



STATE OF INDIANA

Eric J. Holcomb
Governor

OFFICE OF MANAGEMENT & BUDGET

215 State House
Indianapolis, Indiana 46204-2796
317-232-5610

Cristopher R. Johnston
Director

May 14, 2020

Dear Municipal Chief Executive Officer:

The State of Indiana has received a direct distribution of Coronavirus Relief Funds (CRF) from the United States Treasury that may be used for the limited purposes set forth in section 601(a) of the Social Security Act, as added by section 5001 of the Coronavirus Aid, Relief, and Economic Security Act (CARES Act). As recently announced by Governor Holcomb, \$300,000,000 of these funds will be made available to reimburse certain expenses incurred by Indiana political subdivisions. The funds have been allocated to counties, cities and towns based upon population. Townships seeking reimbursement for eligible COVID-19 expenses should coordinate with their county government. Other political subdivisions should coordinate with their enabling body. School corporations are not eligible for participation in this program. Funding and allocations may be adjusted based upon need.

The Indiana Finance Authority (IFA) has been asked to develop a program to enable eligible (CARES Act) expenditures to quickly be reimbursed. Please go to the IFA web site <https://www.in.gov/ifa/> for additional information as to eligible expenses, the amount allocated to each county and municipality, and to obtain the required documents needed for reimbursement. Questions may be submitted to COVID-19@ifa.in.gov.

Initial guidance from the federal government requires that each state may only reimburse expenditures directly related to addressing the COVID-19 pandemic. The federal guidance provides examples of eligible expenses that include payroll expenses resulting from non-budgeted staffing levels, cleaning or disinfection supplies, medical supplies, personal protection equipment, and testing. A more detailed list of eligible expenses in which the State would like to prioritize can be found on the IFA's web site. Please note: **THE CRF FUNDS MAY NOT BE USED TO OFFSET LOST REVENUES.**

The CARES Act provides that the Inspector General of the United States Department of Treasury shall conduct monitoring and oversight as to the appropriate use of all funds and each state shall be responsible for the appropriate use of all funds, including those disbursed to or on behalf of Indiana political subdivisions. Therefore, the IFA will be asked to implement a strict set of guidelines as to the use of CRF funds and the requirement that each request for reimbursement be supported by appropriate invoices and/or other clear documentation as to their use of funds. Requesting reimbursement for expenses prioritized by the State and set forth in the IFA guidance will limit required third party review and expedite your community's request for reimbursement.

If your community elects to participate in this program, your chief executive must sign and return the Coronavirus Relief Fund Acceptance Certification which can be found on the IFA's website.

Sincerely,

Cristopher R. Johnston

CORONAVIRUS RELIEF FUND ACCEPTANCE CERTIFICATION

I, Barry A Wood, certify that I am the chief executive officer (Chief Executive) of Town of McCordsville, Indiana (Participant) and, on behalf of the Participant, I hereby certify, represent, warrant and agree that:

1. I have the authority to bind the Participant by this certification and to make each related request seeking direct payment and/or reimbursement (each a CARES Act Request whether now or hereafter requested) from the Coronavirus Relief Fund Program (CRF Program) created by the State of Indiana as managed by the Indiana Finance Authority (Finance Authority); and
2. All CRF Program funds (and each CARES Act Request) are subject to section 601(a) of the Social Security Act, as added by Section 5001 of the Coronavirus Aid, Relief, and Economic Security Act (CARES Act); and
3. The State of Indiana and the Finance Authority are authorized to rely upon this certification as a material representation made by the Participant (and by me, as the Chief Executive Officer of the Participant) in connection with each CARES Act Request; and
4. Each CARES Act Request meets the CARES Act qualifications and requirements including but not limited to that:
 - a. All expense payment and reimbursement requests only qualify if: (i) necessary expenditures directly incurred due to the public health emergency with respect to the Coronavirus Disease 2019 (COVID-19); (ii) such are not being accounted for in the budget most recently approved as of March 27, 2020, for the Participant; and (iii) having been incurred during the period that begins March 1, 2020 and ends on December 30, 2020; and
 - b. Each CARES Act Request adheres to federal guidance issued or to be issued on what constitutes a necessary expenditure; and
 - c. Each CARES Act Request is submitted with appropriate documentation, including payroll records, invoices, sales receipts, etc.; and
 - d. CRF Program funds as made available by any CARES Act Request are not used as a revenue replacement for lower than expected tax or other revenue collections; and
 - e. CRF Program funds as made available by any CARES Act Request are not used to reimburse or pay expenditures for which any other emergency COVID-19 supplemental funding (whether state, federal or private in nature) was received for the same expense.
5. Failure of any CARES Act Request to meet any CARES Act qualifications and requirements (or if there is any misrepresentation made by the Participant related to this certification) shall require, upon any request of the Finance Authority, that the Participant repay to the State of Indiana the related CRF Program funds.

6. To the extent that any CARES Act Request submitted by the Participant seeks to pay or reimburse any COVID-19 related expenses incurred by another political subdivision located within the same jurisdiction as the Participant, by this certification, the Participant is making the same certifications, representations, warranties and agreements as set forth above in regards to such a CARES Act Request and for which the Participant shall be fully and legally responsible.

I certify under the penalties of perjury, subject to IC 35-44.1-2-1, that I have read the above certification and my statements contained herein are true and correct to the best of my knowledge.

By: Barry A. Wood

Signature: _____

Title: President, Town Council

Date: _____

STATE OF INDIANA)
) SS:
COUNTY OF Indiana_____)

Before me, a Notary Public in and for said County and State, personally appeared Barry A Wood, known to me to be the President of Town Council of Town of McCordsville, and I acknowledge the execution of the foregoing.

Witness my hand and Notarial Seal this _____ day of _____, 2020.

My Commission Expires:

Notary Public Residing in Hancock County,
Indiana

(Printed Signature)

[IN ORDER TO HAVE ANY COVID-19 RELATED EXPENSES REIMBURSED, THIS FULLY EXECUTED AND NOTARIZED CORONAVIRUS RELIEF FUND ACCEPTANCE CERTIFICATION MUST BE E-MAILED AND SENT VIA U.S. MAIL TO THE FOLLOWING ADDRESS]

E-mail Address: covid-19@ifa.in.gov

U.S. Mail: Indiana Finance Authority
One North Capitol, STE 900
Indianapolis, IN 46204
Attention: Coronavirus Relief Fund Program Administrator