

Appendix D

American Recovery & Reinvestment Act

*Alabama Community College System*

*Monthly Update Form*

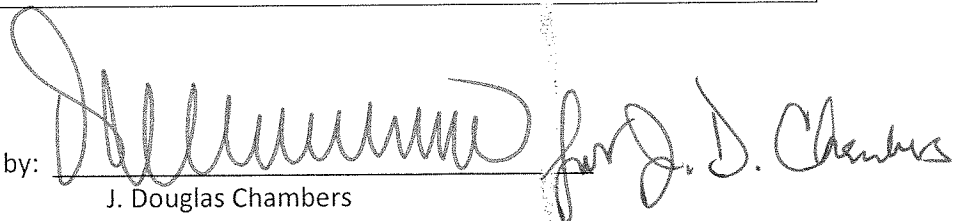
Institution: J.F. Ingram State Technical College

Date of Submission: February 7, 2011

The amounts entered below should not represent monthly totals. They should report cumulative totals for the Recovery Act life of the program/grant.

1) Grant Name	State Fiscal Stabilization Funds
2) CFDA Number:	84.394
3) Status of Application:	Options will include: Approved)
4) Which type of recipient are you?	Sub-recipient of the State of Alabama
5) Application Date:	N/A
6) Award Date:	October 1, 2009
7) Status of Expenditures:	
8) # of Jobs Created:	
9) # of Jobs Retained:	
10) ARRA Funds Awarded:	\$408,672.00
11) ARRA Funds Received:	\$204,336.00
12) ARRA Funds expended:	\$204,336.00
13) Performance Metric 1 (if applicable)	This should include brief statistical information.
14) Performance Metric 2 (if applicable)	
15) Performance Metric 3 (if applicable)	

Institution information verified by:



J. Douglas Chambers  
President

Department of Postsecondary Education  
 Division of Fiscal Services

Agency J. F. Ingram State Technical College

For Month of Jan-11


**American Recovery and Reinvestment Act of 2009  
 Monthly Request for Funds (MRF)  
 ( Instructions on back )**

GRANT NAME	(1) ALLOCATION	(2) RECEIPTS	(3) DISBURSEMENTS THRU 11/30/2010__	(4) CASH REQUESTED (2) - (3)
State Fiscal Stabilization Funds	\$408,672.00	\$204,336.00	\$204,336.00	None

REMARKS:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

I hereby certify that to the best of my knowledge, this information is correct and that funds have been or will be expended in accordance with Section 14004(a) of the American Recovery and Reinvestment Act of 2009.

  
 \_\_\_\_\_  
 Compliance Officer

  
 \_\_\_\_\_  
 Chief Financial Officer or President

FOR DPE USE ONLY	
VENDOR CODE	
ACCOUNT CODE	
	Amount
State Fiscal Stabilization Funds	

American Recovery & Reinvestment Act  
 State of Alabama  
**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: 1/01/11 to 1/31/11**

Agency/Institution: J.F. Ingram Technical College

Date of Submission: February 7, 2011

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

1) Grant Name	STATE STABILIZATION Is this grant/program subject to Section 1512 Reporting? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2) CFDA Number:	84.394
3) Grant Narrative Description:	Provide participants the training and other services that allow them to become productive citizens.
4) Status of Application:	Approved
5) Which type of recipient are you?	Sub-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> Postsecondary Education
6) Application Date:	N/A
7) Award Date:	October 1, 2009
8) Status of Expenditures:	Funds Currently Expended
9) Actual # of Jobs Created/Retained (This should match the job number reported to federalreporting.gov in January):	3.50
10) Description of Types of Actual Jobs Created / Retained:	Instructors retained
11) <sup>1</sup> ARRA Funds Awarded:	\$408,672.00
12) <sup>2</sup> ARRA Funds Received/Invoiced to date:	\$204,336.00
13) <sup>3</sup> ARRA Funds Expended to date:	\$204,336.00
14) Performance Metric 1 (if applicable)	Provide additional performance measures for this grant/program here. <input type="checkbox"/> Annual Measure? <input type="checkbox"/> Quarterly Measure? <input type="checkbox"/> Monthly Measure?
15) Performance Metric 2	Provide additional performance measures for this grant/program here.

<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 Received to date - the total amount of ARRA funds received for the purpose of funding an applicable project or funding a sub-recipient

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

<b>(if applicable)</b>	<input type="checkbox"/> Annual Measure? <input type="checkbox"/> Quarterly Measure? <input type="checkbox"/> Monthly Measure?
<b>16) Performance Metric 3 (if applicable)</b>	Provide additional performance measures for this grant/program here. <input type="checkbox"/> Annual Measure? <input type="checkbox"/> Quarterly Measure? <input type="checkbox"/> Monthly Measure?
<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: Dawn Robinson drobinson@ingram.cc.al.us

**Submit this form to: lgrogan@dpe.edu**  
**By: February 7, 2011**  
For questions, please call 334.293.3263