

American Recovery & Reinvestment Act  
 State of Alabama  
**August 2009 Monthly Update Form**

**PLEASE NOTE:**

The fields below have been pre-populated with the information submitted in last month's Monthly Update Form.  
You must complete a form for each and every grant that your agency intends to apply for and/or receive.

**Data reporting range: 2/18/09 to 8/31/09**

Agency/Institution: Public Safety

Date of Submission: August 7, 2009

**The amounts entered below should represent cumulative totals for the life of the Recovery Act program/grant.**

<b>1) Grant Name</b>	Combating Criminal Narcotics Activity - RHID: Gulf Coast HIDTA Southwest Border Interdiction Program Proposal Is this grant/program subject to Section 1512 Reporting? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' and <u>you have been awarded</u> this grant, you must fill out the <i>Internal Section 1512 ARRA Reporting Form</i> that follows.
<b>2) CFDA Number:</b>	16.809
<b>3) Grant Narrative Description:</b>	Type a narrative statement describing the grant/program here.
<b>4) Status of Application:</b>	Applied (pending) You may type more information here.
<b>5) Which type of recipient are you?</b>	Prime Recipient <i>If sub-recipient is chosen, type the name of the Prime Recipient below and indicate if you are a delegated or non-delegated sub-recipient:</i>
<b>6) Application Date:</b>	04/17/09
<b>7) Award Date:</b>	NA
<b>8) Status of Expenditures:</b>	N/A You may type more information here.
<b>9) Actual # of Jobs Created/Retained:</b>	0
<b>10) Description of Types of Actual Jobs Created / Retained:</b>	Type of description of the types of jobs created/retained here.
<b>11) <sup>1</sup>ARRA Funds Awarded:</b>	0
<b>12) <sup>2</sup>ARRA Funds Available:</b>	0
<b>13) <sup>3</sup>ARRA Funds Expended:</b>	0
<b>14) Performance Metric 1 (if applicable)</b>	Percent of essential services maintained without disruption
<b>15) Performance Metric 2 (if applicable)</b>	Number of collaborative partnership established to avoid duplication
<b>16) Performance Metric 3</b>	Number of Drug Trafficking Organizations dismantled and value of

<sup>1</sup>Amount Awarded - the total amount of ARRA Funds that your agency/institution is expecting to receive over the life of the grant/program.

<sup>2</sup>Amount Available - the total current amount of ARRA funds you have received or that is available to your agency/institution at the time of this report. For instance, you may have been awarded a total of \$1,500,000 dollars but may have only received \$50,000.

<sup>3</sup>Amount Expended - total amount of ARRA Funds spent on ARRA projects.

<b>(if applicable)</b>	cash, drugs, other assets seized
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<b>17) Administration of grant/program</b>	Provide details of how program/grant will be administered and/or how funds will be distributed.  Deadline for sub-grantee applications (if applicable)  Selection criteria for sub-grantees (if applicable)  Number of sub-grantees / sub-recipients awarded (if applicable)
<b>Other Information Details</b>	You may type any other comments, questions, etc. here.

**Agency information verified by:** Frances P. Copeland, CFO & Recovery Compliance Officer

**Submit this form to:** [AlabamaStimulus@finance.alabama.gov](mailto:AlabamaStimulus@finance.alabama.gov)

By: **September 10, 2009**

For questions, please call 334.353.2026.

American Recovery & Reinvestment Act  
*State of Alabama*  
**Internal Section 1512 ARRA Reporting Form**

This form will be sent monthly as an addition to the Update Form (page 1) and will serve as internal documentation for your agency, the Finance Department, and the Governor's Office. Upon initial receipt, agencies/institutions are asked to complete only questions that are applicable at this time. The remaining questions will be answered as new reporting information is provided. Once all of the information has been provided, agencies/institutions will be required to update this form only if their reporting information changes. Agencies/institutions must complete this form for each and every grant that your agency/institution acts as a prime or delegated sub-recipient.

**\*\*The information entered below should represent an accurate description of your plans for reporting. This document will be sent on a monthly basis along with the Monthly Update Form for review and/or necessary revisions. \*\***

<p>1) If your agency serves as a prime recipient, has your agency registered in the Central Contractor Registration (CCR) database and further acquired a D-U-N-S number? Registration with <a href="http://www.FederalReporting.gov">www.FederalReporting.gov</a> will require this information.</p>	<p><input checked="" type="checkbox"/> Yes  <input type="checkbox"/> No  D-U-N-S Number 128860215</p>
<p>2) Has your agency registered on <a href="http://www.FederalReporting.gov">www.FederalReporting.gov</a>?</p>	<p>Agencies/Institutions will not be able to provide this information prior to the opening of the Registration period. Registration period begins August 17, 2009. Any Prime or delegated Sub-recipient that receives ARRA award funds before August 17<sup>th</sup> should promptly register with <a href="http://www.FederalReporting.gov">www.FederalReporting.gov</a> at the beginning of the registration period. Prime recipients and delegated Sub-recipients that have not received ARRA award funds by August 17<sup>th</sup>, 2009 will need to register no later than August 31<sup>st</sup>, 2009.</p>
<p>3) Which format will your agency/institution use to submit reports to <a href="http://www.FederalReporting.gov">www.FederalReporting.gov</a>?</p>	<p><input checked="" type="checkbox"/> Online Data Entry form provided on the website  <input type="checkbox"/> Excel Spreadsheet available for download from the website  custom software system extract in XML (Extensible Markup Language)  other comments here.</p>
<p>4) Who will be your agency's reporting official designated to enter information to <a href="http://www.FederalReporting.gov">www.FederalReporting.gov</a>. If you have multiple designated officials, how will you eliminate multiple reporting for the same Grant/Program?</p>	<p><input type="checkbox"/> Single Point of data entry for this Grant/Program  Type the name and contact number of the designated reporting official here.  <input checked="" type="checkbox"/> Multiple Officials reporting Grant/Program information  Shaundra B. Morris, Accounting Manager  Rosemary Perdue, Grants Administration Manager   Communication between the designated officials will eliminate the possibility of multiple reporting.</p>
<p>5) Who will be your agency's data quality review official designated to review the data submitted by your agency? This designee will be required to review information submitted by delegated Sub-recipients.</p>	<p>Fran Copeland, Chief Fiscal Officer, will review data and compare to information in the Accounting System   N/A on Sub-recipients.</p>

<p><b>6) Who will be your agency's data corrections official responsible for making corrections to submitted information during the Data Quality Review Phase?</b>  <b>(Data Quality Review phase for agencies will be from the 11<sup>th</sup> day to the 21<sup>rst</sup> day after the end of each quarter. Only errors flagged by federal agencies will be unlocked for corrections from the 22<sup>nd</sup>-29<sup>th</sup>).</b></p>	<p>One of the two designated officials will enter corrections if necessary within the 21 days allowed for such.</p>
<p><b>7) How will you capture your Sub-recipient or Vendor data elements that will be reported to your agency?</b></p>	<p>N/A - No Sub-recipients.</p>
<p><b>8) Will any sub-grant under this Grant/Program be for an amount less than \$25,000 which would require aggregate reporting? Do you have a reporting mechanism in place for aggregate reporting?</b></p>	<p><input type="checkbox"/> Yes  <input checked="" type="checkbox"/> No</p> <p>Briefly describe what mechanism you will use for aggregate reporting here.</p> <p>Type other comments here.</p>
<p><b>9) Have you or do you plan to delegate any reporting requirements to a Sub-recipient?</b></p>	<p><input type="checkbox"/> Yes  <input checked="" type="checkbox"/> No</p> <p>Type other comments here.</p>
<p><b>10) What agencies/institutions will serve as delegated Sub-recipients and which format will your delegated Sub-recipients submit reports to <a href="http://www.FederalReporting.gov">www.FederalReporting.gov</a>?</b></p>	<p>NA  Click here to select which format.  Type other comments here.</p>
<p><b>11) Please provide the name(s) and contact number(s) for the delegated Sub-recipient's reporting official(s) designated to enter information to <a href="http://www.FederalReporting.gov">www.FederalReporting.gov</a>.</b></p>	<p>Type the name(s) and contact number(s) of the designated reporting official(s) here.</p>
<p><b>12) Please provide the name(s) and contact number(s) for the delegated Sub-recipient's data quality review official(s) designated to review and correct information in <a href="http://www.FederalReporting.gov">www.FederalReporting.gov</a> .</b></p>	<p>Type the name(s) and contact number(s) of the designated data quality review official(s) here.</p>
<p><b>13) Have your agency's delegated Sub-recipients registered on <a href="http://www.FederalReporting.gov">www.FederalReporting.gov</a>?</b></p>	<p>Registration period begins August 17, 2009. Any Prime or delegated Sub-recipient that receives ARRA award funds before August 17<sup>th</sup> should promptly register with <a href="http://www.FederalReporting.gov">www.FederalReporting.gov</a> at the beginning of the registration period. Prime recipients and delegated Sub-recipients that have not received ARRA award funds by August 17<sup>th</sup>, 2009 will need to register no later than August 31<sup>st</sup>, 2009.</p>
<p><b>14) After corrected information is posted to <a href="http://www.Recovery.gov">www.Recovery.gov</a> by the federal agency, how will your agency ensure the timely update of its own recovery page?</b></p>	<p>Forms and information will be submitted by email to agency's Recovery Website Coordinator for submittal to Webmaster.</p>