Identification Number	Pare
Project Expenditure Category	1-Public Health
Project Expenditure Subcategory	1.14-Other Public Health Services
Status To Completion	Completed less than 50%
Adopted Budget	\$47,850.00
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$34,024.00
Total Cumulative Expenditures	\$34,024.00
Current Period Obligations	\$9,770.00
Current Period Expenditures	\$9,770.00
Project Description	Stormwater runoff
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 program(s), including public health or negative economic impact experienced	Stormwater runoff
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	Diverting and repair of Industrial Road

Project Name: EMS Radio

Project Identification Number	Motorola/Cyber Comm
Project Expenditure Category	1-Public Health

Project Expenditure Subcategory	1.14-Other Public Health Services
Status To Completion	Completed 50% or more
Adopted Budget	\$440,332.00
Total Cumulative Obligations	\$440,332.00
Total Cumulative Expenditures	\$368,972.00
Current Period Obligations	\$253,004.00
Current Period Expenditures	\$253,004.00
Project Description	Radios for EMS
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 program(s), including public health or negative economic impact experienced	EMS radios
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	EMS radios - enhanced distance/frequency

Project Name: Mannequins

Project Identification Number	CAE Healthcare
Project Expenditure Category	1-Public Health
Project Expenditure Subcategory	1.14-Other Public Health Services
Status To Completion	Completed
Adopted Budget	\$43,174.00
Total Cumulative Obligations	\$43,174.00
Total Cumulative Expenditures	\$43,174.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	EMS Mannequin
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 program(s), including public health or negative economic impact experienced	EMS Training Mannequin
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	EMS response time

Project Name: EMS Defibrillators

Project Identification Number	Zoll Medical
Project Expenditure Category	1-Public Health

Project Expenditure Subcategory	1.14-Other Public Health Services
Status To Completion	Completed 50% or more
Adopted Budget	\$213,394.00
Total Cumulative Obligations	\$207,780.00
Total Cumulative Expenditures	\$207,780.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	EMS Defibrillators
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 program(s), including public health or negative economic impact experienced	EMS Defibrillators
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	EMS training/response

Project Name: NRI Food Pantry

Project Identification Number	Northern RI Food Pantry
Project Expenditure Category	2-Negative Economic Impacts
Project Expenditure Subcategory	2.1-Household Assistance: Food Programs
Status To Completion	Completed 50% or more
Adopted Budget	\$125,000.00
Total Cumulative Obligations	\$125,000.00
Total Cumulative Expenditures	\$85,000.00
Current Period Obligations	\$20,000.00
Current Period Expenditures	\$20,000.00
Project Description	Assistance to Northern RI Food Pantry
Does this project include a capital expenditure?	No
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	4 Imp HHs that experienced increased food or housing insecurity
Tertiary Impacted and/or Disproportionately Impacted populations	2 Imp Low or moderate income HHs or populations
Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced	Northern RI Food Pantry assistance
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	Work with Northern RI food Pantry to provide food assistance
Number of households served (by program if recipient establishes multiple separate household assistance programs)	5,000

Project Name: Small Business Relief

Project Identification Number	2316
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	\$558,332.00
Total Cumulative Obligations	\$558,332.00
Total Cumulative Expenditures	\$501,569.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Small Business Assistance
Does this project include a capital expenditure?	No
What Impacted and/or Disproportionally Impacted population does this project primarily serve?	7 Imp Other HHs or populations that experienced a negative economic
Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced	Grants to supplement businesses negatively impacted
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	Awards based upon applications
Number of small businesses served (by program if recipient establishes multiple separate small businesses assistance programs)	54

Project Name: Water Line - Grants Mill

Project Identification Number	Haluch
Project Expenditure Category	1-Public Health
Project Expenditure Subcategory	1.14-Other Public Health Services
Status To Completion	Completed
Adopted Budget	\$149,265.14
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$149,265.00
Total Cumulative Expenditures	\$149,265.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Water Line - Grants Mill
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	

program(s), including public health or negative economic impact experienced	Water Line - Grants Mill
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	Water Line - Grants Mill

Project Name: BF Norton Playground

Project Identification Number	ME O'Brien
Project Expenditure Category	1-Public Health
Project Expenditure Subcategory	1.14-Other Public Health Services
Status To Completion	Completed 50% or more
Adopted Budget	\$215,395.16
Total Cumulative Obligations	\$116,493.00
Total Cumulative Expenditures	\$116,493.00
Current Period Obligations	\$1,904.00
Current Period Expenditures	\$1,904.00
Project Description	BF Norton Playground
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 program(s), including public health or negative economic impact experienced	BF Norton Playground
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	BF Norton Playground

Project Name: Medical Training Simulator

Project Identification Number	NA Rescue Simulation
Project Expenditure Category	1-Public Health
Project Expenditure Subcategory	1.7-Other COVID-19 Public Health Expenses (including Communications, Enforcement, Isolation/Quarantine)
Status To Completion	Completed 50% or more
Adopted Budget	\$82,797.12
Total Cumulative Obligations	\$80,397.00
Total Cumulative Expenditures	\$80,397.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Medical Training Simulator
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	

program(s), including public health or negative economic impact experienced	Medical Training Simulator
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	Medical Training Simulator

Project Name: Vehicle Purchases

Project Identification Number	Liberty
Project Expenditure Category	1-Public Health
Project Expenditure Subcategory	1.5-Personal Protective Equipment
Status To Completion	Completed less than 50%
Adopted Budget	\$800,000.00
Total Cumulative Obligations	\$77,588.00
Total Cumulative Expenditures	\$77,588.00
Current Period Obligations	\$77,588.00
Current Period Expenditures	\$77,588.00
Project Description	Vehicle Replacement
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 program(s), including public health or negative economic impact experienced	Vehicles
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	Vehicles

Project Name: Water Infrastructure

Project Identification Number	Diggers
Project Expenditure Category	1-Public Health
Project Expenditure Subcategory	1.14-Other Public Health Services
Status To Completion	Completed 50% or more
Adopted Budget	\$600,000.00
Total Cumulative Obligations	\$417,849.00
Total Cumulative Expenditures	\$417,849.00
Current Period Obligations	\$417,849.00
Current Period Expenditures	\$417,849.00
Project Description	Water Infrastructure
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 program(s), including public health or negative economic impact experienced	Water Infrastructure

impact experienced	
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	Water Infrastructure

Expenditures

Aggregate Expenditures for Awards less than \$50,000

Expenditure: EN-01160358

Project Name	Admin Support
Subaward Type (Aggregates)	Aggregate of Direct Payments
Total Period Expenditure Amount	\$11,200.00
Total Period Obligation Amount	\$14,150.00

Expenditure: EN-01693930

Project Name	Admin Support
Subaward Type (Aggregates)	Aggregate of Direct Payments
Total Period Expenditure Amount	\$2,225.00
Total Period Obligation Amount	\$0.00

Expenditure: EN-01756477

Project Name	Admin Support
Subaward Type (Aggregates)	Aggregate of Direct Payments
Total Period Expenditure Amount	\$725.00
Total Period Obligation Amount	\$0.00

Expenditure: EN-01160359

Project Name	Stormwater System
Subaward Type (Aggregates)	Aggregate of Direct Payments
Total Period Expenditure Amount	\$20,804.00
Total Period Obligation Amount	\$24,254.00

Expenditure: EN-01697117

Project Name	Stormwater System
Subaward Type (Aggregates)	Aggregate of Direct Payments
Total Period Expenditure Amount	\$3,450.00
Total Period Obligation Amount	\$0.00

Expenditure: EN-01756631

Project Name	Stormwater System
Subaward Type (Aggregates)	Aggregate of Direct Payments
Total Period Expenditure Amount	\$9,770.00
Total Period Obligation Amount	\$9,770.00

Expenditure: EN-01160406

Project Name	EMS Radio
Subaward Type (Aggregates)	Aggregate of Direct Payments
Total Period Expenditure Amount	\$115,968.00
Total Period Obligation Amount	\$440,332.00

Expenditure: EN-01756632

Project Name	EMS Radio
Subaward Type (Aggregates)	Aggregate of Direct Payments
Total Period Expenditure Amount	\$253,004.00
Total Period Obligation Amount	\$0.00

Expenditure: EN-01160413

Project Name	Mannequins
Subaward Type (Aggregates)	Aggregate of Direct Payments
Total Period Expenditure Amount	\$43,174.00
Total Period Obligation Amount	\$43,174.00

Expenditure: EN-01171854

Project Name	EMS Defibrillators
Subaward Type (Aggregates)	Aggregate of Direct Payments
Total Period Expenditure Amount	\$207,780.00
Total Period Obligation Amount	\$207,780.00

Expenditure: EN-01172029

Project Name	NRI Food Pantry
Subaward Type (Aggregates)	Aggregate of Direct Payments
Total Period Expenditure Amount	\$65,000.00
Total Period Obligation Amount	\$125,000.00

Expenditure: EN-01802317

Project Name	NRI Food Pantry
Subaward Type (Aggregates)	Aggregate of Direct Payments
Total Period Expenditure Amount	\$20,000.00
Total Period Obligation Amount	\$0.00

Expenditure: EN-01172035

Project Name	Small Business Relief

Subaward Type (Aggregates)	Aggregate of Direct Payments
Total Period Expenditure Amount	\$501,569.00
Total Period Obligation Amount	\$558,332.00

Expenditure: EN-01693778

Project Name	Water Line - Grants Mill
Subaward Type (Aggregates)	Aggregate of Direct Payments
Total Period Expenditure Amount	\$149,265.00
Total Period Obligation Amount	\$149,265.00

Expenditure: EN-01693785

Project Name	BF Norton Playground
Subaward Type (Aggregates)	Aggregate of Direct Payments
Total Period Expenditure Amount	\$114,589.00
Total Period Obligation Amount	\$114,589.00

Expenditure: EN-01756637

Project Name	BF Norton Playground
Subaward Type (Aggregates)	Aggregate of Direct Payments
Total Period Expenditure Amount	\$1,904.00
Total Period Obligation Amount	\$1,904.00

Expenditure: EN-01693896

Project Name	Medical Training Simulator
Subaward Type (Aggregates)	Aggregate of Direct Payments
Total Period Expenditure Amount	\$80,397.00
Total Period Obligation Amount	\$80,397.00

Expenditure: EN-01756711

Project Name	Vehicle Purchases
Subaward Type (Aggregates)	Aggregate of Direct Payments
Total Period Expenditure Amount	\$77,588.00
Total Period Obligation Amount	\$77,588.00

Expenditure: EN-01802403

Project Name	Water Infrastructure
Subaward Type (Aggregates)	Aggregate of Direct Payments
Total Period Expenditure Amount	\$417,849.00
Total Period Obligation Amount	\$417,849.00

Report

Revenue Replacement

Is your jurisdiction electing to use the standard allowance of up to \$10 million, not to exceed your total award allocation, for identifying revenue loss?	Yes
Revenue Loss Due to Covid-19 Public Health Emergency	\$10,000,000.00
Were Fiscal Recovery Funds used to make a deposit into a pension fund?	No
Please provide an explanation of how revenue replacement funds were allocated to government services	Stormwater system - \$47,850 awarded; \$12,792 spent to date EMS public radio safety system - \$440,332 awarded; \$114,384 spent to date EMS ultrasound trauma training - \$43,174 awarded; \$0 spent to date EMS defibrillators - \$213,301 awarded; \$206,748 spent to date EMS medical training simulator - \$82,797 awarded; \$80,397 spent to date Northern RI Food Bank - \$125,000 awarded; \$65,000 spent to date Grants Mill water main - \$149,265 awarded; \$149,265 spent to date Admin services - \$20,250 awarded; \$13,425 spent to date Small Business - \$558,332 awarded, \$511,569 spent to date Blackston Valley Advocate - \$65,000 awarded; \$0 spent to date BF Norton Playground - \$215,395 awarded; \$114,589 spent to date Boys/Girls Club - \$350,000 awarded; \$0 spent to date

Overview

Total Obligations	\$2,264,384.00
Total Expenditures	\$2,096,261.00
Total Adopted Budget	\$3,295,789.42
Total Number of Projects	12
Total Number of Subawards	0
Total Number of Expenditures	19

Certification

Authorized Representative Name	Gene Ferrari
Authorized Representative Telephone	(401) 728-2400
Authorized Representative Title	
Authorized Representative Email	gferrari@cumberlandri.org
Submission Date	10/19/2023 3:03 PM