

SLFRF Compliance Report - SLT-0592-P&E Report-Q3 2022

Report Period : Quarter 3 2022 (July-September)

Recipient Profile

Recipient Information

Recipient UEI	EL5KEUKQ2E85
Recipient TIN	936002301
Recipient Legal Entity Name	Klamath County, Oregon
Recipient Type	Metro City or County
FAIN	
CFDA No./Assistance Listing	
Recipient Address	305 Main Street
Recipient Address 2	
Recipient Address 3	
Recipient City	Klamath Falls
Recipient State/Territory	OR
Recipient Zip5	97601
Recipient Zip+4	
Recipient Reporting Tier	Tier 2. Metropolitan cities and counties with a population below 250,000 residents which received 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: Klamath Basin Water Solution

Project Identification Number	1505-0271-077
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	
Total Cumulative Obligations	\$180,000.00
Total Cumulative Expenditures	\$0.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Public Works and Brown Caldwell feasibility study

Project Name: Smart Sheet Software

Project Identification Number	1505-0271-075
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	
Total Cumulative Obligations	\$1,500.00
Total Cumulative Expenditures	\$1,500.00
Current Period Obligations	\$1,500.00
Current Period Expenditures	\$1,500.00
Project Description	Smart Sheet Software

Project Name: IT Software

Project Identification Number	1505-0271-073
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	
Total Cumulative Obligations	\$165,000.00
Total Cumulative Expenditures	\$0.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	ESRI Software for IT Department \$55,000 annually for 3 years

Project Name: Extension Service Property Move

Project Identification Number	1505-0271-072

Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	
Total Cumulative Obligations	\$929,591.19
Total Cumulative Expenditures	\$929,591.19
Current Period Obligations	\$929,591.19
Current Period Expenditures	\$929,591.19
Project Description	Extension Service District to move into property on S 6th St, offices for additional programs

Project Name: Childcare Property

Project Identification Number	1505-0271-070
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	
Total Cumulative Obligations	\$215,000.00
Total Cumulative Expenditures	\$215,000.00
Current Period Obligations	\$215,000.00
Current Period Expenditures	\$215,000.00
Project Description	Purchase property from Extension Service for Klamath Community College Childcare location

Project Name: REACH, Inc.

Project Identification Number	1505-0271-023
Project Expenditure Category	2-Negative Economic Impacts
Project Expenditure Subcategory	2.10-Assistance to Unemployed or Underemployed Workers (e.g. job training, subsidized employment, employment supports or incentives)
Status To Completion	Completed
Adopted Budget	\$130,000.00
Total Cumulative Obligations	\$130,000.00
Total Cumulative Expenditures	\$130,000.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Job training to persons with disabilities
What Impacted and/or Disproportionally Impacted population does this project primarily serve?	3 Imp HHs that experienced unemployment
Secondary Impacted and/or Disproportionately Impacted populations	11 Imp Classes of NPs designated as negatively economically impacted
Tertiary Impacted and/or Disproportionately Impacted populations	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	Job training program for persons with disabilities
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	Job training program, ensure all safety parameters are in place and met.

Project Name: DA Personnel

Project Identification Number	1505-0271-064
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Not Started
Total Cumulative Obligations	\$363,366.00
Total Cumulative Expenditures	\$0.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	DA Personnel

Project Name: Klamath County Fairgrounds

Project Identification Number	1505-0271-063
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed less than 50%
Total Cumulative Obligations	\$750,000.00
Total Cumulative Expenditures	\$117,952.76
Current Period Obligations	\$0.00
Current Period Expenditures	\$117,952.76
Project Description	Klamath County Fairgrounds Food Truck Court

Project Name: DME Refridgerator

Project Identification Number	1505-0271-061
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Not Started
Total Cumulative Obligations	\$252.00
Total Cumulative Expenditures	\$0.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	DME Refridgerator

Project Name: KRP Data Systems

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Project Identification Number	1505-0271-062
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Not Started
Total Cumulative Obligations	\$25,000.00
Total Cumulative Expenditures	\$0.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	KRP Data Systems Software for 911

Project Name: CDD Building Permits

Project Identification Number	1505-0271-060
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed less than 50%
Total Cumulative Obligations	\$2,000,000.00
Total Cumulative Expenditures	\$194,678.51
Current Period Obligations	\$0.00
Current Period Expenditures	\$181,580.34
Project Description	1/2 price building permits to public through Community Development Department

Project Name: Body Scanner and Mail Scanner

Project Identification Number	1505-0271-065
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed less than 50%
Adopted Budget	\$220,000.00
Total Cumulative Obligations	\$220,000.00
Total Cumulative Expenditures	\$0.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Sheriffs office scanners for mail and body scanner.

Project Name: CDD Long Range Planning

Project Identification Number	1505-0271-055
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	
Adopted Budget	\$100,000.00

Total Cumulative Obligations	\$100,000.00
Total Cumulative Expenditures	\$0.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Long Range Planning for Community Development Department

Project Name: WaterMaster Office

Project Identification Number	1505-0271-059
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed
Total Cumulative Obligations	\$370,000.00
Total Cumulative Expenditures	\$356,920.90
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Crosby Ave Watermaster office relocation

Project Name: BMX Water Meter

Project Identification Number	1505-0271-057
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed
Total Cumulative Obligations	\$4,397.50
Total Cumulative Expenditures	\$4,397.50
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	BMX Water Meter with City of Klamath Falls

Project Name: Code Enforcement Property Cleanup

Project Identification Number	1505-0271-050
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed less than 50%
Adopted Budget	\$100,000.00
Total Cumulative Obligations	\$100,000.00
Total Cumulative Expenditures	\$0.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00

Project Description	Code Enforcement Property Cleanup
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Project Name: Code Enforcement Vehicles

Project Identification Number	1505-0271-051
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed less than 50%
Adopted Budget	\$90,000.00
Total Cumulative Obligations	\$90,000.00
Total Cumulative Expenditures	\$0.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	2 Vehicles for Code Enforcement

Project Name: HR Recruitment tool/software

Project Identification Number	1505-0271-054
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed
Adopted Budget	\$9,900.00
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$9,900.00
Total Cumulative Expenditures	\$9,900.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Recruitment tool/software for Human Resources

Project Name: Premium Pay County Employees

Project Identification Number	1505-0271-049
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed
Adopted Budget	\$138,174.93
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$138,174.93
Total Cumulative Expenditures	\$138,174.93
Current Period Obligations	\$0.00

Current Period Expenditures	\$0.00
Project Description	8 hours pay County Employees

Project Name: Grant Conference

Project Identification Number	1505-0271-067
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed
Total Cumulative Obligations	\$2,254.36
Total Cumulative Expenditures	\$2,254.36
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Grant conference on Federal Grants in Portland, OR hosted by Thompson Grants

Project Name: F15 Jet Display with City of Klamath Falls

Project Identification Number	1505-0271-068
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed less than 50%
Adopted Budget	\$600,000.00
Total Cumulative Obligations	\$300,000.00
Total Cumulative Expenditures	\$0.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	F15 Display representing Kingsley Field and military units at Veterans Park as Tourism attraction off Hwy 97

Project Name: OSU Economic Study Water Deliveries

Project Identification Number	1505-0271-066
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed 50% or more
Total Cumulative Obligations	\$15,000.00
Total Cumulative Expenditures	\$0.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	BOCC water delivery study

Project Name: Healthy Klamath Roundabout

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Project Identification Number	15050271069
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed
Total Cumulative Obligations	\$74,000.00
Total Cumulative Expenditures	\$74,000.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	County tourism art project

Project Name: Basin United

Project Identification Number	1505-0271-053
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed
Total Cumulative Obligations	\$70,000.00
Total Cumulative Expenditures	\$70,000.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Tourism Project at Mikes Fieldhouse

Project Name: Klamath Freedom Foundation

Project Identification Number	1505-0271-052
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$25,000.00
Total Cumulative Expenditures	\$25,000.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Tourism project

Project Name: 1/2 Salary Grant Administrator

Project Identification Number	1505-0271-048
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed less than 50%

Total Cumulative Obligations	\$236,000.00
Total Cumulative Expenditures	\$41,721.57
Current Period Obligations	\$0.00
Current Period Expenditures	\$12,432.77
Project Description	1/2 Salary for Grant Manager

Project Name: CDD Digitization

Project Identification Number	1505-0271-031
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed less than 50%
Adopted Budget	\$165,345.00
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$165,345.00
Total Cumulative Expenditures	\$6,825.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Digitization for CDD

Project Name: Community Corrections Digitization

Project Identification Number	1505-0271-032
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed 50% or more
Adopted Budget	\$16,927.20
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$16,927.20
Total Cumulative Expenditures	\$10,475.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Community Corrections Digitization

Project Name: DDS Digitization Software/Hardware

Project Identification Number	1505-0271-033
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed

Adopted Budget	\$6,100.55
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$6,100.55
Total Cumulative Expenditures	\$6,100.55
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Reimbursement for Software/Hardware DDS

Project Name: DDS Digitization

Project Identification Number	1505-0271-034
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed
Adopted Budget	\$18,600.00
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$18,600.00
Total Cumulative Expenditures	\$12,841.47
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Temp Employee DDS Digitization

Project Name: Data Cloud Solutions

Project Identification Number	1505-0271-030
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed
Adopted Budget	\$132,220.00
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$132,220.00
Total Cumulative Expenditures	\$59,010.76
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Software needed to work from field; Data Cloud Solutions - Assessors Office

Project Name: Generator for PH Med Room

Project Identification Number	1505-0271-037
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Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed less than 50%
Adopted Budget	\$20,000.00
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$20,000.00
Total Cumulative Expenditures	\$0.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Generator for Public Health

Project Name: Public Works Digitization

Project Identification Number	1505-0271-039
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Cancelled
Adopted Budget	\$50,000.00
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$0.00
Total Cumulative Expenditures	\$0.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Digitization for Public Works

Project Name: Tax Lot Maps Digitization

Project Identification Number	1505-0271-040
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed 50% or more
Adopted Budget	\$148,000.00
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$148,000.00
Total Cumulative Expenditures	\$94,387.42
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Surveyor - Tax Lot Maps Digitization

Project Name: HR Digitization

Project Identification Number	1505-0271-035
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed less than 50%
Adopted Budget	\$7,000.00
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$7,000.00
Total Cumulative Expenditures	\$978.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Human Resources Digitization

Project Name: Public Health Refrigerator and Freezer

Project Identification Number	1505-0271-038
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$3,758.00
Total Cumulative Expenditures	\$3,758.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Freezer for Public Health; existing would move to jail facility

Project Name: Medical Examiner

Project Identification Number	1505-0271-041
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$43,892.10
Total Cumulative Expenditures	\$43,892.10
Current Period Obligations	\$0.00

Current Period Expenditures	\$0.00
Project Description	Medical Examiner - DA office

Project Name: IT Wages for COVID

Project Identification Number	1505-0271-042
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed
Adopted Budget	\$125,000.00
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$125,000.00
Total Cumulative Expenditures	\$53,411.83
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	IT wages related to working from home and COVID related tasks

Project Name: Printer Assessor

Project Identification Number	1505-0271-044
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$7,242.80
Total Cumulative Expenditures	\$7,242.80
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Printer to scan maps to Helion; allows public electronic access

Project Name: Printer CDD

Project Identification Number	1505-0271-045
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed
Adopted Budget	\$8,807.00
Program Income Earned	\$0.00
Program Income Expended	\$0.00

Total Cumulative Obligations	\$8,807.00
Total Cumulative Expenditures	\$8,807.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Printer to scan maps to allow citizen access from home

Project Name: Basin Telecom - IT

Project Identification Number	1505-0271-043
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed
Adopted Budget	\$12,980.00
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$12,980.00
Total Cumulative Expenditures	\$12,980.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Basin Telecom purchases to enhance Polycom systems - IT

Project Name: Public Works COVID Exposure

Project Identification Number	1505-0271-046
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed
Adopted Budget	\$10,000.00
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$10,000.00
Total Cumulative Expenditures	\$10,000.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Janitorial Services special cleaning in Public Works after exposure to COVID

Project Name: ASUS Laptop Room 219

Project Identification Number	1505-0271-047
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed

Adopted Budget	\$1,052.63
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$1,052.63
Total Cumulative Expenditures	\$1,052.63
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Laptop for Room 219

Project Name: Klamath Community College - Apprenticeship

Project Identification Number	1505-0271-014
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$100,000.00
Total Cumulative Expenditures	\$100,000.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Apprenticeship Center

Project Name: Ed Staub and Sons Petroleum, Inc.

Project Identification Number	1505-0271-008
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$200,000.00
Total Cumulative Expenditures	\$200,000.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Rail offloading

Project Name: Lobo Truss LCC

Project Identification Number	1505-0271-017
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services

Status To Completion	Completed
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$250,000.00
Total Cumulative Expenditures	\$250,000.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Boom / Crane Truck

Project Name: J&P Wholesale

Project Identification Number	1505-0271-011
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$200,000.00
Total Cumulative Expenditures	\$200,000.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Rail and offloading

Project Name: Klamath County Chamber of Commerce Job Fair

Project Identification Number	1505-0271-002
Project Expenditure Category	2-Negative Economic Impacts
Project Expenditure Subcategory	2.10-Assistance to Unemployed or Underemployed Workers (e.g. job training, subsidized employment, employment supports or incentives)
Status To Completion	Completed
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$20,000.00
Total Cumulative Expenditures	\$20,000.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Job Enhancement/Training
What Impacted and/or Disproportionally Impacted population does this project primarily serve?	1 Imp General Public
Secondary Impacted and/or Disproportionately Impacted populations	3 Imp HHs that experienced unemployment
Brief description of structure and objectives of assistance	

program(s), including public health or negative economic impact experienced	Job fair for community/public
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	General public job fair for community

Project Name: Transformations Wellness Center

Project Identification Number	1505-0271-029
Project Expenditure Category	1-Public Health
Project Expenditure Subcategory	1.13-Substance Use Services
Status To Completion	Completed less than 50%
Adopted Budget	\$4,500,000.00
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$500,000.00
Total Cumulative Expenditures	\$500,000.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	New residential substance use disorder (SUD) treatment facility.
What is the Total expected capital expenditure, including pre-development costs, if applicable	\$4,500,000.00
Type of capital expenditures, based on the following enumerated uses	Behavioral health facilities and equipment
What Impacted and/or Disproportionately Impacted population does this project primarily serve?	1 Imp General Public
Secondary Impacted and/or Disproportionately Impacted populations	2 Imp Low or moderate income HHs or populations
Tertiary Impacted and/or Disproportionately Impacted populations	3 Imp HHs that experienced unemployment
Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced	Mental health; addiction recovery
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	Relocating to assist more individuals

Project Name: SCOEDD

Project Identification Number	1505-0271-027
Project Expenditure Category	6-Revenue Replacement
Project Expenditure Subcategory	6.1-Provision of Government Services
Status To Completion	Completed 50% or more
Program Income Earned	\$0.00
Program Income Expended	\$0.00

Total Cumulative Obligations	\$750,000.00
Total Cumulative Expenditures	\$614,080.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Klamath Housing Rehab

Project Name: Citizens for Safe Schools

Project Identification Number	1505-0271-006
Project Expenditure Category	2-Negative Economic Impacts
Project Expenditure Subcategory	2.13-Healthy Childhood Environments: Services to Foster Youth or Families Involved in Child Welfare System
Status To Completion	Completed
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$50,000.00
Total Cumulative Expenditures	\$50,000.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Assistance to underserves youth populations
What Impacted and/or Disproportionally Impacted population does this project primarily serve?	9 Imp Classes of SBs designated as negatively economically impacted
Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced	Program to assist children and families
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	Revenue loss replacement due to COVID; program assistance for students and families

Project Name: Ross Ragland Theater

Project Identification Number	1505-0271-026
Project Expenditure Category	2-Negative Economic Impacts
Project Expenditure Subcategory	2.34-Assistance to Impacted Nonprofit Organizations (Impacted or Disproportionately Impacted)
Status To Completion	Completed
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$100,000.00
Total Cumulative Expenditures	\$100,000.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Theater assistance due to lost revenue; safety measures increased; HVAC update

What Impacted and/or Disproportionally Impacted population does this project primarily serve?	12 Imp Travel tourism or hospitality sectors
Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced	Upgrade to theater HVAC; revenue replacement due to COVID
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	HVAC ventilation system update/replacement
Number of Non-Profits served (by program if recipient establishes multiple separate non-profit assistance programs)	1

Project Name: Red Cross

Project Identification Number	1505-0271-024
Project Expenditure Category	1-Public Health
Project Expenditure Subcategory	1.14-Other Public Health Services
Status To Completion	Completed
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$10,000.00
Total Cumulative Expenditures	\$10,000.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Blood mobile vehicle
What is the Total expected capital expenditure, including pre-development costs, if applicable	\$10,000.00
Type of capital expenditures, based on the following enumerated uses	Medical equipment and facilities
What Impacted and/or Disproportionally Impacted population does this project primarily serve?	1 Imp General Public
Secondary Impacted and/or Disproportionately Impacted populations	1 Imp General Public
Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced	Blood mobile purchase to support local efforts
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	Red Cross blood mobile

Project Name: Oregon Tech Foundation

Project Identification Number	1505-0271-022
Project Expenditure Category	1-Public Health
Project Expenditure Subcategory	1.12-Mental Health Services
Status To Completion	Completed less than 50%
Adopted Budget	\$912,354.00

Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$170,000.00
Total Cumulative Expenditures	\$170,000.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Oregon Institute of Technology Behavior Improvement Group Applied Behavior Analysis
What Impacted and/or Disproportionally Impacted population does this project primarily serve?	1 Imp General Public
Secondary Impacted and/or Disproportionately Impacted populations	2 Imp Low or moderate income HHs or populations
Tertiary Impacted and/or Disproportionately Impacted populations	5 Imp HHs that qualify for certain federal programs
Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced	Behavioral health; mental health services; youth services
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	Relocating for larger space to accommodate BIG ABA Health Clinic

Project Name: Lost River Booster Club

Project Identification Number	1505-0271-021
Project Expenditure Category	2-Negative Economic Impacts
Project Expenditure Subcategory	2.2-Household Assistance: Rent, Mortgage, and Utility Aid
Status To Completion	Completed less than 50%
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$250,000.00
Total Cumulative Expenditures	\$0.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Community Center at Lost River
What is the Total expected capital expenditure, including pre-development costs, if applicable	\$2,250,000.00
Type of capital expenditures, based on the following enumerated uses	Schools and other educational facilities
What Impacted and/or Disproportionally Impacted population does this project primarily serve?	11 Imp Classes of NPs designated as negatively economically impacted
Secondary 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	Community building with school in rural area of Klamath County

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	Social distancing and students access to community building and programs
Number of households served (by program if recipient establishes multiple separate household assistance programs)	0

Project Name: Klamath Works

Project Identification Number	1505-0271-020
Project Expenditure Category	2-Negative Economic Impacts
Project Expenditure Subcategory	2.10-Assistance to Unemployed or Underemployed Workers (e.g. job training, subsidized employment, employment supports or incentives)
Status To Completion	Completed
Adopted Budget	\$275,000.00
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$275,000.00
Total Cumulative Expenditures	\$275,000.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Purchase and rehabilitate a house with the supported work crew at Klamath Works.
What is the Total expected capital expenditure, including pre-development costs, if applicable	\$70,734.13
Type of capital expenditures, based on the following enumerated uses	Affordable housing, supportive housing, or recovery housing
What Impacted and/or Disproportionally Impacted population does this project primarily serve?	25 Dis Imp NPs operating in Qualified Census Tracts
Secondary Impacted and/or Disproportionately Impacted populations	3 Imp HHs that experienced unemployment
Tertiary Impacted and/or Disproportionately Impacted populations	11 Imp Classes of NPs designated as negatively economically impacted
Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced	Klamath Works to create job training program with emphasis on creating housing for unemployed population
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	Housing for un/under employed population; creating jobs program and housing

Project Name: Klamath Community Youth Sports Complex

Project Identification Number	1505-0271-016
Project Expenditure Category	2-Negative Economic Impacts
Project Expenditure Subcategory	2.22-Strong Healthy Communities: Neighborhood Features that Promote Health and Safety
Status To Completion	Not Started

Adopted Budget	\$655,000.00
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$55,000.00
Total Cumulative Expenditures	\$0.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Hands-free restrooms
What is the Total expected capital expenditure, including pre-development costs, if applicable	\$655,000.00
Type of capital expenditures, based on the following enumerated uses	Parks, green spaces, recreational facilities, sidewalks

Project Name: Klamath Film

Project Identification Number	1505-0271-018
Project Expenditure Category	2-Negative Economic Impacts
Project Expenditure Subcategory	2.34-Assistance to Impacted Nonprofit Organizations (Impacted or Disproportionately Impacted)
Status To Completion	Completed
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$3,000.00
Total Cumulative Expenditures	\$3,000.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	General operation support to compensate for revenue lost during the COVID-19 pandemic. Assist payroll and operations.
What Impacted and/or Disproportionately Impacted population does this project primarily serve?	10 Imp NPs that experienced a negative economic impact specify
Secondary Impacted and/or Disproportionately Impacted populations	1 Imp General Public
Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced	Non profit revenue loss due to COVID
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	Non profit could not complete business due to COVID
Number of Non-Profits served (by program if recipient establishes multiple separate non-profit assistance programs)	1

Project Name: Klamath Basin Senior Citizens' Center

Project Identification Number	1505-0271-012

Project Expenditure Category	2-Negative Economic Impacts
Project Expenditure Subcategory	2.22-Strong Healthy Communities: Neighborhood Features that Promote Health and Safety
Status To Completion	Completed
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$60,000.00
Total Cumulative Expenditures	\$60,000.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Touch free bathrooms, ADA compliant
What is the Total expected capital expenditure, including pre-development costs, if applicable	\$112,000.00
Type of capital expenditures, based on the following enumerated uses	Improvements to existing facilities
What Impacted and/or Disproportionally Impacted population does this project primarily serve?	10 Imp NPs that experienced a negative economic impact specify
Secondary Impacted and/or Disproportionately Impacted populations	1 Imp General Public
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	Senior Citizens' Center meals on wheels programs
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	Bathroom modification and upgrade for hands free facility

Project Name: Healthy Klamath

Project Identification Number	1505-0271-010
Project Expenditure Category	2-Negative Economic Impacts
Project Expenditure Subcategory	2.22-Strong Healthy Communities: Neighborhood Features that Promote Health and Safety
Status To Completion	Completed less than 50%
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$125,000.00
Total Cumulative Expenditures	\$125,000.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	ADA Park at Moore Park
What is the Total expected capital expenditure, including pre-development costs, if applicable	\$800,000.00

Type of capital expenditures, based on the following enumerated uses	Parks, green spaces, recreational facilities, sidewalks
What Impacted and/or Disproportionally Impacted population does this project primarily serve?	1 Imp General Public
Secondary 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	ADA accessible park in UGB, QCT
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	Social distancing and ADA compliance; QCT area.

Project Name: Friends of the Children Klamath Basin

Project Identification Number	1505-0271-009
Project Expenditure Category	2-Negative Economic Impacts
Project Expenditure Subcategory	2.37-Economic Impact Assistance: Other
Status To Completion	Completed
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$50,000.00
Total Cumulative Expenditures	\$50,000.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Purchase larger space for "clubhouse" to adequately support staff, students, and admin.
What is the Total expected capital expenditure, including pre-development costs, if applicable	\$367,910.52
Type of capital expenditures, based on the following enumerated uses	Schools and other educational facilities
What Impacted and/or Disproportionally Impacted population does this project primarily serve?	6 Imp For services to address lost instructional time in K-12 schools
Secondary Impacted and/or Disproportionately Impacted populations	16 Dis Imp HHs that qualify for certain federal programs
Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced	Adequate space for Friends of the Children program to mentor the students appropriately.
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	Purchase and renovation of larger space for COVID protocols.

Project Name: D&G Holdings Northwest LLC dba Crazy R Pizza

Project Identification Number	1505-0271-007
Project Expenditure Category	2-Negative Economic Impacts
Project Expenditure Subcategory	2.29-Loans or Grants to Mitigate Financial Hardship

Status To Completion	Completed
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$20,000.00
Total Cumulative Expenditures	\$20,000.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Recover and continue operation of restaurant due to the negative impact of COVID-19 restrictions
What Impacted and/or Disproportionally Impacted population does this project primarily serve?	8 Imp SBs that experienced a negative economic impact
Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced	Small business revenue loss
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	Small business revenue loss
Number of small businesses served (by program if recipient establishes multiple separate small businesses assistance programs)	1

Project Name: Chemult Community Tourism Association

Project Identification Number	1505-0271-005
Project Expenditure Category	2-Negative Economic Impacts
Project Expenditure Subcategory	2.35-Aid to Tourism Travel or Hospitality
Status To Completion	Cancelled
Adopted Budget	\$50,000.00
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$0.00
Total Cumulative Expenditures	\$0.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Tourists to stop and shop in Chemult while developing the park as a place for families to enjoy and relax as they shop in Chemult.
What Impacted and/or Disproportionally Impacted population does this project primarily serve?	12 Imp Travel tourism or hospitality sectors
Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced	Park in remote area of County.
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	Project cancelled.

Project Name: Teen CERT

Project Identification Number	1505-0271-028
Project Expenditure Category	1-Public Health
Project Expenditure Subcategory	1.14-Other Public Health Services
Status To Completion	Completed
Adopted Budget	\$8,000.00
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$8,000.00
Total Cumulative Expenditures	\$8,000.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Henley High School (Klamath County School District) teen program to assist Klamath County CERT with emergency preparedness.
What Impacted and/or Disproportionally Impacted population does this project primarily serve?	6 Imp For services to address lost instructional time in K-12 schools
Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced	Teen CERT program in conjunction with Klamath County CERT program. Assist the community with emergency response.
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	Teen Community Emergency Response Team

Project Name: CERT - Community Emergency Response Team Klamath County

Project Identification Number	1505-0271-004
Project Expenditure Category	1-Public Health
Project Expenditure Subcategory	1.14-Other Public Health Services
Status To Completion	Completed
Adopted Budget	\$17,000.00
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$17,000.00
Total Cumulative Expenditures	\$17,000.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Assist community with emergency preparedness.
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	Community Emergency Response Team program that assists community in disaster relief.

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	Provides assistance to disaster relief, provides training to the Teen CERT program.
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Project Name: CASA for Children of Klamath County

Project Identification Number	1505-0271-003
Project Expenditure Category	2-Negative Economic Impacts
Project Expenditure Subcategory	2.13-Healthy Childhood Environments: Services to Foster Youth or Families Involved in Child Welfare System
Status To Completion	Completed
Adopted Budget	\$50,000.00
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$50,000.00
Total Cumulative Expenditures	\$50,000.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	Provide evidence-based informed services to children and youth involved with the child welfare system, foster care. Increase the number of volunteers, administrative and operating expenses.
What Impacted and/or Disproportionally Impacted population does this project primarily serve?	7 Imp Other HHs or populations that experienced a negative economic
Secondary Impacted and/or Disproportionately Impacted populations	6 Imp For services to address lost instructional time in K-12 schools
Tertiary Impacted and/or Disproportionately Impacted populations	10 Imp NPs that experienced a negative economic impact specify
Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced	Providing Court Appointed Special Advocates to children and families in the foster care program
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	Program objectives reached

Subrecipients

Subrecipient Name: Klamath Community Youth Sports Complex

TIN	931226388
Unique Entity Identifier	
POC Email Address	mikereeder@charter.net
Address Line 1	4500 Foothills Blvd
Address Line 2	
Address Line 3	
City	Klamath Falls
State	OR
Zip	97603
Zip+4	
Entity Type	Subrecipient
Is the Recipient Registered in SAM.Gov?	No
In the preceding fiscal year, did recipient receive 80% or more of its annual gross revenue from federal funds?	No
In the preceding fiscal year, did recipient receive \$25 million or more of its annual gross revenue from federal funds?	No

Subrecipient Name: American Red Cross

TIN	530196605
Unique Entity Identifier	
POC Email Address	davis.schaeffer@redcross.org
Address Line 1	3131 N. Vancouver Ave
Address Line 2	
Address Line 3	
City	Portland
State	OR
Zip	97227
Zip+4	
Entity Type	Contractor
Is the Recipient Registered in SAM.Gov?	Yes

Subrecipient Name: Oregon Tech Foundation, Inc

TIN	
Unique Entity Identifier	RF5MNKE4GL27
POC Email Address	krista.darrah@oit.edu
Address Line 1	3201 Campus Drive

Address Line 2	
Address Line 3	
City	Klamath Falls
State	OR
Zip	97601
Zip+4	
Entity Type	Subrecipient
Is the Recipient Registered in SAM.Gov?	Yes

Subrecipient Name: REACH, Inc.

TIN	943038729
Unique Entity Identifier	
POC Email Address	ronmoe@reachkfalls.com
Address Line 1	2350 Maywood Dr
Address Line 2	
Address Line 3	
City	Klamath Falls
State	OR
Zip	97601
Zip+4	
Entity Type	Subrecipient
Is the Recipient Registered in SAM.Gov?	No
In the preceding fiscal year, did recipient receive 80% or more of its annual gross revenue from federal funds?	No
In the preceding fiscal year, did recipient receive \$25 million or more of its annual gross revenue from federal funds?	No

Subrecipient Name: CASA for Children of Klamath County

TIN	931261640
Unique Entity Identifier	
POC Email Address	karri.mirande@klamathfallscasa.org
Address Line 1	731 Main Street, Suite 202
Address Line 2	
Address Line 3	
City	Klamath Falls
State	OR
Zip	97601
Zip+4	
Entity Type	
Is the Recipient Registered in SAM.Gov?	Yes

Subrecipient Name: Klamath County CERT

TIN	853272513
Unique Entity Identifier	
POC Email Address	rmiller@klamathcounty.org
Address Line 1	2543 Shasta Way
Address Line 2	
Address Line 3	
City	Klamath Falls
State	OR
Zip	97603
Zip+4	
Entity Type	
Is the Recipient Registered in SAM.Gov?	Yes

Subrecipient Name: Klamath County School District

TIN	936000543
Unique Entity Identifier	
POC Email Address	randalla@kcsd.k12.or.us
Address Line 1	2845 Greensprings Dr
Address Line 2	
Address Line 3	
City	Klamath Falls
State	OR
Zip	97601
Zip+4	
Entity Type	
Is the Recipient Registered in SAM.Gov?	Yes

Subrecipient Name: Klamath Film

TIN	455455983
Unique Entity Identifier	
POC Email Address	exec@klamathfilm.org
Address Line 1	PO Box 1511
Address Line 2	
Address Line 3	
City	Klamath Falls
State	OR
Zip	97601

Zip+4	
Entity Type	
Is the Recipient Registered in SAM.Gov?	N/A

Subrecipient Name: South Central Oregon Economic Development District

TIN	134341369
Unique Entity Identifier	
POC Email Address	denise@scoedd.org
Address Line 1	PO Box 1529
Address Line 2	
Address Line 3	
City	Klamath Falls
State	OR
Zip	97601
Zip+4	
Entity Type	Subrecipient
Is the Recipient Registered in SAM.Gov?	N/A

Subrecipient Name: Friends of the Children Klamath Basin

TIN	
Unique Entity Identifier	WXBTKK66UAJ4
POC Email Address	amanda@friendsklamath.org
Address Line 1	3837 Altamont
Address Line 2	
Address Line 3	
City	Klamath Falls
State	OR
Zip	97603
Zip+4	
Entity Type	
Is the Recipient Registered in SAM.Gov?	Yes

Subrecipient Name: Ross Ragland Theater

TIN	
Unique Entity Identifier	
POC Email Address	exec.director@ragland.org
Address Line 1	200 N. 7th Street
Address Line 2	
Address Line 3	

City	Klamath Falls
State	OR
Zip	97601
Zip+4	
Entity Type	
Is the Recipient Registered in SAM.Gov?	Yes

Subrecipient Name: Transformations Wellness Center

TIN	
Unique Entity Identifier	Q2WPAK1N91J4
POC Email Address	barb.heath@transformwc.org
Address Line 1	3647 HWY 39
Address Line 2	
Address Line 3	
City	Klamath Falls
State	OR
Zip	97603
Zip+4	
Entity Type	Subrecipient
Is the Recipient Registered in SAM.Gov?	Yes

Subrecipient Name: Ed Staub and Sons Petroleum, Inc.

TIN	
Unique Entity Identifier	
POC Email Address	jared.staub@edstaub.com
Address Line 1	1301 Esplanade Ave
Address Line 2	
Address Line 3	
City	Klamath Falls
State	OR
Zip	97601
Zip+4	
Entity Type	
Is the Recipient Registered in SAM.Gov?	Yes

Subrecipient Name: Juhl Enterprises Inc

TIN	930878233
Unique Entity Identifier	
POC Email Address	jake@juhline.com

Address Line 1	PO Box 5250
Address Line 2	
Address Line 3	
City	Klamath Falls
State	OR
Zip	97601
Zip+4	
Entity Type	
Is the Recipient Registered in SAM.Gov?	No
In the preceding fiscal year, did recipient receive 80% or more of its annual gross revenue from federal funds?	No
In the preceding fiscal year, did recipient receive \$25 million or more of its annual gross revenue from federal funds?	No

Subrecipient Name: Lobo Truss LCC

TIN	271712980
Unique Entity Identifier	
POC Email Address	jake@juhline.com
Address Line 1	3300 Memorial Dr
Address Line 2	
Address Line 3	
City	Klamath Falls
State	OR
Zip	97601
Zip+4	
Entity Type	
Is the Recipient Registered in SAM.Gov?	No
In the preceding fiscal year, did recipient receive 80% or more of its annual gross revenue from federal funds?	No
In the preceding fiscal year, did recipient receive \$25 million or more of its annual gross revenue from federal funds?	No

Subrecipient Name: Klamath Community College

TIN	931211933
Unique Entity Identifier	
POC Email Address	massie@klamathcc.edu
Address Line 1	7390 South 6th St
Address Line 2	
Address Line 3	
City	Klamath Falls
State	OR

Zip	97603
Zip+4	
Entity Type	Subrecipient
Is the Recipient Registered in SAM.Gov?	No
In the preceding fiscal year, did recipient receive 80% or more of its annual gross revenue from federal funds?	No
In the preceding fiscal year, did recipient receive \$25 million or more of its annual gross revenue from federal funds?	No

Subrecipient Name: Citizens for Safe Schools

TIN	931292596
Unique Entity Identifier	
POC Email Address	rpfeifer@citizensforsafeschools.org
Address Line 1	PO BOx 243
Address Line 2	
Address Line 3	
City	KlamathFalls
State	OR
Zip	97601
Zip+4	
Entity Type	Subrecipient
Is the Recipient Registered in SAM.Gov?	No
In the preceding fiscal year, did recipient receive 80% or more of its annual gross revenue from federal funds?	No
In the preceding fiscal year, did recipient receive \$25 million or more of its annual gross revenue from federal funds?	No

Subrecipient Name: Klamath Works, Inc

TIN	811337449
Unique Entity Identifier	
POC Email Address	joy@klamathworks.com
Address Line 1	1930 South 6th St
Address Line 2	
Address Line 3	
City	Klamath Falls
State	OR
Zip	97601
Zip+4	
Entity Type	Subrecipient
Is the Recipient Registered in SAM.Gov?	No

In the preceding fiscal year, did recipient receive 80% or more of its annual gross revenue from federal funds?	No
In the preceding fiscal year, did recipient receive \$25 million or more of its annual gross revenue from federal funds?	No

Subrecipient Name: Healthy Klamath

TIN	930946020
Unique Entity Identifier	
POC Email Address	merritt.driscoll@healthyklamath.org
Address Line 1	2865 Daggett Ave
Address Line 2	
Address Line 3	
City	Klamath Falls
State	OR
Zip	97601
Zip+4	
Entity Type	Subrecipient
Is the Recipient Registered in SAM.Gov?	No
In the preceding fiscal year, did recipient receive 80% or more of its annual gross revenue from federal funds?	No
In the preceding fiscal year, did recipient receive \$25 million or more of its annual gross revenue from federal funds?	No

Subrecipient Name: Klamath Basin Senior Citizens' Center Inc

TIN	460716639
Unique Entity Identifier	
POC Email Address	marc.kane@kbscc.org
Address Line 1	2045 Arthur St
Address Line 2	
Address Line 3	
City	Klamath Falls
State	OR
Zip	97603
Zip+4	
Entity Type	Subrecipient
Is the Recipient Registered in SAM.Gov?	No
In the preceding fiscal year, did recipient receive 80% or more of its annual gross revenue from federal funds?	No
In the preceding fiscal year, did recipient receive \$25 million or more of its annual gross revenue from federal funds?	No

Subrecipient Name: REACH

TIN	943038729
Unique Entity Identifier	
POC Email Address	ronmoe@reachkfalls.com
Address Line 1	2350 Maywood Dr
Address Line 2	
Address Line 3	
City	Klamath Falls
State	OR
Zip	97601
Zip+4	
Entity Type	Subrecipient
Is the Recipient Registered in SAM.Gov?	No
In the preceding fiscal year, did recipient receive 80% or more of its annual gross revenue from federal funds?	No
In the preceding fiscal year, did recipient receive \$25 million or more of its annual gross revenue from federal funds?	No

Subrecipient Name: Lost River Booster Club

TIN	931127652
Unique Entity Identifier	
POC Email Address	lostrivercommunitycenter@gmail.com
Address Line 1	23330 Highway 50
Address Line 2	
Address Line 3	
City	Merrill
State	OR
Zip	97633
Zip+4	
Entity Type	Subrecipient
Is the Recipient Registered in SAM.Gov?	No
In the preceding fiscal year, did recipient receive 80% or more of its annual gross revenue from federal funds?	No
In the preceding fiscal year, did recipient receive \$25 million or more of its annual gross revenue from federal funds?	No

Subrecipient Name: Chemult Community and Tourims Association

TIN	931215464
Unique Entity Identifier	
POC Email Address	lori.henry@live.com
Address Line 1	PO BOx 33

Address Line 2	
Address Line 3	
City	Chemult
State	OR
Zip	97331
Zip+4	
Entity Type	Subrecipient
Is the Recipient Registered in SAM.Gov?	No
In the preceding fiscal year, did recipient receive 80% or more of its annual gross revenue from federal funds?	No
In the preceding fiscal year, did recipient receive \$25 million or more of its annual gross revenue from federal funds?	No

Subawards

Subaward No: 1505-0271-023

Subaward Type	Grant: Lump Sum Payment(s)
Subaward Obligation	\$130,000.00
Subaward Date	9/23/2021
Place of Performance Address 1	2350 Maywood Dr
Place of Performance Address 2	
Place of Performance Address 3	
Place of Performance City	Klamath Falls
Place of Performance State	OR
Place of Performance Zip	97601
Place of Performance Zip+4	
Description	Job training program for persons with disabilities
Subrecipient	REACH, Inc.
Period of Performance Start	11/23/2021
Period of Performance End	12/31/2026

Subaward No: 1505-0271-003

Subaward Type	Subaward
Subaward Obligation	\$50,000.00
Subaward Date	11/23/2021
Place of Performance Address 1	PO Box 243
Place of Performance Address 2	
Place of Performance Address 3	
Place of Performance City	Klamath Falls
Place of Performance State	OR
Place of Performance Zip	97601
Place of Performance Zip+4	
Description	Underserved and disadvantaged youth in foster care system
Subrecipient	CASA for Children of Klamath County
Period of Performance Start	11/23/2021
Period of Performance End	12/31/2026

Subaward No: 1505-0271-009

Subaward Type	Subaward
Subaward Obligation	\$50,000.00
Subaward Date	9/23/2021

Place of Performance Address 1	3837 Altamont Dr
Place of Performance Address 2	
Place of Performance Address 3	
Place of Performance City	Klamath Falls
Place of Performance State	OR
Place of Performance Zip	97603
Place of Performance Zip+4	
Description	Expansion of facility for increase of students and staff
Subrecipient	Friends of the Children Klamath Basin
Period of Performance Start	11/2/2021
Period of Performance End	12/31/2021

Subward No: 1505-0271-010

Subaward Type	Grant: Lump Sum Payment(s)
Subaward Obligation	\$125,000.00
Subaward Date	9/23/2021
Place of Performance Address 1	2865 Daggett Ave
Place of Performance Address 2	
Place of Performance Address 3	
Place of Performance City	Klamath Falls
Place of Performance State	OR
Place of Performance Zip	97601
Place of Performance Zip+4	
Description	Create and build ADA accessible playground at Moore Park in Klamath Falls, within the QTC.
Subrecipient	Healthy Klamath
Period of Performance Start	1/1/2022
Period of Performance End	12/31/2024

Subward No: 1505-0271-012

Subaward Type	Grant: Lump Sum Payment(s)
Subaward Obligation	\$60,000.00
Subaward Date	9/23/2021
Place of Performance Address 1	2045 Arthur St
Place of Performance Address 2	
Place of Performance Address 3	
Place of Performance City	Klamath Falls
Place of Performance State	OR
Place of Performance Zip	97601

Place of Performance Zip+4	
Description	Create ADA compliant bathrooms at the Senior Citizens' Center
Subrecipient	Klamath Basin Senior Citizens' Center Inc
Period of Performance Start	11/24/2021
Period of Performance End	12/31/2024

Subward No: 1505-0271-016

Subaward Type	Grant: Lump Sum Payment(s)
Subaward Obligation	\$55,000.00
Subaward Date	9/23/2021
Place of Performance Address 1	4500 Foothills Blvd
Place of Performance Address 2	
Place of Performance Address 3	
Place of Performance City	Klamath Falls
Place of Performance State	OR
Place of Performance Zip	97603
Place of Performance Zip+4	
Description	Outdoor facilities for youth sports
Subrecipient	Klamath Community Youth Sports Complex
Period of Performance Start	1/1/2022
Period of Performance End	12/31/2024

Subward No: 1505-0271-020

Subaward Type	Grant: Lump Sum Payment(s)
Subaward Obligation	\$275,000.00
Subaward Date	9/23/2021
Place of Performance Address 1	1930 South 6th St
Place of Performance Address 2	
Place of Performance Address 3	
Place of Performance City	Klamath Falls
Place of Performance State	OR
Place of Performance Zip	97601
Place of Performance Zip+4	
Description	Job training and affordable housing program
Subrecipient	Klamath Works, Inc
Period of Performance Start	12/21/2021
Period of Performance End	12/31/2023

Subward No: 1505-0271-021

Subaward Type	Grant: Lump Sum Payment(s)
Subaward Obligation	\$250,000.00
Subaward Date	9/23/2021
Place of Performance Address 1	23330 Highway 50
Place of Performance Address 2	
Place of Performance Address 3	
Place of Performance City	Merrill
Place of Performance State	OR
Place of Performance Zip	97633
Place of Performance Zip+4	
Description	Community building attached to community school; serve students and families
Subrecipient	Lost River Booster Club
Period of Performance Start	12/1/2021
Period of Performance End	12/31/2025

Subaward No: 1505-0271-022

Subaward Type	Subaward
Subaward Obligation	\$170,000.00
Subaward Date	9/23/2021
Place of Performance Address 1	3201 Campus Dr
Place of Performance Address 2	
Place of Performance Address 3	
Place of Performance City	Klamath Falls
Place of Performance State	OR
Place of Performance Zip	97601
Place of Performance Zip+4	
Description	Behavioral Health Clinic Expansion
Subrecipient	Oregon Tech Foundation, Inc
Period of Performance Start	1/4/2022
Period of Performance End	12/31/2026

Subaward No: 1505-0271-026

Subaward Type	Subaward
Subaward Obligation	\$100,000.00
Subaward Date	11/30/2021
Place of Performance Address 1	200 N 7th St
Place of Performance Address 2	
Place of Performance Address 3	

Place of Performance City	Klamath Falls
Place of Performance State	OR
Place of Performance Zip	97601
Place of Performance Zip+4	
Description	Ventilation system; revenue loss for tourism; non-profit assistance
Subrecipient	Ross Ragland Theater
Period of Performance Start	11/30/2021
Period of Performance End	12/31/2026

Subward No: 1505-0271-027

Subaward Type	Subaward
Subaward Obligation	\$750,000.00
Subaward Date	1/18/2022
Place of Performance Address 1	PO Box 1529
Place of Performance Address 2	
Place of Performance Address 3	
Place of Performance City	Klamath Falls
Place of Performance State	OR
Place of Performance Zip	97601
Place of Performance Zip+4	
Description	Housing Rehabilitation Program
Subrecipient	South Central Oregon Economic Development District
Period of Performance Start	1/18/2022
Period of Performance End	12/31/2026

Subward No: 1505-0271-029

Subaward Type	Subaward
Subaward Obligation	\$500,000.00
Subaward Date	1/4/2022
Place of Performance Address 1	3647 HWY 39
Place of Performance Address 2	
Place of Performance Address 3	
Place of Performance City	Klamath Falls
Place of Performance State	OR
Place of Performance Zip	97603
Place of Performance Zip+4	
Description	New residential substance use disorder (SUD) treatment facility
Subrecipient	Transformations Wellness Center

Period of Performance Start	1/4/2022
Period of Performance End	12/31/2026

Subward No: 1505-0271-011

Subaward Type	Subaward
Subaward Obligation	\$200,000.00
Subaward Date	9/23/2021
Place of Performance Address 1	PO Box 5250
Place of Performance Address 2	
Place of Performance Address 3	
Place of Performance City	Klamath Falls
Place of Performance State	OR
Place of Performance Zip	97601
Place of Performance Zip+4	
Description	Rail Expansion; storage
Subrecipient	Juhl Enterprises Inc
Period of Performance Start	11/30/2021
Period of Performance End	12/31/2021

Subward No: 1505-0271-017

Subaward Type	Subaward
Subaward Obligation	\$250,000.00
Subaward Date	9/23/2021
Place of Performance Address 1	3300 Memorial Dr
Place of Performance Address 2	
Place of Performance Address 3	
Place of Performance City	Klamath Falls
Place of Performance State	OR
Place of Performance Zip	97601
Place of Performance Zip+4	
Description	Boom/Crane Truck
Subrecipient	Lobo Truss LCC
Period of Performance Start	11/30/2021
Period of Performance End	12/2/2021

Subward No: 1505-0271-008

Subaward Type	Subaward
Subaward Obligation	\$200,000.00
Subaward Date	9/23/2021

Place of Performance Address 1	1301 Esplanade Ave
Place of Performance Address 2	
Place of Performance Address 3	
Place of Performance City	Klamath Falls
Place of Performance State	OR
Place of Performance Zip	97601
Place of Performance Zip+4	
Description	Revenue loss; rail expansion
Subrecipient	Ed Staub and Sons Petroleum, Inc.
Period of Performance Start	1/11/2022
Period of Performance End	12/31/2026

Expenditures

Expenditures for Awards more than \$50,000

Expenditure: EN-00288668

Project Name	REACH, Inc.
Subaward ID	SUB-0190453
Subaward No	1505-0271-023
Subaward Amount	\$130,000.00
Subaward Type	Grant: Lump Sum Payment(s)
Subrecipient Name	REACH, Inc.
Expenditure Start	9/23/2021
Expenditure End	12/31/2026
Expenditure Amount	\$130,000.00

Expenditure: EN-00076422

Project Name	CASA for Children of Klamath County
Subaward ID	SUB-0010518
Subaward No	1505-0271-003
Subaward Amount	\$50,000.00
Subaward Type	Subaward
Subrecipient Name	CASA for Children of Klamath County
Expenditure Start	11/23/2021
Expenditure End	12/31/2026
Expenditure Amount	\$50,000.00

Expenditure: EN-00074745

Project Name	Friends of the Children Klamath Basin
Subaward ID	SUB-0039469
Subaward No	1505-0271-009
Subaward Amount	\$50,000.00
Subaward Type	Subaward
Subrecipient Name	Friends of the Children Klamath Basin
Expenditure Start	9/23/2021
Expenditure End	12/31/2021
Expenditure Amount	\$50,000.00

Expenditure: EN-00457548

Project Name	Healthy Klamath
Subaward ID	SUB-0168208
Subaward No	1505-0271-010
Subaward Amount	\$125,000.00
Subaward Type	Grant: Lump Sum Payment(s)
Subrecipient Name	Healthy Klamath
Expenditure Start	3/15/2022
Expenditure End	12/31/2026
Expenditure Amount	\$125,000.00

Expenditure: EN-00288541

Project Name	Klamath Basin Senior Citizens' Center
Subaward ID	SUB-0168216
Subaward No	1505-0271-012
Subaward Amount	\$60,000.00
Subaward Type	Grant: Lump Sum Payment(s)
Subrecipient Name	Klamath Basin Senior Citizens' Center Inc
Expenditure Start	9/23/2021
Expenditure End	12/31/2026
Expenditure Amount	\$60,000.00

Expenditure: EN-00275153

Project Name	Klamath Works
Subaward ID	SUB-0168233
Subaward No	1505-0271-020
Subaward Amount	\$275,000.00
Subaward Type	Grant: Lump Sum Payment(s)
Subrecipient Name	Klamath Works, Inc
Expenditure Start	11/23/2021
Expenditure End	12/31/2026
Expenditure Amount	\$275,000.00

Expenditure: EN-00457547

Project Name	Oregon Tech Foundation
Subaward ID	SUB-0039522

Subaward No	1505-0271-022
Subaward Amount	\$170,000.00
Subaward Type	Subaward
Subrecipient Name	Oregon Tech Foundation, Inc
Expenditure Start	1/3/2022
Expenditure End	12/31/2026
Expenditure Amount	\$170,000.00

Expenditure: EN-00074471

Project Name	Ross Ragland Theater
Subaward ID	SUB-0039463
Subaward No	1505-0271-026
Subaward Amount	\$100,000.00
Subaward Type	Subaward
Subrecipient Name	Ross Ragland Theater
Expenditure Start	11/30/2021
Expenditure End	12/31/2026
Expenditure Amount	\$100,000.00

Expenditure: EN-00275521

Project Name	SCOEDD
Subaward ID	SUB-0039456
Subaward No	1505-0271-027
Subaward Amount	\$750,000.00
Subaward Type	Subaward
Subrecipient Name	South Central Oregon Economic Development District
Expenditure Start	2/8/2022
Expenditure End	12/31/2025
Expenditure Amount	\$0.00

Expenditure: EN-00457546

Project Name	Transformations Wellness Center
Subaward ID	SUB-0010352
Subaward No	1505-0271-029
Subaward Amount	\$500,000.00
Subaward Type	Subaward
Subrecipient Name	Transformations Wellness Center

Expenditure Start	3/15/2022
Expenditure End	12/31/2026
Expenditure Amount	\$500,000.00

Expenditure: EN-00074500

Project Name	J&P Wholesale
Subaward ID	SUB-0049886
Subaward No	1505-0271-011
Subaward Amount	\$200,000.00
Subaward Type	Subaward
Subrecipient Name	Juhl Enterprises Inc
Expenditure Start	9/23/2021
Expenditure End	12/31/2021
Expenditure Amount	\$200,000.00

Expenditure: EN-00074566

Project Name	Lobo Truss LCC
Subaward ID	SUB-0049879
Subaward No	1505-0271-017
Subaward Amount	\$250,000.00
Subaward Type	Subaward
Subrecipient Name	Lobo Truss LCC
Expenditure Start	11/30/2021
Expenditure End	12/31/2021
Expenditure Amount	\$250,000.00

Aggregate Expenditures for Awards less than \$50,000

Expenditure: EN-00028435

Project Name	CERT - Community Emergency Response Team Klamath County
Subaward Type (Aggregates)	Aggregate of Grants Awarded
Total Period Expenditure Amount	\$17,000.00
Total Period Obligation Amount	\$17,000.00

Expenditure: EN-00028433

Project Name	Teen CERT
Subaward Type (Aggregates)	Aggregate of Grants Awarded
Total Period Expenditure Amount	\$8,000.00

Total Period Obligation Amount	\$8,000.00
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Expenditure: EN-00273699

Project Name	Chemult Community Tourism Association
Subaward Type (Aggregates)	Aggregate of Grants Awarded
Total Period Expenditure Amount	\$0.00
Total Period Obligation Amount	\$50,000.00

Expenditure: EN-00601142

Project Name	Chemult Community Tourism Association
Subaward Type (Aggregates)	Aggregate of Grants Awarded
Total Period Expenditure Amount	\$0.00
Total Period Obligation Amount	(\$50,000.00)

Expenditure: EN-00028437

Project Name	D&G Holdings Northwest LLC dba Crazy R Pizza
Subaward Type (Aggregates)	Aggregate of Grants Awarded
Total Period Expenditure Amount	\$20,000.00
Total Period Obligation Amount	\$20,000.00

Expenditure: EN-00028441

Project Name	Klamath Film
Subaward Type (Aggregates)	Aggregate of Grants Awarded
Total Period Expenditure Amount	\$3,000.00
Total Period Obligation Amount	\$3,000.00

Expenditure: EN-00275506

Project Name	Red Cross
Subaward Type (Aggregates)	Aggregate of Grants Awarded
Total Period Expenditure Amount	\$10,000.00
Total Period Obligation Amount	\$10,000.00

Expenditure: EN-00028318

Project Name	Citizens for Safe Schools
Subaward Type (Aggregates)	Aggregate of Grants Awarded
Total Period Expenditure Amount	\$50,000.00
Total Period Obligation Amount	\$50,000.00

Expenditure: EN-00028443

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Project Name	Klamath County Chamber of Commerce Job Fair
Subaward Type (Aggregates)	Aggregate of Grants Awarded
Total Period Expenditure Amount	\$5,000.00
Total Period Obligation Amount	\$5,000.00

Expenditure: EN-00273809

Project Name	Klamath County Chamber of Commerce Job Fair
Subaward Type (Aggregates)	Aggregate of Grants Awarded
Total Period Expenditure Amount	\$15,000.00
Total Period Obligation Amount	\$15,000.00

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	County-wide departments digitization for public use Generator and refrigeration for Public Health Medical Examiner County Premium Pay HR Recruitment tools Watermaster office Building Permits Expansion of County Fairgrounds IT wages for employees to work from home Janitorial special Cleaning Body Scanner and Mail Scanner Code Enforcement Public Safety Personnel Grant Manager Childcare Klamath Basin Water Solution Project with Brown Caldwell

Overview

Total Obligations	
Total Expenditures	
Total Adopted Budget	
Total Number of Projects	
Total Number of Subawards	
Total Number of Expenditures	

Certification

Authorized Representative Name	Natalie Parker
Authorized Representative Telephone	5418834202
Authorized Representative Title	Grant Administrator
Authorized Representative Email	nparker@klamathcounty.org
Submission Date	10/19/2022 1:03 PM