

Report Name: Rhode Island CPF P&E Report Q1 2023

Report Type: Project and Expenditure Report

Report Period: Quarter 1 2023 (January-March)

Report Period Start Date: 1/1/2023

Report Period End Date: 3/31/2023

TAB 2: Recipient General Information

Section 2.1 – Recipient Information

| | |
|-------------------|------------------|
| UEI | NSA8T7PLC9K3 |
| TIN | 056000522 |
| Recipient Type | State Government |
| Legal Entity Name | Rhode Island |
| Street Address | One Capitol Hill |
| City | Providence |
| State | RI |
| Zip | 02908 |
| Zip +4 | 3108 |

| | |
|--|--|
| Please report discrepancies (if any) on the above information. | |
|--|--|

Section 2.2 – Point of Contact List

| Name | Title | Email | Roles |
|-------------------|-----------------------------------|----------------------------------|--|
| LAURA SULLIVAN | Interdepartmental Project Manager | laura.e.sullivan@omb.ri.gov | HAF - Account Administrator;HAF - Point of Contact for Submission;HAF - Point of Contact for Reporting;SLFRF - Authorized Representative |
| Christina Vilardi | Grants Project Specialist | christina.vilardi.ctr@omb.ri.gov | |

| Name | Title | Email | Roles |
|-----------------|---|--------------------------------|--|
| Brianna Murphy | Programming Services Officer | brianna.l.murphy@omb.ri.gov | ERA - Account Administrator; ERA - Point of Contact for Reporting; ERA2 - Account Administrator; ERA2 - Point of Contact for Reporting; HAF - Account Administrator; HAF - Point of Contact for Reporting; SLFRF - Account Administrator; SLFRF - Point of Contact for Reporting; SLFRF - Authorized Representative; SSBCI Capital - Account Administrator; SSBCI Capital - Account POC; CPF - Point of Contact for Reporting; CPF - Authorized Representative |
| Jesse Saglio | President | jesse.saglio@commerceri.com | SLFRF - No Email |
| William Ash | Managing Director of Financial Services | william.ash@commerceri.com | SSBCI Capital - Account Administrator; SSBCI Capital - Authorized Representative; SSBCI Capital - Account POC; SSBCI TA - Authorized Representative |
| Doris Blanchard | Director of Small Business Programs | doris.blanchard@commerceri.com | SSBCI TA - Authorized Representative |

| Name | Title | Email | Roles |
|--------------------|--------------------------------------|-----------------------------------|--|
| Zachary Shpilner | Contractor | zach.shpilner.ctr@doa.ri.gov | ERA - Account Administrator; ERA - Point of Contact for Reporting; ERA2 - Account Administrator; ERA2 - Point of Contact for Reporting; HAF - Account Administrator; HAF - Point of Contact for Reporting |
| SAGREE SHARMA | Administrator, Capital Projects Fund | sagree.sharma@doa.ri.gov | SLFRF - Account Administrator; SLFRF - Point of Contact for Reporting; CPF - Account Administrator; CPF - Point of Contact for Submission; CPF - Point of Contact for Reporting; CPF - Authorized Representative |
| ADAM ISAACS-FALBEL | Policy and Research Officer | adam.isaacsfalbel@commerce.ri.gov | SSBCI TA - Authorized Representative |

| Name | Title | Email | Roles |
|----------------------|------------------|-------------------------------|---|
| DOROTHY Z PASCALE | State Controller | dorothy.z.pascale@doa.ri.gov | ERA - Account Administrator; ERA2 - Account Administrator; HAF - Account Administrator; HAF - Point of Contact for Submission; HAF - Point of Contact for Reporting; HAF - Authorized Representative; SLFRF - Account Administrator; SLFRF - Point of Contact for Reporting; SLFRF - Authorized Representative; SSBCI Capital - Account Administrator; SSBCI Capital - Authorized Representative; SSBCI Capital - Account POC; SSBCI TA - Authorized Representative |
| Brianna Ruggiero | . | brianna.ruggiero@doa.ri.gov | ERA - Account Administrator; ERA - Authorized Representative; ERA2 - Account Administrator; HAF - Account Administrator; HAF - Authorized Representative; ERA2 - Communications Only |
| Patrick Duffy | . | patrick.duffy@commerce.ri.gov | SSBCI TA - Authorized Representative |
| Sarah Clausius-Parks | Policy | sclausiusparks@rihousing.com | HAF - Communications Only |
| James Thorsen | Director | jim.thorsen@doa.ri.gov | SSBCI Capital - Account Administrator; SSBCI Capital - Authorized Representative; SSBCI TA - Authorized Representative |

| Name | Title | Email | Roles |
|-------------------|--|--------------------------------|---|
| Bobi Gilroy | Intermediate Data and Applications Assistant | bobi.gilroy.ctr@doa.ri | ERA2 - Point of Contact for Reporting;HAF - Point of Contact for Reporting;SLFRF - Point of Contact for Reporting |
| Marcus Galvin | Grants Project Specialist | marcus.galvin.ctr@omb.ri.gov | ERA - Account Administrator;ERA - Point of Contact for Reporting;ERA2 - Account Administrator;ERA2 - Point of Contact for Reporting;HAF - Account Administrator;HAF - Point of Contact for Reporting;SLFRF - Account Administrator;SLFRF - Point of Contact for Reporting |
| Samuel Oseitutu | Grants Project Specialist | samuel.oseitutu.ctr@omb.ri.gov | ERA - Account Administrator;ERA - Point of Contact for Reporting;ERA2 - Account Administrator;ERA2 - Point of Contact for Reporting;HAF - Account Administrator;HAF - Point of Contact for Reporting;SLFRF - Account Administrator;SLFRF - Point of Contact for Reporting |
| Reily Connaughton | Chief of Strategy and Monitoring | reily.s.connaughton@doa.ri.gov | SLFRF - Account Administrator;SLFRF - Point of Contact for Reporting;SLFRF - Authorized Representative |

| Name | Title | Email | Roles |
|---------------|---|----------------------------|--|
| Paul Dion | Director Pandemic Recovery Office | paul.l.dion@doa.ri.gov | ERA - Account Administrator; ERA - Point of Contact for Reporting; ERA - Authorized Representative; ERA2 - Account Administrator; ERA2 - Point of Contact for Reporting; ERA2 - Authorized Representative; HAF - Account Administrator; HAF - Point of Contact for Reporting; HAF - Authorized Representative; SLFRF - Account Administrator; SLFRF - Point of Contact for Reporting; SLFRF - Authorized Representative; SSBCI Capital - Account Administrator; SSBCI Capital - Authorized Representative; SSBCI Capital - Account POC; SSBCI TA - Authorized Representative; CPF - Point of Contact for Reporting; CPF - Authorized Representative; CPF - Communications Only |
| Rachel Reilly | Commerce Advisor | rreilly@cdfa.net | SSBCI Capital - Account Administrator; SSBCI Capital - Authorized Representative; SSBCI Capital - Account POC; SSBCI TA - Authorized Representative |
| James Foust | Contractor | james.foust.ctr@doa.ri.gov | SLFRF - No Email; ERA - No Email; ERA2 - No Email; HAF - No Email |

| Name | Title | Email | Roles |
|-----------------|-----------------------------------|--------------------------------|--|
| David Vince | Contractor | david.vince.ctr@doa.ri.gov | ERA - Account Administrator;ERA - Point of Contact for Reporting;ERA2 - Account Administrator;ERA2 - Point of Contact for Reporting;HAF - Account Administrator;HAF - Point of Contact for Reporting;SLFRF - Account Administrator;SLFRF - Point of Contact for Reporting;SSBCI Capital - Account Administrator;SSBCI Capital - Authorized Representative;SSBCI Capital - Account POC;SSBCI TA - Authorized Representative |
| Patrick McGrath | Special Projects Manager | patrick.mcgrath@commere.ri.gov | |
| Lisa Primiano | RIHousing | lprimiano@rihousing.com | HAF - Point of Contact for Submission;HAF - Point of Contact for Reporting |
| Pheamo Witcher | Interdepartmental Project Manager | pheamo.r.witcher@doa.ri.gov | ERA - Account Administrator;ERA - Point of Contact for Reporting;ERA2 - Account Administrator;ERA2 - Point of Contact for Reporting;HAF - Account Administrator;HAF - Point of Contact for Reporting;SLFRF - Account Administrator;SLFRF - Point of Contact for Reporting |

| Name | Title | Email | Roles |
|---------------|-------------------|------------------------------|--|
| David Cruz | Grants Specialist | david.cruz.ctr@doa.ri.gov | ERA - Point of Contact for Reporting; ERA2 - Point of Contact for Reporting; HAF - Point of Contact for Reporting; SLFRF - Point of Contact for Reporting |
| Geidy Nolasco | Clerk | geidy.nolasco.ctr@doa.ri.gov | ERA - Account Administrator; ERA - Point of Contact for Reporting; ERA2 - Account Administrator; ERA2 - Point of Contact for Reporting; HAF - Account Administrator; HAF - Point of Contact for Reporting; SLFRF - Account Administrator; SLFRF - Point of Contact for Reporting |
| Ozzy Chung | Clerk | ozzie.chung.ctr@omb.ri.gov | SLFRF - Account Administrator; SLFRF - Point of Contact for Reporting |

TAB 3: Program Plan Information

Section 3.1 – Program Plan(s) Information

| Program Plan Number | Use Code | Project ID | Project Name | Total Obligations | Total Expenditures | P&E Report Status |
|---------------------|----------------|------------|--------------|-------------------|--------------------|-------------------|
| CPF_GP-000111 | 1A - Broadband | | | \$0.00 | \$0.00 | Not Complete |

TAB 4: Projects

TAB 5: Subrecipients

Section 5.1 – Subrecipients

TAB 6: Subawards

Section 6.1 – Subawards

| Project Name | Subrecipient Name | Subaward Number | Total Award Amount | Subaward Date | Period of Performance Start | Period of Performance End |
|-------------------------|------------------------------|----------------------------|-----------------------------------|--------------------------|--|--|
|-------------------------|------------------------------|----------------------------|-----------------------------------|--------------------------|--|--|

TAB 7: Program Administrative Expenses

Section 7.1 – Program Administrative Expenses

| | |
|---------------------------|-------------|
| Current Period Obligation | \$113508.53 |
| Cumulative Obligation | \$226863.41 |
| Current Period Expend. | \$113508.53 |
| Cumulative Expend. | \$226863.41 |

TAB 8: Certification

Statement

I certify that the information provided is accurate and complete after reasonable inquiry of people, systems, and other information available to the CPF recipient. The undersigned acknowledges that any materially false, fictitious, fraudulent statement, or representation (or concealment or omission of a material fact) in this submission may be the subject of criminal prosecution under the False Statements Accountability Act of 1996, as amended, 18 USC 1001, and also may subject me and the CPF Recipient to civil penalties, damages, and administrative remedies for false claims or otherwise (including under 31 USC 3729 et seq.) The undersigned is an authorized representative of the CPF Recipient with authority to make the above certifications and representations on behalf of the CPF Recipient.

| | |
|--|---|
| Records indicate that at least one of the program plans does not have at least one project attached. The system shows that the following program plans do not have projects attached: CPF_GP-000111. If the identified program plans are not supposed to have projects, please provide an explanation for any program plan missing a project about why this is the case. If this is incorrect, please return to the Projects screen and add additional projects. | Project not initiated or awarded to subrecipient yet. |
| Name | Paul Dion |
| Title | Director Pandemic Recovery Office |
| Telephone | |
| Email Address | paul.l.dion@doa.ri.gov |
| Submission Date | 5/1/2023 2:37 PM |