

Tuesday, January 19, 2010

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Prime Recipient

Sub Recipients

Vendors

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All fields marked with an asterisk (*) are required unless otherwise noted.

Report Information

Award Type	Award Number	Calendar Year / Quarter	Final Report
Grant	S09-MY-29-0003	2009 / 4	<input type="text" value="No"/>

Change Key**Award Recipient Information**[More information about these fields](#) *** Recipient DUNS Number** 073134231**Recipient Account Number** *** Recipient Congressional District** **Parent DUNS Number** 073134231**Recipient Type** 12.C8.VW**Recipient Legal Name** KANSAS CITY, MISSOURI, CITY OF**Recipient DBA Name****Recipient Address 1** 414 E 12TH ST STE 500**Recipient Address 2****Recipient City** KANSAS CITY**Recipient State** MO**Recipient ZIP Code + 4** 641062711**Recipient Country** USA**Project / Award Information**[More information about these fields](#) *** Funding Agency Code** *** Awarding Agency Code** *** Program Source (TAS) Code** **Sub Account Number for Program Source** *** CFDA Number** *** Amount of Award** \$ *** Award Date** **Current Reporting Cycle****Initial Submission** - Prime and Sub Recipients enter drafts and submit Initial Submission reports.**Create / Upload ARRA Reports****Create Report****Upload Report**

Validate File

* Award Description The HPRP established in the March 19, 2009 Federal Register (FR-5307-N-01), is to provide homeless prevention assistance to

* Total Number of Sub Awards less than \$25,000/award 0

* Total Amount Sub Awards less than \$25,000/award \$ 0.00

* Total Number of Sub Awards to Individuals 0

* Total Amount of Sub Awards to Individuals \$ 0.00

* Total Number of Payments to Vendors less than \$25,000/award 0

* Total Amount of Payments to Vendors less than \$25,000/award \$ 0.00

Project Information

More information about these fields

Note: If the Total Federal ARRA Infrastructure Expenditure is greater than \$0.00, then the Infrastructure Purpose and Rationale is required.

* Project Name or Project/Program Title Homelessness Prevention and R

* Quarterly Activities/Project Description PROCURED VENDOR FOR INSPECTIONS (HABITABILITY, LEAD BASE PAINT) AND RENT REASONABLENESS TEST; DESIGNED

* Project Status Not Started

* Total Federal Amount ARRA Funds Received/Invoiced \$ 0.00

* Number of Jobs 0.00

* Description of Jobs Created case managers; housing locator, intake coordinators

Activity Codes (NAICS or NTEE-NPC) (up to 10)

* Activity Code 1 P11.04

Activity Code 2

Activity Code 3

Activity Code 4

Activity Code 5

Activity Code 6

Activity Code 7

Activity Code 8

Activity Code 9

Activity Code 10

* Total Federal Amount of ARRA Expenditure \$ 0.00

Total Federal ARRA Infrastructure Expenditure \$ 0.00



Infrastructure Purpose and Rationale

Infrastructure Contact

[More information about these fields](#)
Name Email Phone Ext Street Address 1 Street Address 2 Street Address 3 City State ZIP Code + 4 -

Primary Place of Performance

[More information about these fields](#)
Address 1 Address 2 * City * Country Code * State * ZIP Code + 4 - * Congressional District

Note: If you are not sure about your ZIP Code or ZIP Code extension, you can search for your address on the [United States Postal Service](#) website. If your Place of Performance does not have a specific ZIP Code extension, enter "0000" and the Congressional District lookup will return all possible congressional districts for the ZIP Code.

If your Primary Place of Performance exists outside of the United States, only City and Country Code are required.

ALERT: If you enter an Address and ZIP Code associated with a P.O. Box, FederalReporting.gov will only accept the Congressional District that aligns with the location of the Post Office, which might be different from the Congressional District of your street address or your physical Place of Performance.

Recipient Highly Compensated Officers

[More information about these fields](#)

Note: If you indicate "Yes" for Prime Recipient Indication of Reporting Applicability, at least one officer name and compensation is required.

Prime Recipient Indication of Reporting Applicability Officer 1 Name Officer 1 Compensation \$ Officer 2 Name Officer 2 Compensation \$ Officer 3 Name

Officer 3 Compensation \$	<input type="text"/>
Officer 4 Name	<input type="text"/>
Officer 4 Compensation \$	<input type="text"/>
Officer 5 Name	<input type="text"/>
Officer 5 Compensation \$	<input type="text"/>

Report Audit Trail
Created By jackie powell
Date Created 01/09/2010 08:58 AM
Last Updated By jackie powell
Last Updated On 01/09/2010 08:58 AM



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Prime Recipient Sub Recipients Vendors

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Sub Recipient Reporting

Report Information

Award Type	Award Number	Prime DUNS	Calendar Year / Quarter
Grant	S09-MY-29-0003	073134231	2009 / 4

5 reports found, displaying all reports.

<u>DUNS #</u>	<u>Subaward #</u>	<u>Amount of Award</u>
084096411	10-501-ST	812540.00
150944064	10-504-ST	111901.00
154153022	10-503-ST	650000.00
785487844	10-502-ST	1275000.00
827822904	10-500-ST	374544.00

[Add a Sub Recipient](#)

Current Reporting Cycle

Initial Submission - Prime and Sub Recipients enter drafts and submit Initial Submission reports.

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Vendor Reporting

Report Information

Award Type	Award Number	Prime DUNS	Calendar Year / Quarter
Grant	S09-MY-29-0003	073134231	2009 / 4

6 reports found, displaying all reports.

<u>Name</u>	<u>DUNS #</u>	<u>Subaward #</u>	<u>Amount of Award</u>
Community Assistance Council Inc.	805696770	10-504-ST	0.00
Community LINC	966770315	10-504-ST	0.00
Don Bosco Community Centers, The	084096585	10-504-ST	0.00
Greater Kansas City Housing Information Center	803349463	10-504-ST	0.00
Guadalupe Centers Inc.	955043139	10-504-ST	0.00
Reconciliation Services	831523597	10-504-ST	0.00

[Add a Vendor](#)

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