

Quarterly Budget and Expenditure Report under CARES Act Sections 100 (1) Institution 100 (2) and 100 (3) if applicable

Institution Name: _____ Date of Report: _____ Coverage Period: _____

Total Amount of Funds Allocated: Section (a)(1) Institutional: _____ Section (a)(2): _____ Section (a)(3): _____ Fiscal Report

Category

Amount in (1) Institution Dollars

