



## 2018 CALEITC FREE TAX PREP ASSISTANCE EXPENDITURE/ACTIVITY REPORT

Contractor: United Way CA Capital Region		Contract Number: 18T-8109	Report Period: 12/1/18 - 12/31/18	Adjustment: 0
Prepared by (Name/Title): Erin Manning / Finance Manager		E-mail Address: erin.manning@uwccr.org	Telephone: 916-368-3013	Fax Number: 916-368-3029
<b>10 - FREE TAX PREPARATION ASSISTANCE GRANT ACTIVITIES</b>				
1.	Salaries, Wages, and Fringe Benefits	1,892.92		
2.	Travel	.00		
3.	Equipment	.00		
4.	Supplies	.00		
5.	Subcontractor	4,991.97		
6.	Other Costs	757.34		
	<b>Total</b>	<b>7,642.23</b>		
<b>20 - TOTAL COSTS</b>				
1.	Total Costs	7,642.23		
	<b>Total</b>	<b>7,642.23</b>		
<b>CONTRACTOR'S CERTIFICATION</b>				
I hereby certify under penalty of perjury that I am the duly appointed, qualified, and acting officer of the herein named Agency, Department, Board, Commission, Office or Institution, and that to the best of my knowledge, the actual expenditures and activities made during this reporting period contained within this document are in all respects true, correct, and in accordance with the purpose, terms and conditions of the contract referenced above, Federal and State Regulations or other statutes.				
Authorized Person (Print Name/Title): Jennifer Macias / Chief Operating Officer		Signature: 	Date: 01/29/2019	
<b>CSD ACCOUNTING USE ONLY</b>				
Payment:		PCA#		
Approved By:		Date:		


## 2018 CALEITC FREE TAX PREP ASSISTANCE EXPENDITURE/ACTIVITY REPORT

Contractor: United Ways of California		Contract Number: 18T-8114	Report Period: 11/1/18 - 11/30/18	Adjustment: 0
Prepared by (Name/Title): Max Moy-Borgen / Income Program Manager		E-mail Address: mmoy-borgen@unitedwaysca.org	Telephone: 510-499-3734	Fax Number: 877-908-8922
<b>10 - FREE TAX PREPARATION ASSISTANCE GRANT ACTIVITIES</b>				
1.	Salaries, Wages, and Fringe Benefits	16,192.76		
2.	Travel	.00		
3.	Equipment	.00		
4.	Supplies	.00		
5.	Subcontractor	30,684.31		
6.	Other Costs	21,617.41		
	<b>Total</b>	<b>68,494.48</b>		
<b>20 - TOTAL COSTS</b>				
1.	Total Costs	<b>68,494.48</b>		
	<b>Total</b>	<b>68,494.48</b>		
<b><i>CONTRACTOR'S CERTIFICATION</i></b>				
I hereby certify under penalty of perjury that I am the duly appointed, qualified, and acting officer of the herein named Agency, Department, Board, Commission, Office or Institution, and that to the best of my knowledge, the actual expenditures and activities made during this reporting period contained within this document are in all respects true, correct, and in accordance with the purpose, terms and conditions of the contract referenced above, Federal and State Regulations or other statutes.				
Authorized Person (Print Name/Title): Nalleli Sandoval / Financial Stability Director		Signature: 	Date: 01/02/2019	
<b>CSD ACCOUNTING USE ONLY</b>				
Payment:		PCA#		
Approved By:		Date:		

## 2018 CALEITC FREE TAX PREP ASSISTANCE EXPENDITURE/ACTIVITY REPORT

Contractor: United Way Bay Area		Contract Number: 18T-8111	Report Period: 12/1/18 - 12/31/18	Adjustment: 0
Prepared by (Name/Title): Colleen Smallfield / Director, EKS	E-mail Address: csmallfield@uwba.org	Telephone: 415-808-4315	Fax Number: 415-808-4315	
<b>10 - FREE TAX PREPARATION ASSISTANCE GRANT ACTIVITIES</b>				
1.	Salaries, Wages, and Fringe Benefits	4,283.61		
2.	Travel	.00		
3.	Equipment	.00		
4.	Supplies	.00		
5.	Subcontractor	.00		
6.	Other Costs	.00		
	<b>Total</b>	<b>4,283.61</b>		
<b>20 - TOTAL COSTS</b>				
1.	Total Costs	4,283.61		
	<b>Total</b>	<b>4,283.61</b>		
<b>CONTRACTOR'S CERTIFICATION</b>				
I hereby certify under penalty of perjury that I am the duly appointed, qualified, and acting officer of the herein named Agency, Department, Board, Commission, Office or Institution, and that to the best of my knowledge, the actual expenditures and activities made during this reporting period contained within this document are in all respects true, correct, and in accordance with the purpose, terms and conditions of the contract referenced above, Federal and State Regulations or other statutes.				
Authorized Person (Print Name/Title): Maria Nguyen / Contract and Grant SD		Signature: 	Date: 02/08/2019	
<b>CSD ACCOUNTING USE ONLY</b>				
Payment:		PCA#		
Approved By:		Date:		


## 2018 CALEITC FREE TAX PREP ASSISTANCE EXPENDITURE/ACTIVITY REPORT

Contractor: UNITED WAY OF KERN COUNTY		Contract Number: 18T-8113	Report Period: 11/1/18 - 11/30/18	Adjustment: 0
Prepared by (Name/Title): Susana Espinoza / Financial Stability Manager		E-mail Address: susana.e@uwkern.org	Telephone: 661-834-1820	Fax Number: 661-834-2962
<b>10 - FREE TAX PREPARATION ASSISTANCE GRANT ACTIVITIES</b>				
1.	Salaries, Wages, and Fringe Benefits	3,234.37		
2.	Travel	.00		
3.	Equipment	.00		
4.	Supplies	.00		
5.	Subcontractor	.00		
6.	Other Costs	.00		
	<b>Total</b>	<b>3,234.37</b>		
<b>20 - TOTAL COSTS</b>				
1.	Total Costs	<b>3,234.37</b>		
	<b>Total</b>	<b>3,234.37</b>		
<b><i>CONTRACTOR'S CERTIFICATION</i></b>				
I hereby certify under penalty of perjury that I am the duly appointed, qualified, and acting officer of the herein named Agency, Department, Board, Commission, Office or Institution, and that to the best of my knowledge, the actual expenditures and activities made during this reporting period contained within this document are in all respects true, correct, and in accordance with the purpose, terms and conditions of the contract referenced above, Federal and State Regulations or other statutes.				
Authorized Person (Print Name/Title): Mari Perez-Dowling / President and CEO		Signature: 		Date: 01/10/2019
<b>CSD ACCOUNTING USE ONLY</b>				
Payment:		PCA#		
Approved By:		Date:		

## 2018 CALEITC FREE TAX PREP ASSISTANCE EXPENDITURE/ACTIVITY REPORT

Contractor: UNITED WAY OF KERN COUNTY		Contract Number: 18T-8113	Report Period: 12/1/18 - 12/31/18	Adjustment: 0
Prepared by (Name/Title): Susana Espinoza / Financial Stability Manager		E-mail Address: susana.e@uwkern.org	Telephone: 661-834-1820	Fax Number: 661-834-2952
<b>10 - FREE TAX PREPARATION ASSISTANCE GRANT ACTIVITIES</b>				
1.	Salaries, Wages, and Fringe Benefits			5,124.37
2.	Travel			154.00
3.	Equipment			.00
4.	Supplies			173.68
5.	Subcontractor			5,000.00
6.	Other Costs			387.00
	<b>Total</b>			<b>10,839.05</b>
<b>20 - TOTAL COSTS</b>				
1.	Total Costs			<b>10,839.05</b>
	<b>Total</b>			<b>10,839.05</b>
<b><i>CONTRACTOR'S CERTIFICATION</i></b>				
I hereby certify under penalty of perjury that I am the duly appointed, qualified, and acting officer of the herein named Agency, Department, Board, Commission, Office or Institution, and that to the best of my knowledge, the actual expenditures and activities made during this reporting period contained within this document are in all respects true, correct, and in accordance with the purpose, terms and conditions of the contract referenced above, Federal and State Regulations or other statutes.				
Authorized Person (Print Name/Title): Mari Perez-Dowling / President & CEO		Signature: 		Date: 01/31/2019
<b>CSD ACCOUNTING USE ONLY</b>				
Payment:		PCA#		
Approved By:		Date:		

## 2018 CALEITC FREE TAX PREP ASSISTANCE EXPENDITURE/ACTIVITY REPORT

Contractor: THE UNIVERSITY CORPORATION		Contract Number: 18T-8101	Report Period: 11/1/18 - 11/30/18	Adjustment: 0
Prepared by (Name/Title): Michael Epping / Post Award Analyst	E-mail Address: michael.epping@csun.edu	Telephone: 8186777975	Fax Number: 8186772671	
<b>10 - FREE TAX PREPARATION ASSISTANCE GRANT ACTIVITIES</b>				
1.	Salaries, Wages, and Fringe Benefits	7,884.05		
2.	Travel	.00		
3.	Equipment	.00		
4.	Supplies	928.11		
5.	Subcontractor	.00		
6.	Other Costs	2,203.04		
	<b>Total</b>	<b>11,015.20</b>		
<b>20 - TOTAL COSTS</b>				
1.	Total Costs	11,015.20		
	<b>Total</b>	<b>11,015.20</b>		
<b>CONTRACTOR'S CERTIFICATION</b>				
<p>I hereby certify under penalty of perjury that I am the duly appointed, qualified, and acting officer of the herein named Agency, Department, Board, Commission, Office or Institution, and that to the best of my knowledge, the actual expenditures and activities made during this reporting period contained within this document are in all respects true, correct, and in accordance with the purpose, terms and conditions of the contract referenced above, Federal and State Regulations or other statutes.</p>				
Authorized Person (Print Name/Title): Grace Slavik / Post-Award Manager		Signature: 		Date: 02/05/2019
<b>CSD ACCOUNTING USE ONLY</b>				
Payment:		PCA#		
Approved By:		Date:		

## 2018 CALEITC FREE TAX PREP ASSISTANCE EXPENDITURE/ACTIVITY REPORT

Contractor: THE UNIVERSITY CORPORATION		Contract Number: 18T-8101	Report Period: 12/1/18 - 12/31/18	Adjustment: 0
Prepared by (Name/Title): Michael Epping / Post Award Analyst		E-mail Address: michael.epping@csun.edu	Telephone: 8186777975	Fax Number: 8186772671
<b>10 - FREE TAX PREPARATION ASSISTANCE GRANT ACTIVITIES</b>				
1.	Salaries, Wages, and Fringe Benefits			8,191.78
2.	Travel			.00
3.	Equipment			.00
4.	Supplies			1,246.67
5.	Subcontractor			.00
6.	Other Costs			2,359.62
	<b>Total</b>			<b>11,798.07</b>
<b>20 - TOTAL COSTS</b>				
1.	Total Costs			11,798.07
	<b>Total</b>			<b>11,798.07</b>
<b>CONTRACTOR'S CERTIFICATION</b>				
I hereby certify under penalty of perjury that I am the duly appointed, qualified, and acting officer of the herein named Agency, Department, Board, Commission, Office or Institution, and that to the best of my knowledge, the actual expenditures and activities made during this reporting period contained within this document are in all respects true, correct, and in accordance with the purpose, terms and conditions of the contract referenced above, Federal and State Regulations or other statutes.				
Authorized Person (Print Name/Title): Grace Slavik / Post-Award Manager		Signature: 		Date: 02/05/2019
<b>CSD ACCOUNTING USE ONLY</b>				
Payment:		PCA#		
Approved By:		Date:		

**2018 CALEITC FREE TAX PREP ASSISTANCE EXPENDITURE/ACTIVITY REPORT**

Contractor: Orange County United Way		Contract Number: 18T-8106	Report Period: 11/1/18 - 11/30/18	Adjustment: 0
Prepared by (Name/Title): Maria Mugica / Cal EITCEd&OutreachCoord	E-mail Address: MariaM@UnitedWayOC.org		Telephone: 949-477-4506	Fax Number: 949-271-8002

**10 - FREE TAX PREPARATION ASSISTANCE GRANT ACTIVITIES**

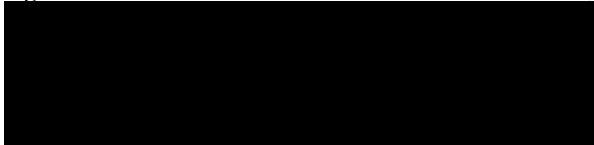
1.	Salaries, Wages, and Fringe Benefits	13,836.50
2.	Travel	76.98
3.	Equipment	.00
4.	Supplies	2,399.25
5.	Subcontractor	.00
6.	Other Costs	.00
	<b>Total</b>	<b>16,312.73</b>

**20 - TOTAL COSTS**

1.	Total Costs	<b>16,312.73</b>
	<b>Total</b>	<b>16,312.73</b>

**CONTRACTOR'S CERTIFICATION**

I hereby certify under penalty of perjury that I am the duly appointed, qualified, and acting officer of the herein named Agency, Department, Board, Commission, Office or Institution, and that to the best of my knowledge, the actual expenditures and activities made during this reporting period contained within this document are in all respects true, correct, and in accordance with the purpose, terms and conditions of the contract referenced above, Federal and State Regulations or other statutes.

Authorized Person (Print Name/Title): Ann Truxaw-Ramirez / Grants/Proposal Development Manager	Signature: 	Date: 12/21/2018
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**CSD ACCOUNTING USE ONLY**

Payment:	PCA#
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Approved By:	Date:
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## 2018 CALEITC FREE TAX PREP ASSISTANCE EXPENDITURE/ACTIVITY REPORT

Contractor: Orange County United Way		Contract Number: 18T-8106	Report Period: 12/1/18 - 12/31/18	Adjustment: 0
Prepared by (Name/Title): Maria Mugica / Cal EITCEd&OutreachCoord		E-mail Address: MariaM@UnitedWayOC.org	Telephone: 949-263-6102	Fax Number: 949-271-8002
<b>10 - FREE TAX PREPARATION ASSISTANCE GRANT ACTIVITIES</b>				
1.	Salaries, Wages, and Fringe Benefits	11,453.25		
2.	Travel	.00		
3.	Equipment	3,153.97		
4.	Supplies	.00		
5.	Subcontractor	4,600.00		
6.	Other Costs	.00		
	<b>Total</b>	<b>19,207.22</b>		
<b>20 - TOTAL COSTS</b>				
1.	Total Costs	<b>19,207.22</b>		
	<b>Total</b>	<b>19,207.22</b>		
<b><i>CONTRACTOR'S CERTIFICATION</i></b>				
I hereby certify under penalty of perjury that I am the duly appointed, qualified, and acting officer of the herein named Agency, Department, Board, Commission, Office or Institution, and that to the best of my knowledge, the actual expenditures and activities made during this reporting period contained within this document are in all respects true, correct, and in accordance with the purpose, terms and conditions of the contract referenced above, Federal and State Regulations or other statutes.				
Authorized Person (Print Name/Title): Ann Truxaw-Ramirez / Grants/Proposal Development Manager		Signature: 	Date: 01/25/2019	
<b>CSD ACCOUNTING USE ONLY</b>				
Payment:		PCA#		
Approved By:		Date:		

## 2018 CALEITC FREE TAX PREP ASSISTANCE EXPENDITURE/ACTIVITY REPORT

Contractor: Koreatown Youth & Comm Ctr Inc		Contract Number: 18T-8104	Report Period: 11/1/18 - 11/30/18	Adjustment: 0
Prepared by (Name/Title): Arthur Cho / Finance Manager	E-mail Address: acho@kycccla.org	Telephone: 213-365-7400 ex	Fax Number: 213-927-0017	

10 - FREE TAX PREPARATION ASSISTANCE GRANT ACTIVITIES		
1.	Salaries, Wages, and Fringe Benefits	6,356.13
2.	Travel	.00
3.	Equipment	.00
4.	Supplies	.00
5.	Subcontractor	.00
6.	Other Costs	.00
	<b>Total</b>	<b>6,356.13</b>

20 - TOTAL COSTS		
1.	Total Costs	6,356.13
	<b>Total</b>	<b>6,356.13</b>

### CONTRACTOR'S CERTIFICATION


I hereby certify under penalty of perjury that I am the duly appointed, qualified, and acting officer of the herein named Agency, Department, Board, Commission, Office or Institution, and that to the best of my knowledge, the actual expenditures and activities made during this reporting period contained within this document are in all respects true, correct, and in accordance with the purpose, terms and conditions of the contract referenced above, Federal and State Regulations or other statutes.

Authorized Person (Print Name/Title): Audrey Casillas / Economic Development Coordinator	Signature: 	Date: 12/20/2018
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### CSD ACCOUNTING USE ONLY

Payment:	PCA#
Approved By:	Date:

## 2018 CALEITC FREE TAX PREP ASSISTANCE EXPENDITURE/ACTIVITY REPORT

Contractor: Koreatown Youth & Comm Ctr Inc		Contract Number: 18T-8104	Report Period: 12/1/18 - 12/31/18	Adjustment: 0
Prepared by (Name/Title): Dustin Cole / Finance Manager	E-mail Address: dcole@kycccla.org	Telephone: 213-365-7400 ex	Fax Number: 213-927-0017	
<b>10 - FREE TAX PREPARATION ASSISTANCE GRANT ACTIVITIES</b>				
1.	Salaries, Wages, and Fringe Benefits	6,356.13		
2.	Travel	.00		
3.	Equipment	.00		
4.	Supplies	.00		
5.	Subcontractor	.00		
6.	Other Costs	.00		
	<b>Total</b>	<b>6,356.13</b>		
<b>20 - TOTAL COSTS</b>				
1.	Total Costs	<b>6,356.13</b>		
	<b>Total</b>	<b>6,356.13</b>		
<b>CONTRACTOR'S CERTIFICATION</b>				
I hereby certify under penalty of perjury that I am the duly appointed, qualified, and acting officer of the herein named Agency, Department, Board, Commission, Office or Institution, and that to the best of my knowledge, the actual expenditures and activities made during this reporting period contained within this document are in all respects true, correct, and in accordance with the purpose, terms and conditions of the contract referenced above, Federal and State Regulations or other statutes.				
Authorized Person (Print Name/Title): Audrey Casillas / Economic Development Coordinator		Signature: 	Date: 02/04/2019	
<b>CSD ACCOUNTING USE ONLY</b>				
Payment:		PCA#		
Approved By:		Date:		


## 2018 CALEITC FREE TAX PREP ASSISTANCE EXPENDITURE/ACTIVITY REPORT

Contractor: Golden State Opportunity Fndtn		Contract Number: 18T-8108	Report Period: 11/1/18 - 11/30/18	Adjustment: 0
Prepared by (Name/Title): Sebastien Chaubard / Associate		E-mail Address: sebastien@goldenstateopportunity.org	Telephone: 510-468-0872-	Fax Number: n/a
<b>10 - FREE TAX PREPARATION ASSISTANCE GRANT ACTIVITIES</b>				
1.	Salaries, Wages, and Fringe Benefits		.00	
2.	Travel		.00	
3.	Equipment		.00	
4.	Supplies		.00	
5.	Subcontractor		.00	
6.	Other Costs		6,000.00	
	<b>Total</b>			<b>6,000.00</b>
<b>20 - TOTAL COSTS</b>				
1.	Total Costs			<b>6,000.00</b>
	<b>Total</b>			<b>6,000.00</b>
<b>CONTRACTOR'S CERTIFICATION</b>				
I hereby certify under penalty of perjury that I am the duly appointed, qualified, and acting officer of the herein named Agency, Department, Board, Commission, Office or Institution, and that to the best of my knowledge, the actual expenditures and activities made during this reporting period contained within this document are in all respects true, correct, and in accordance with the purpose, terms and conditions of the contract referenced above, Federal and State Regulations or other statutes.				
Authorized Person (Print Name/Title): Josh Fryday / President		Signature: 		Date: 12/26/2018
<b>CSD ACCOUNTING USE ONLY</b>				
Payment:			PCA#	
Approved By:			Date:	

## 2018 CALEITC FREE TAX PREP ASSISTANCE EXPENDITURE/ACTIVITY REPORT

Contractor: Golden State Opportunity Fndtn		Contract Number: 18T-8108	Report Period: 12/1/18 - 12/31/18	Adjustment: 0
Prepared by (Name/Title): Sebastien Chaubard / Associate		E-mail Address: sebastien@goldenstateopportunity.org	Telephone: 510-468-0872-	Fax Number: n/a
<b>10 - FREE TAX PREPARATION ASSISTANCE GRANT ACTIVITIES</b>				
1.	Salaries, Wages, and Fringe Benefits		.00	
2.	Travel		.00	
3.	Equipment		.00	
4.	Supplies		.00	
5.	Subcontractor		34,000.00	
6.	Other Costs		6,000.00	
	<b>Total</b>			<b>40,000.00</b>
<b>20 - TOTAL COSTS</b>				
1.	Total Costs			<b>40,000.00</b>
	<b>Total</b>			<b>40,000.00</b>
<b>CONTRACTOR'S CERTIFICATION</b>				
I hereby certify under penalty of perjury that I am the duly appointed, qualified, and acting officer of the herein named Agency, Department, Board, Commission, Office or Institution, and that to the best of my knowledge, the actual expenditures and activities made during this reporting period contained within this document are in all respects true, correct, and in accordance with the purpose, terms and conditions of the contract referenced above, Federal and State Regulations or other statutes.				
Authorized Person (Print Name/Title): Josh Fryday / President		Signature: 		Date: 01/25/2019
<b>CSD ACCOUNTING USE ONLY</b>				
Payment:			PCA#	
Approved By:			Date:	


## 2018 CALEITC FREE TAX PREP ASSISTANCE EXPENDITURE/ACTIVITY REPORT

Contractor: Golden State Opportunity Fndtn		Contract Number: 18T-8107	Report Period: 11/1/18 - 11/30/18	Adjustment: 0
Prepared by (Name/Title): Sebastien Chaubard / Associate		E-mail Address: sebastien@goldenstateopportunity.org	Telephone: 510-468-0872-	Fax Number: n/a
<b>10 - FREE TAX PREPARATION ASSISTANCE GRANT ACTIVITIES</b>				
1.	Salaries, Wages, and Fringe Benefits			.00
2.	Travel			.00
3.	Equipment			.00
4.	Supplies			.00
5.	Subcontractor			.00
6.	Other Costs			4,750.00
	<b>Total</b>			<b>4,750.00</b>
<b>20 - TOTAL COSTS</b>				
1.	Total Costs			4,750.00
	<b>Total</b>			<b>4,750.00</b>
<b>CONTRACTOR'S CERTIFICATION</b>				
I hereby certify under penalty of perjury that I am the duly appointed, qualified, and acting officer of the herein named Agency, Department, Board, Commission, Office or Institution, and that to the best of my knowledge, the actual expenditures and activities made during this reporting period contained within this document are in all respects true, correct, and in accordance with the purpose, terms and conditions of the contract referenced above, Federal and State Regulations or other statutes.				
Authorized Person (Print Name/Title): Josh Fryday / President		Signature: 		Date: 12/26/2018
<b>CSD ACCOUNTING USE ONLY</b>				
Payment:			PCA#	
Approved By:			Date:	

## 2018 CALEITC FREE TAX PREP ASSISTANCE EXPENDITURE/ACTIVITY REPORT


Contractor: Golden State Opportunity Fndtn		Contract Number: 18T-8107	Report Period: 12/1/18 - 12/31/18	Adjustment: 0
Prepared by (Name/Title): Sebastien Chaubard / Outreach Manager		E-mail Address: sebastien@goldenstateopportunity.org	Telephone: 510-468-0872-	Fax Number: N/A
<b>10 - FREE TAX PREPARATION ASSISTANCE GRANT ACTIVITIES</b>				
1.	Salaries, Wages, and Fringe Benefits		.00	
2.	Travel		.00	
3.	Equipment		.00	
4.	Supplies		.00	
5.	Subcontractor		16,000.00	
6.	Other Costs		4,750.00	
	<b>Total</b>			<b>20,750.00</b>
<b>20 - TOTAL COSTS</b>				
1.	Total Costs			<b>20,750.00</b>
	<b>Total</b>			<b>20,750.00</b>
<b><i>CONTRACTOR'S CERTIFICATION</i></b>				
I hereby certify under penalty of perjury that I am the duly appointed, qualified, and acting officer of the herein named Agency, Department, Board, Commission, Office or Institution, and that to the best of my knowledge, the actual expenditures and activities made during this reporting period contained within this document are in all respects true, correct, and in accordance with the purpose, terms and conditions of the contract referenced above, Federal and State Regulations or other statutes.				
Authorized Person (Print Name/Title): Josh Fryday / President		Signature: 		Date: 01/25/2019
<b>CSD ACCOUNTING USE ONLY</b>				
Payment:			PCA#	
Approved By:			Date:	

## 2018 CALEITC FREE TAX PREP ASSISTANCE EXPENDITURE/ACTIVITY REPORT

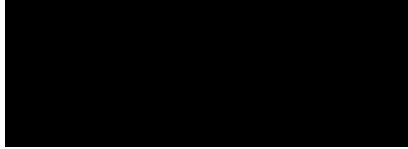
Contractor: Golden State Opportunity Fndtn		Contract Number: 18T-8103	Report Period: 11/1/18 - 11/30/18	Adjustment: 0
Prepared by (Name/Title): Sebastien Chaubard / Associate		E-mail Address: sebastien@goldenstateopportunity.org	Telephone: 510-468-0872-	Fax Number: n/a
<b>10 - FREE TAX PREPARATION ASSISTANCE GRANT ACTIVITIES</b>				
1.	Salaries, Wages, and Fringe Benefits			10,000.00
2.	Travel			.00
3.	Equipment			.00
4.	Supplies			.00
5.	Subcontractor			.00
6.	Other Costs			4,469.00
	<b>Total</b>			<b>14,469.00</b>
<b>20 - TOTAL COSTS</b>				
1.	Total Costs			<b>14,469.00</b>
	<b>Total</b>			<b>14,469.00</b>
<b><i>CONTRACTOR'S CERTIFICATION</i></b>				
I hereby certify under penalty of perjury that I am the duly appointed, qualified, and acting officer of the herein named Agency, Department, Board, Commission, Office or Institution, and that to the best of my knowledge, the actual expenditures and activities made during this reporting period contained within this document are in all respects true, correct, and in accordance with the purpose, terms and conditions of the contract referenced above, Federal and State Regulations or other statutes.				
Authorized Person (Print Name/Title): Josh Fryday / President		Signature: 		Date: 12/26/2018
<b>CSD ACCOUNTING USE ONLY</b>				
Payment:			PCA#	
Approved By:			Date:	




## 2018 CALEITC FREE TAX PREP ASSISTANCE EXPENDITURE/ACTIVITY REPORT

Contractor: Golden State Opportunity Fndtn		Contract Number: 18T-8103	Report Period: 12/1/18 - 12/31/18	Adjustment: 0
Prepared by (Name/Title): Sebastien Chaubard / Outreach Manager		E-mail Address: sebastien@goldenstateopportunity.org	Telephone: 510-468-0872-	Fax Number: N/A
<b>10 - FREE TAX PREPARATION ASSISTANCE GRANT ACTIVITIES</b>				
1.	Salaries, Wages, and Fringe Benefits			10,000.00
2.	Travel			.00
3.	Equipment			.00
4.	Supplies			.00
5.	Subcontractor			59,000.00
6.	Other Costs			4,469.00
	<b>Total</b>			<b>73,469.00</b>
<b>20 - TOTAL COSTS</b>				
1.	Total Costs			73,469.00
	<b>Total</b>			<b>73,469.00</b>
<b><i>CONTRACTOR'S CERTIFICATION</i></b>				
I hereby certify under penalty of perjury that I am the duly appointed, qualified, and acting officer of the herein named Agency, Department, Board, Commission, Office or Institution, and that to the best of my knowledge, the actual expenditures and activities made during this reporting period contained within this document are in all respects true, correct, and in accordance with the purpose, terms and conditions of the contract referenced above, Federal and State Regulations or other statutes.				
Authorized Person (Print Name/Title): Josh Fryday / President		Signature: 		Date: 01/25/2019
<b>CSD ACCOUNTING USE ONLY</b>				
Payment:		PCA#		
Approved By:		Date:		


## 2018 CALEITC FREE TAX PREP ASSISTANCE EXPENDITURE/ACTIVITY REPORT

Contractor: City of Oakland HSD		Contract Number: 18T-8110	Report Period: 11/1/18 - 11/30/18	Adjustment: 0
Prepared by (Name/Title): Annie Friberg / Accountant II		E-mail Address: afriber@oaklandca.gov	Telephone: (510) 238-6895	Fax Number: (510) 238-6784
<b>10 - FREE TAX PREPARATION ASSISTANCE GRANT ACTIVITIES</b>				
1.	Salaries, Wages, and Fringe Benefits			.00
2.	Travel			.00
3.	Equipment			.00
4.	Supplies			.00
5.	Subcontractor			.00
6.	Other Costs			.00
	<b>Total</b>			<b>.00</b>
<b>20 - TOTAL COSTS</b>				
1.	Total Costs			<b>.00</b>
	<b>Total</b>			<b>.00</b>
<b><i>CONTRACTOR'S CERTIFICATION</i></b>				
I hereby certify under penalty of perjury that I am the duly appointed, qualified, and acting officer of the herein named Agency, Department, Board, Commission, Office or Institution, and that to the best of my knowledge, the actual expenditures and activities made during this reporting period contained within this document are in all respects true, correct, and in accordance with the purpose, terms and conditions of the contract referenced above, Federal and State Regulations or other statutes.				
Authorized Person (Print Name/Title): Ildefonso Valle / Budget & Fiscal Manager		Signature: 	Date: 01/03/2019	
<b>CSD ACCOUNTING USE ONLY</b>				
Payment:		PCA#		
Approved By:		Date:		

## 2018 CALEITC FREE TAX PREP ASSISTANCE EXPENDITURE/ACTIVITY REPORT

Contractor: City of Oakland HSD		Contract Number: 18T-8110	Report Period: 12/1/18 - 12/31/18	Adjustment: 0
Prepared by (Name/Title): Annie Friberg / Accountant II		E-mail Address: afriberg@oaklandca.gov	Telephone: (510)238-6895	Fax Number: (510) 238-6784
<b>10 - FREE TAX PREPARATION ASSISTANCE GRANT ACTIVITIES</b>				
1.	Salaries, Wages, and Fringe Benefits			.00
2.	Travel			.00
3.	Equipment			.00
4.	Supplies			.00
5.	Subcontractor			.00
6.	Other Costs			.00
	<b>Total</b>			<b>.00</b>
<b>20 - TOTAL COSTS</b>				
1.	Total Costs			<b>.00</b>
	<b>Total</b>			<b>.00</b>
<b><i>CONTRACTOR'S CERTIFICATION</i></b>				
I hereby certify under penalty of perjury that I am the duly appointed, qualified, and acting officer of the herein named Agency, Department, Board, Commission, Office or Institution, and that to the best of my knowledge, the actual expenditures and activities made during this reporting period contained within this document are in all respects true, correct, and in accordance with the purpose, terms and conditions of the contract referenced above, Federal and State Regulations or other statutes.				
Authorized Person (Print Name/Title): Ildefonso Valle / Budget & Fiscal Manager		Signature: 	Date: 01/03/2019	
<b>CSD ACCOUNTING USE ONLY</b>				
Payment:		PCA#		
Approved By:		Date:		

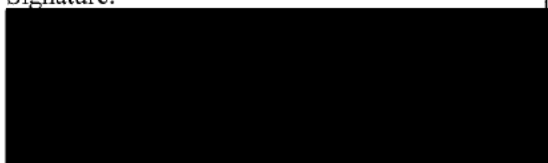
## 2018 CALEITC FREE TAX PREP ASSISTANCE EXPENDITURE/ACTIVITY REPORT

Contractor: AARP FOUNDATION		Contract Number: 18T-8115	Report Period: 11/1/18 - 11/30/18	Adjustment: 0
Prepared by (Name/Title): Paul Kerrigan / Group Controller		E-mail Address: pkerrigan@aarp.org	Telephone: 202-434-6755	Fax Number: 202-460-8343
<b>10 - FREE TAX PREPARATION ASSISTANCE GRANT ACTIVITIES</b>				
1.	Salaries, Wages, and Fringe Benefits			1,396.89
2.	Travel			.00
3.	Equipment			.00
4.	Supplies			.00
5.	Subcontractor			.00
6.	Other Costs			.00
	<b>Total</b>			<b>1,396.89</b>
<b>20 - TOTAL COSTS</b>				
1.	Total Costs			1,396.89
	<b>Total</b>			<b>1,396.89</b>
<b><i>CONTRACTOR'S CERTIFICATION</i></b>				
I hereby certify under penalty of perjury that I am the duly appointed, qualified, and acting officer of the herein named Agency, Department, Board, Commission, Office or Institution, and that to the best of my knowledge, the actual expenditures and activities made during this reporting period contained within this document are in all respects true, correct, and in accordance with the purpose, terms and conditions of the contract referenced above, Federal and State Regulations or other statutes.				
Authorized Person (Print Name/Title): JackieLynn Coleman / Director, National Business Operations		Signature: 		Date: 12/20/2018
<b>CSD ACCOUNTING USE ONLY</b>				
Payment:			PCA#	
Approved By:			Date:	


## 2018 CALEITC FREE TAX PREP ASSISTANCE EXPENDITURE/ACTIVITY REPORT

Contractor: AARP FOUNDATION		Contract Number: 18T-8115	Report Period: 12/1/18 - 12/31/18	Adjustment: 0
Prepared by (Name/Title): Paul Kerrigan / Group Controller		E-mail Address: pkerrigan@aarp.org	Telephone: 202-434-6755	Fax Number: 202-434-6550
<b>10 - FREE TAX PREPARATION ASSISTANCE GRANT ACTIVITIES</b>				
1.	Salaries, Wages, and Fringe Benefits	2,204.89		
2.	Travel	.00		
3.	Equipment	.00		
4.	Supplies	.00		
5.	Subcontractor	50,000.00		
6.	Other Costs	.00		
	<b>Total</b>	<b>52,204.89</b>		
<b>20 - TOTAL COSTS</b>				
1.	Total Costs	<b>52,204.89</b>		
	<b>Total</b>	<b>52,204.89</b>		
<b>CONTRACTOR'S CERTIFICATION</b>				
I hereby certify under penalty of perjury that I am the duly appointed, qualified, and acting officer of the herein named Agency, Department, Board, Commission, Office or Institution, and that to the best of my knowledge, the actual expenditures and activities made during this reporting period contained within this document are in all respects true, correct, and in accordance with the purpose, terms and conditions of the contract referenced above, Federal and State Regulations or other statutes.				
Authorized Person (Print Name/Title): JackieLynn Coleman / Director, National Business Operations		Signature: 	Date: 01/24/2019	
<b>CSD ACCOUNTING USE ONLY</b>				
Payment:		PCA#		
Approved By:		Date:		

## 2018 CALEITC FREE TAX PREP ASSISTANCE EXPENDITURE/ACTIVITY REPORT

Contractor: AARP FOUNDATION		Contract Number: 18T-8102	Report Period: 11/1/18 - 11/30/18	Adjustment: 0
Prepared by (Name/Title): Paul Kerrigan / Group Controller		E-mail Address: pkerrigan@aarp.org	Telephone: 202-434-6755	Fax Number: 2024608343
<b>10 - FREE TAX PREPARATION ASSISTANCE GRANT ACTIVITIES</b>				
1.	Salaries, Wages, and Fringe Benefits			1,214.66
2.	Travel			.00
3.	Equipment			.00
4.	Supplies			.00
5.	Subcontractor			.00
6.	Other Costs			.00
	<b>Total</b>			<b>1,214.66</b>
<b>20 - TOTAL COSTS</b>				
1.	Total Costs			1,214.66
	<b>Total</b>			<b>1,214.66</b>
<b><i>CONTRACTOR'S CERTIFICATION</i></b>				
I hereby certify under penalty of perjury that I am the duly appointed, qualified, and acting officer of the herein named Agency, Department, Board, Commission, Office or Institution, and that to the best of my knowledge, the actual expenditures and activities made during this reporting period contained within this document are in all respects true, correct, and in accordance with the purpose, terms and conditions of the contract referenced above, Federal and State Regulations or other statutes.				
Authorized Person (Print Name/Title): JackieLynn Coleman / Director, National Business Operations		Signature: 		Date: 12/20/2018
<b>CSD ACCOUNTING USE ONLY</b>				
Payment:			PCA#	
Approved By:			Date:	

## 2018 CALEITC FREE TAX PREP ASSISTANCE EXPENDITURE/ACTIVITY REPORT

Contractor: AARP FOUNDATION		Contract Number: 18T-8102	Report Period: 12/1/18 - 12/31/18	Adjustment: 0
Prepared by (Name/Title): Paul Kerrigan / Group Controller		E-mail Address: pkerrigan@aarp.org	Telephone: 202-434-6755	Fax Number: 202-434-6550
<b>10 - FREE TAX PREPARATION ASSISTANCE GRANT ACTIVITIES</b>				
1.	Salaries, Wages, and Fringe Benefits	1,756.89		
2.	Travel	.00		
3.	Equipment	.00		
4.	Supplies	.00		
5.	Subcontractor	.00		
6.	Other Costs	.00		
	<b>Total</b>	<b>1,756.89</b>		
<b>20 - TOTAL COSTS</b>				
1.	Total Costs	1,756.89		
	<b>Total</b>	<b>1,756.89</b>		
<b>CONTRACTOR'S CERTIFICATION</b>				
I hereby certify under penalty of perjury that I am the duly appointed, qualified, and acting officer of the herein named Agency, Department, Board, Commission, Office or Institution, and that to the best of my knowledge, the actual expenditures and activities made during this reporting period contained within this document are in all respects true, correct, and in accordance with the purpose, terms and conditions of the contract referenced above, Federal and State Regulations or other statutes.				
Authorized Person (Print Name/Title): JackieLynn Coleman / Director, National Business Operations		Signature: 	Date: 01/24/2019	
<b>CSD ACCOUNTING USE ONLY</b>				
Payment:		PCA#		
Approved By:		Date:		

**2018 CALEITC FREE TAX PREP ASSISTANCE EXPENDITURE/ACTIVITY REPORT**

Contractor: United Way of San Diego County		Contract Number: 18T-8105	Report Period: 11/1/18 - 11/30/18	Adjustment: 0
Prepared by (Name/Title): Torrey Albertazzi / Community Impact Liaison	E-mail Address: talbertazzi@uwsd.org		Telephone: 858-636-4124	Fax Number: 858-492-2062

**10 - FREE TAX PREPARATION ASSISTANCE GRANT ACTIVITIES**

1.	Salaries, Wages, and Fringe Benefits	732.14
2.	Travel	.00
3.	Equipment	.00
4.	Supplies	.00
5.	Subcontractor	12,131.00
6.	Other Costs	.00
	<b>Total</b>	<b>12,863.14</b>

**20 - TOTAL COSTS**

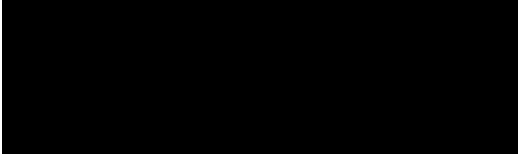
1.	Total Costs	<b>12,863.14</b>
	<b>Total</b>	<b>12,863.14</b>

**CONTRACTOR'S CERTIFICATION**

I hereby certify under penalty of perjury that I am the duly appointed, qualified, and acting officer of the herein named Agency, Department, Board, Commission, Office or Institution, and that to the best of my knowledge, the actual expenditures and activities made during this reporting period contained within this document are in all respects true, correct, and in accordance with the purpose, terms and conditions of the contract referenced above, Federal and State Regulations or other statutes.

Authorized Person (Print Name/Title):  
Terri Johnson / VP Controller

Signature:



Date:  
12/27/2018

**CSD ACCOUNTING USE ONLY**

Payment: PCA#

Approved By: Date:



## 2018 CALEITC FREE TAX PREP ASSISTANCE EXPENDITURE/ACTIVITY REPORT


Contractor: United Way of San Diego County		Contract Number: 18T-8105	Report Period: 12/1/18 - 12/31/18	Adjustment: 0
Prepared by (Name/Title): Torrey Albertazzi / Community Impact Liaison		E-mail Address: talbertazzi@uwsd.org	Telephone: 858-636-4124	Fax Number: 858-492-2062
<b>10 - FREE TAX PREPARATION ASSISTANCE GRANT ACTIVITIES</b>				
1.	Salaries, Wages, and Fringe Benefits	603.03		
2.	Travel	.00		
3.	Equipment	.00		
4.	Supplies	.00		
5.	Subcontractor	30,948.79		
6.	Other Costs	.00		
	<b>Total</b>	<b>31,551.82</b>		
<b>20 - TOTAL COSTS</b>				
1.	Total Costs	<b>31,551.82</b>		
	<b>Total</b>	<b>31,551.82</b>		
<b><i>CONTRACTOR'S CERTIFICATION</i></b>				
I hereby certify under penalty of perjury that I am the duly appointed, qualified, and acting officer of the herein named Agency, Department, Board, Commission, Office or Institution, and that to the best of my knowledge, the actual expenditures and activities made during this reporting period contained within this document are in all respects true, correct, and in accordance with the purpose, terms and conditions of the contract referenced above, Federal and State Regulations or other statutes.				
Authorized Person (Print Name/Title): Terri Johnson / VP Controller		Signature: 		Date: 01/23/2019
<b>CSD ACCOUNTING USE ONLY</b>				
Payment:		PCA#		
Approved By:		Date:		

**2018 CALEITC FREE TAX PREP ASSISTANCE EXPENDITURE/ACTIVITY REPORT**

Contractor: United Way Fresno & Madera Co		Contract Number: 18T-8112	Report Period: 11/1/18 - 11/30/18	Adjustment: 0
Prepared by (Name/Title): Suliana Juarez / IT Coordinator		E-mail Address: Sjuarez@uwfm.org	Telephone: 559-243-3665	Fax Number: 5592288159
<b>10 - FREE TAX PREPARATION ASSISTANCE GRANT ACTIVITIES</b>				
1.	Salaries, Wages, and Fringe Benefits	4,810.38		
2.	Travel	.00		
3.	Equipment	.00		
4.	Supplies	.00		
5.	Subcontractor	9,500.00		
6.	Other Costs	345.64		
	<b>Total</b>	<b>14,656.02</b>		
<b>20 - TOTAL COSTS</b>				
1.	Total Costs	<b>14,656.02</b>		
	<b>Total</b>	<b>14,656.02</b>		

**CONTRACTOR'S CERTIFICATION**

I hereby certify under penalty of perjury that I am the duly appointed, qualified, and acting officer of the herein named Agency, Department, Board, Commission, Office or Institution, and that to the best of my knowledge, the actual expenditures and activities made during this reporting period contained within this document are in all respects true, correct, and in accordance with the purpose, terms and conditions of the contract referenced above, Federal and State Regulations or other statutes.

Authorized Person (Print Name/Title): Lindsay Callahan / President and CEO	Signature: 	Date: 12/27/2018
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**CSD ACCOUNTING USE ONLY**

Payment:	PCA#
Approved By:	Date:


## 2018 CALEITC FREE TAX PREP ASSISTANCE YEAR-TO-DATE (YTD) EXPENDITURE/ACTIVITY REPORT

**60488 - United Way Fresno & Madera Co - 18T-8112 - All Data**


execute sp\_ears\_ytd\_report 'JCastellon','18T-8112','FREE TAX PREP ASSISTANCE',1,2,0

<b>FREE TAX PREPARATION ASSISTANCE GRANT ACTIVITIES</b>	<b>Projected</b>	<b>11/1/18-11/30/18</b>	<b>12/1/18-12/31/18</b>	<b>YTD</b>	<b>% Used</b>
Salaries, Wages, and Fringe Benefits	57068.00	4810.38	8128.37	12938.75	22.67%
Travel	3750.00	0.00	99.19	99.19	2.65%
Equipment	3700.00	0.00	0.00	0.00	0.00%
Supplies	1000.00	0.00	0.00	0.00	0.00%
Subcontractor	67822.00	9500.00	7002.50	16502.50	24.33%
Other Costs	17660.00	345.64	115.30	460.94	2.61%
<b>Subtotal:</b>	<b>151000.00</b>	<b>14656.02</b>	<b>15345.36</b>	<b>30001.38</b>	<b>19.87%</b>
<b>TOTAL COSTS</b>	<b>Projected</b>	<b>11/1/18-11/30/18</b>	<b>12/1/18-12/31/18</b>	<b>YTD</b>	<b>% Used</b>
Total Costs	151000.00	14656.02	15345.36	30001.38	19.87%

## 2018 CALEITC FREE TAX PREP ASSISTANCE EXPENDITURE/ACTIVITY REPORT

Contractor: United Way CA Capital Region		Contract Number: 18T-8109	Report Period: 11/1/18 - 11/30/18	Adjustment: 0
Prepared by (Name/Title): Erin Manning / Finance Manager		E-mail Address: erin.manning@uwccr.org	Telephone: 916-368-3013	Fax Number: 916-368-3029
<b>10 - FREE TAX PREPARATION ASSISTANCE GRANT ACTIVITIES</b>				
1.	Salaries, Wages, and Fringe Benefits	557.74		
2.	Travel	.00		
3.	Equipment	.00		
4.	Supplies	.00		
5.	Subcontractor	3,256.50		
6.	Other Costs	419.57		
	<b>Total</b>	<b>4,233.81</b>		
<b>20 - TOTAL COSTS</b>				
1.	Total Costs	<b>4,233.81</b>		
	<b>Total</b>	<b>4,233.81</b>		
<b><i>CONTRACTOR'S CERTIFICATION</i></b>				
I hereby certify under penalty of perjury that I am the duly appointed, qualified, and acting officer of the herein named Agency, Department, Board, Commission, Office or Institution, and that to the best of my knowledge, the actual expenditures and activities made during this reporting period contained within this document are in all respects true, correct, and in accordance with the purpose, terms and conditions of the contract referenced above, Federal and State Regulations or other statutes.				
Authorized Person (Print Name/Title): Jennifer Macias / Chief Operating Officer		Signature: 	Date: 01/14/2019	
<b>CSD ACCOUNTING USE ONLY</b>				
Payment:		PCA#		
Approved By:		Date:		

## 2018 CALEITC FREE TAX PREP ASSISTANCE EXPENDITURE/ACTIVITY REPORT

Contractor: United Way Bay Area		Contract Number: 18T-8111	Report Period: 11/1/18 - 11/30/18	Adjustment: 0
Prepared by (Name/Title): Kelly Batson / VP, Program Operations	E-mail Address: kbatson@uwba.org		Telephone: 415-808-4315	Fax Number: 415-808-4315
<b>10 - FREE TAX PREPARATION ASSISTANCE GRANT ACTIVITIES</b>				
1.	Salaries, Wages, and Fringe Benefits			8,424.73
2.	Travel			.00
3.	Equipment			.00
4.	Supplies			.00
5.	Subcontractor			.00
6.	Other Costs			.00
	<b>Total</b>			<b>8,424.73</b>
<b>20 - TOTAL COSTS</b>				
1.	Total Costs			<b>8,424.73</b>
	<b>Total</b>			<b>8,424.73</b>
<b><i>CONTRACTOR'S CERTIFICATION</i></b>				
I hereby certify under penalty of perjury that I am the duly appointed, qualified, and acting officer of the herein named Agency, Department, Board, Commission, Office or Institution, and that to the best of my knowledge, the actual expenditures and activities made during this reporting period contained within this document are in all respects true, correct, and in accordance with the purpose, terms and conditions of the contract referenced above, Federal and State Regulations or other statutes.				
Authorized Person (Print Name/Title): Maria Nguyen / Senior Director, Contracts and Grants Co		Signature: 		Date: 12/20/2018
<b>CSD ACCOUNTING USE ONLY</b>				
Payment:		PCA#		
Approved By:		Date:		

## 2018 CALEITC FREE TAX PREP ASSISTANCE EXPENDITURE/ACTIVITY REPORT

Contractor: United Ways of California		Contract Number: 18T-8114	Report Period: 12/1/18 - 12/31/18	Adjustment: 0
Prepared by (Name/Title): Max Moy-Borgen / Income Program Manager		E-mail Address: mmoy-borgen@unitedwaysca.org	Telephone: 510-499-3734	Fax Number: 8779088922
<b>10 - FREE TAX PREPARATION ASSISTANCE GRANT ACTIVITIES</b>				
1.	Salaries, Wages, and Fringe Benefits			18,603.77
2.	Travel			.00
3.	Equipment			1,413.66
4.	Supplies			.00
5.	Subcontractor			34,250.65
6.	Other Costs			6,618.45
	<b>Total</b>			<b>60,886.53</b>
<b>20 - TOTAL COSTS</b>				
1.	Total Costs			<b>60,886.53</b>
	<b>Total</b>			<b>60,886.53</b>
<b>CONTRACTOR'S CERTIFICATION</b>				
I hereby certify under penalty of perjury that I am the duly appointed, qualified, and acting officer of the herein named Agency, Department, Board, Commission, Office or Institution, and that to the best of my knowledge, the actual expenditures and activities made during this reporting period contained within this document are in all respects true, correct, and in accordance with the purpose, terms and conditions of the contract referenced above, Federal and State Regulations or other statutes.				
Authorized Person (Print Name/Title): Nalleli Sandoval / Financial Stability Director		Signature: 		Date: 02/06/2019
<b>CSD ACCOUNTING USE ONLY</b>				
Payment:			PCA#	
Approved By:			Date:	