

**Instructions:** All applicants are required to fill out and submit this worksheet with their application. Incomplete worksheets are terms for application rejection.

If applying for a **Subrecipient Grant Award**, the "Total Need" value will be the total value of the proposed program (existing, new, or expanded) you are proposing to help combat the impacts of COVID for the residents of Everett. This amount will be indentified by the grant reviewer based on the budget documentation submitted and period of performance identified in your application. You must then list all alternate funding sources that have been or are planned to be received and utilized toward **this same proposed program** (e.g., CARES Act Funding, PPP loans, County COVID grants, CBDG funds, etc.).

A	B	C	D	E
Funding Sources	Brief Description of Use	Date Received	Amount Received	Total Need (Total of Column D from Subrecipient Budget + Cap Ex Worksheets)
<b>Total Need (\$value) for intended use of City ARPA SLFRF Grant Funds</b>				
Insurance proceeds				
Charitable Contributions				
Nonprofit Sources				
Other Federal, State, or Local funding sources or grants received (list all below)				
1.)				
2.)				
3.)				
4.)				
5.)				
6.)				
7.)				
<b>SUBTOTALS</b>				
<b>UNMET NEED = ([Column E] - [Subtotal Column D])</b>				

Name of Organization/Applicant: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_