

## Sub Screen: Contract: Z10228781

34	Sub-Recipient Organization (Contractor)*	Sufia Munir Inc. dba Clary Business Machines-M1712		
35	Contract Number*	Z10228781		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$70,274.00		
38	Contract Date *	11/10/2020		
39	Period of Performance Start Date *	11/10/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	3-1901 Kaunualii Hwy		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Lihue		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96766-9500		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	2		
50	Contract Description *	(30) Document Cameras (44) Conference Cameras (16) 24" Touchscreen Monitors (16) Small Form Factor Desktops Expenditure Date Range: 8/12/2020 to 11/10/2020		

### Obligations

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - UH - UH COVID-19 Mitigation Program	\$00	\$70,274.00	\$00	\$70,274.00
<b>Total</b>		\$00	\$70,274.00	\$00	\$70,274.00

### Previous Expenditures (All previous quarters)

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - UH - UH COVID-19 Mitigation Program	11/10/2020	12/30/2020	\$70,274.00	Facilitating Distance Learning	
<b>Total:</b>						\$70,274.00

### Current Quarter Expenditures

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

## Sub Screen: Contract: Z10230909

34	Sub-Recipient Organization (Contractor)*	Y & S TECHNOLOGIES INC.-828859616		
35	Contract Number*	Z10230909		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$225,993.25		
38	Contract Date *	11/06/2020		
39	Period of Performance Start Date *	11/06/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	310 W Kaahumanu Ave		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Kahului		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96732-1643		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	2		
50	Contract Description *	Zoom classroom technology		

### Obligations

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - UH - UH COVID-19 Mitigation Program	\$00	\$225,993.25	\$00	\$225,993.25
<b>Total</b>		\$00	\$225,993.25	\$00	\$225,993.25

### Previous Expenditures (All previous quarters)

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - UH - UH COVID-19 Mitigation Program	11/06/2020	12/30/2020	\$225,993.25	Facilitating Distance Learning	
<b>Total:</b>						\$225,993.25

### Current Quarter Expenditures

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: Z10231109**

34	Sub-Recipient Organization (Contractor)*	UNIVERSITY OF HAWAII SYSTEMS-965088057		
35	Contract Number*	Z10231109		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$164,073.93		
38	Contract Date *	11/13/2020		
39	Period of Performance Start Date *	11/13/2020		
40	Period of Performance End Date *	01/31/2021		
41	Primary Place of Performance Address Line 1 *	310 W Kaahumanu Ave		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Kahului		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96732-1643		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	2		
50	Contract Description *	Laptop computer order - Apple University of Hawaii Book Store		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - UH - UH COVID-19 Mitigation Program	\$00	\$164,073.93	\$00	\$164,073.93
<b>Total</b>		\$00	\$164,073.93	\$00	\$164,073.93

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	001 - UH - UH COVID-19 Mitigation Program	01/10/2021	01/10/2021	\$164,073.93	Facilitating Distance Learning	
<b>Total:</b>						\$164,073.93

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

## Sub Screen: Contract: Z10231184

34	Sub-Recipient Organization (Contractor)*	Y & S TECHNOLOGIES INC.-828859616		
35	Contract Number*	Z10231184		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$209,258.00
38	Contract Date *	11/20/2020		
39	Period of Performance Start Date *	11/20/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	310 W Kaahumanu Ave		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Kahului		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96732-1643		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	2		
50	Contract Description *	Laptop computer order - PC		

### Obligations

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - UH - UH COVID-19 Mitigation Program	\$00	\$209,258.00	\$00	\$209,258.00
<b>Total</b>		\$00	\$209,258.00	\$00	\$209,258.00

### Previous Expenditures (All previous quarters)

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - UH - UH COVID-19 Mitigation Program	11/20/2020	12/30/2020	\$209,258.00	Facilitating Distance Learning	
<b>Total:</b>						\$209,258.00

### Current Quarter Expenditures

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

## Sub Screen: Contract: Z10231298

34	Sub-Recipient Organization (Contractor)*	Y & S TECHNOLOGIES INC.-828859616		
35	Contract Number*	Z10231298		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$144,675.00
38	Contract Date *	11/06/2020		
39	Period of Performance Start Date *	11/06/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	310 W Kaahumanu Ave		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Kahului		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96732-1643		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	2		
50	Contract Description *	Laptop computer order w/charging carts - PC - student loaners		

### Obligations

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - UH - UH COVID-19 Mitigation Program	\$00	\$144,675.00	\$00	\$144,675.00
<b>Total</b>		\$00	\$144,675.00	\$00	\$144,675.00

### Previous Expenditures (All previous quarters)

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - UH - UH COVID-19 Mitigation Program	11/06/2020	12/30/2020	\$144,675.00	Facilitating Distance Learning	
<b>Total:</b>						\$144,675.00

### Current Quarter Expenditures

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: Z10231577**

34	Sub-Recipient Organization (Contractor)*	SIRIUS COMPUTER SOLUTIONS, INC.-004161712		
35	Contract Number*	Z10231577		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$283,192.99		
38	Contract Date *	11/24/2020		
39	Period of Performance Start Date *	11/24/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	310 W Kaahumanu Ave		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Kahului		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96732-1643		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	2		
50	Contract Description *	Virtual Desktop Infrastructure technology		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - UH - UH COVID-19 Mitigation Program	\$00	\$283,192.99	\$00	\$283,192.99
<b>Total</b>		\$00	\$283,192.99	\$00	\$283,192.99

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - UH - UH COVID-19 Mitigation Program	11/24/2020	12/30/2020	\$283,192.99	Facilitating Distance Learning	
<b>Total:</b>						\$283,192.99

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

## Sub Screen: Contract: Z10231614

34	Sub-Recipient Organization (Contractor)*	CARRIER CLASS GREEN INFRASTRUCTURE LLC-966957941		
35	Contract Number*	Z10231614		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$60,000.00
38	Contract Date *	11/17/2020		
39	Period of Performance Start Date *	11/17/2020		
40	Period of Performance End Date *	01/31/2021		
41	Primary Place of Performance Address Line 1 *	45-720 Keaahala Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Kaneohe		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96744-3528		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	2		
50	Contract Description *	2 Velocity solar workstations and @ Momentum solar workstation.		

### Obligations

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - UH - UH COVID-19 Mitigation Program	\$00	\$60,000.00	\$00	\$60,000.00
<b>Total</b>		\$00	\$60,000.00	\$00	\$60,000.00

### Previous Expenditures (All previous quarters)

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	001 - UH - UH COVID-19 Mitigation Program	01/20/2021	01/20/2021	\$60,000.00	Items Not Listed Above	For student social distancing while on campus
<b>Total:</b>						\$60,000.00

### Current Quarter Expenditures

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: Z10231877**

34	Sub-Recipient Organization (Contractor)*	Apple Inc.-60704780		
35	Contract Number*	Z10231877		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$78,883.73
38	Contract Date *	11/24/2020		
39	Period of Performance Start Date *	11/24/2020		
40	Period of Performance End Date *	01/31/2021		
41	Primary Place of Performance Address Line 1 *	45-720 Keaahala Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Kaneohe		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96744-3528		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	2		
50	Contract Description *	30 qty 13-inch MacBook Pro with Touch Bar (part no MWP92LL/A)/15 qty 13-inch MacBook Pro (5-pack, part no Z11H)/1 qty 13-inch MacBook Pro (part no Z11C)		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - UH - UH COVID-19 Mitigation Program	\$00	\$78,883.73	\$00	\$78,883.73
<b>Total</b>		\$00	\$78,883.73	\$00	\$78,883.73

**Previous Expenditures (All previous quarters)**

	52 A	52 B	52 C	52 D	52 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0		\$0.00	Select	
Line 2	001 - UH - UH COVID-19 Mitigation Program	01/13/2021 01/13/2021	\$78,883.73	Facilitating Distance Learning	
<b>Total:</b>					\$78,883.73

**Current Quarter Expenditures**

	53 A	53 B	53 C	53 D	53 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
<b>Total:</b>						\$00



**Sub Screen: Contract: Z10230886**

34	Sub-Recipient Organization (Contractor)*	Century Computers Inc. dba Pacxa-99-035642		
35	Contract Number*	Z10230886		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$767,327.71		
38	Contract Date *	10/23/2020		
39	Period of Performance Start Date *	10/23/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	2520 Correa Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96822-2219		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	HPE Nimble Array and software/licenses		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - UH - UH COVID-19 Mitigation Program	\$00	\$767,327.71	\$00	\$767,327.71
<b>Total</b>		\$00	\$767,327.71	\$00	\$767,327.71

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - UH - UH COVID-19 Mitigation Program	11/25/2020	11/25/2020	\$767,327.71	Facilitating Distance Learning	
<b>Total:</b>						\$767,327.71

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: Z10231268**

34	Sub-Recipient Organization (Contractor)*	Y & S TECHNOLOGIES INC.-828859616		
35	Contract Number*	Z10231268		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$76,700.00
38	Contract Date *	11/15/2020		
39	Period of Performance Start Date *	11/15/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	2520 Correa Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96822-2219		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Computer for student and employee use		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - UH - UH COVID-19 Mitigation Program	\$00	\$76,700.00	\$00	\$76,700.00
<b>Total</b>		\$00	\$76,700.00	\$00	\$76,700.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - UH - UH COVID-19 Mitigation Program	11/16/2020	11/16/2020	\$76,700.00	Facilitating Distance Learning	
<b>Total:</b>						\$76,700.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: Z10231017**

34	Sub-Recipient Organization (Contractor)*	MITEL BUSINESS SYSTEMS, INC.-613993190		
35	Contract Number*	Z10231017		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$171,089.16		
38	Contract Date *	11/12/2020		
39	Period of Performance Start Date *	11/12/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	2520 Correa Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96822-2219		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Software license for remote business telephone support		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - UH - UH COVID-19 Mitigation Program	\$00	\$171,089.16	\$00	\$171,089.16
<b>Total</b>		\$00	\$171,089.16	\$00	\$171,089.16

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - UH - UH COVID-19 Mitigation Program	12/28/2020	12/28/2020	\$171,089.16	Facilitating Distance Learning	
<b>Total:</b>						\$171,089.16

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: Z10231015**

34	Sub-Recipient Organization (Contractor)*	NxTech Systems LLC-91-217598		
35	Contract Number*	Z10231015		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$266,936.26		
38	Contract Date *	11/16/2020		
39	Period of Performance Start Date *	11/16/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	2520 Correa Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96822-2219		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Upgrade of wifi		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - UH - UH COVID-19 Mitigation Program	\$00	\$266,936.26	\$00	\$266,936.26
<b>Total</b>		\$00	\$266,936.26	\$00	\$266,936.26

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - UH - UH COVID-19 Mitigation Program	12/23/2020	12/23/2020	\$266,936.26	Facilitating Distance Learning	
<b>Total:</b>						\$266,936.26

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

## Sub Screen: Contract: Z10231411

34	Sub-Recipient Organization (Contractor)*	Audio Visual Innovations, Inc.-37293974		
35	Contract Number*	Z10231411		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$50,835.60
38	Contract Date *	11/24/2020		
39	Period of Performance Start Date *	11/24/2020		
40	Period of Performance End Date *	01/31/2021		
41	Primary Place of Performance Address Line 1 *	2520 Correa Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96822-2219		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Zoom licenses		

### Obligations

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - UH - UH COVID-19 Mitigation Program	\$00	\$50,835.60	\$00	\$50,835.60
<b>Total</b>		\$00	\$50,835.60	\$00	\$50,835.60

### Previous Expenditures (All previous quarters)

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	001 - UH - UH COVID-19 Mitigation Program	01/21/2021	01/21/2021	\$50,835.60	Facilitating Distance Learning	
<b>Total:</b>						\$50,835.60

### Current Quarter Expenditures

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: Z10231867**

34	Sub-Recipient Organization (Contractor)*	PC Specialist Inc. dba Technology Integration Group-95-382559		
35	Contract Number*	Z10231867		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$96,685.11
38	Contract Date *	11/27/2020		
39	Period of Performance Start Date *	11/27/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	2520 Correa Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96822-2219		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Servers		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - UH - UH COVID-19 Mitigation Program	\$00	\$96,685.11	\$00	\$96,685.11
<b>Total</b>		\$00	\$96,685.11	\$00	\$96,685.11

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - UH - UH COVID-19 Mitigation Program	12/28/2020	12/28/2020	\$96,685.11	Facilitating Distance Learning	
<b>Total:</b>						\$96,685.11

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: ITS Z10228131, GEC 6424189**

34	Sub-Recipient Organization (Contractor)*	SIGNAL VINE, INC.-079575166		
35	Contract Number*	ITS Z10228131, GEC 6424189		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$88,825.00
38	Contract Date *	08/19/2020		
39	Period of Performance Start Date *	08/19/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	2520 Correa Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96822-2219		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Text messaging platform license agreement		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - UH - UH COVID-19 Mitigation Program	\$00	\$88,825.00	\$00	\$88,825.00
<b>Total</b>		\$00	\$88,825.00	\$00	\$88,825.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - UH - UH COVID-19 Mitigation Program	08/26/2020	08/26/2020	\$88,825.00	Facilitating Distance Learning	
<b>Total:</b>						\$88,825.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: DI 6406418**

34	Sub-Recipient Organization (Contractor)*	Century Computers Inc. dba Pacxa-99-035642		
35	Contract Number*	DI 6406418		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$414,575.96
38	Contract Date *	09/29/2020		
39	Period of Performance Start Date *	09/29/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	2520 Correa Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96822-2219		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *			
50	Contract Description *	1 HPE Nimble AF60 & 3 HPE Nimble HF40		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - UH - UH COVID-19 Mitigation Program	\$00	\$414,575.96	\$00	\$414,575.96
<b>Total</b>		\$00	\$414,575.96	\$00	\$414,575.96

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - UH - UH COVID-19 Mitigation Program	10/14/2020	10/14/2020	\$414,575.96	Facilitating Distance Learning	
<b>Total:</b>						\$414,575.96

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00



**Sub Screen: Contract: ITS PO 211934, GEC 6424189**

34	Sub-Recipient Organization (Contractor)*	Audio Visual Innovations, Inc.-59-195893		
35	Contract Number*	ITS PO 211934, GEC 6424189		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$54,052.63
38	Contract Date *	03/20/2020		
39	Period of Performance Start Date *	03/20/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	2520 Correa Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96822-2219		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Zoom licenses		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - UH - UH COVID-19 Mitigation Program	\$00	\$54,052.63	\$00	\$54,052.63
<b>Total</b>		\$00	\$54,052.63	\$00	\$54,052.63

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - UH - UH COVID-19 Mitigation Program	03/30/2020	03/30/2020	\$54,052.63	Facilitating Distance Learning	
<b>Total:</b>						\$54,052.63

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: ITS Z10227324, GEC 6424189 & GEC 6427005**

34	Sub-Recipient Organization (Contractor)*	B&H Foto & Electronics Corp. dba B&H Photo-Video-13-276807		
35	Contract Number*	ITS Z10227324, GEC 6424189 & GEC 6427005		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$56,539.45		
38	Contract Date *	07/06/2020		
39	Period of Performance Start Date *	07/06/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	2520 Correa Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96822-2219		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Video Conferencing equipment		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - UH - UH COVID-19 Mitigation Program	\$00	\$56,539.45	\$00	\$56,539.45
<b>Total</b>		\$00	\$56,539.45	\$00	\$56,539.45

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - UH - UH COVID-19 Mitigation Program	08/07/2020	10/19/2020	\$56,539.45	Facilitating Distance Learning	
<b>Total:</b>						\$56,539.45

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: ITS Z10227144, partial GEC 6427005**

34	Sub-Recipient Organization (Contractor)*	DATAHOUSE CONSULTING, INC.-079019282		
35	Contract Number*	ITS Z10227144, partial GEC 6427005		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$0.00
38	Contract Date *	07/23/2020		
39	Period of Performance Start Date *	07/23/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	2520 Correa Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96822-2219		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Daily health check-in application		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - UH - UH COVID-19 Mitigation Program	\$00	\$0.00	\$00	\$0.00
<b>Total</b>		\$00	\$0.00	\$00	\$0.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - UH - UH COVID-19 Mitigation Program	07/23/2020	10/22/2020	\$45,000.00	Facilitating Distance Learning	
Line 2	001 - UH - UH COVID-19 Mitigation Program	07/23/2020	10/22/2020	\$-45,000.00	Facilitating Distance Learning	
<b>Total:</b>						\$0.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: ITS Z10228139, partial GEC 6427005, 6495447, 6487016**

34	Sub-Recipient Organization (Contractor)*	Strata Information Group-33-027839		
35	Contract Number*	ITS Z10228139, partial GEC 6427005, 6495447, 6487016		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$105,382.16		
38	Contract Date *	08/26/2020		
39	Period of Performance Start Date *	08/26/2020		
40	Period of Performance End Date *	01/31/2021		
41	Primary Place of Performance Address Line 1 *	2520 Correa Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96822-2219		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Satisfactory Academic Progress (SAP) Implementation for Banner Financial Aid		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - UH - UH COVID-19 Mitigation Program	\$00	\$105,382.16	\$00	\$105,382.16
<b>Total</b>		\$00	\$105,382.16	\$00	\$105,382.16

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - UH - UH COVID-19 Mitigation Program	08/26/2020	12/30/2020	\$112,070.92	Facilitating Distance Learning	
Line 2	001 - UH - UH COVID-19 Mitigation Program	01/08/2021	01/08/2021	\$-6,688.76	Facilitating Distance Learning	
<b>Total:</b>						\$105,382.16

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 33115598**

34	Sub-Recipient Organization (Contractor)*	Environmental Systems Research-63134175		
35	Contract Number*	33115598		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$149,771.41		
38	Contract Date *	10/06/2020		
39	Period of Performance Start Date *	10/06/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	400 Rodgers Blvd		
42	Primary Place of Performance Address Line 2	suite 700		
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96819-1880		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Provide ArcGIS Technical and Management Consulting Support Services. Please note for all primary airports Statewide Performance Period Start Date is: 10/1/2020 Expenditure Date Range Start Date is: 10/1/2020		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - DOT - SCRF Airport Sreening and Health Assurance Security	\$00	\$149,771.41	\$00	\$149,771.41
<b>Total</b>		\$00	\$149,771.41	\$00	\$149,771.41

**Previous Expenditures (All previous quarters)**

	52 A	52 B	52 C	52 D	52 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - DOT - SCRF Airport Sreening and Health Assurance Security	10/07/2020	12/30/2020	\$149,771.41	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$149,771.41

**Current Quarter Expenditures**

	53 A	53 B	53 C	53 D	53 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
<b>Total:</b>						\$00

**Sub Screen: Contract: 33115616**

34	Sub-Recipient Organization (Contractor)*	Roberts Hawaii Tours, Inc-094646841		
35	Contract Number*	33115616		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$1,092,683.95		
38	Contract Date *	11/05/2020		
39	Period of Performance Start Date *	11/05/2020		
40	Period of Performance End Date *	12/31/2021		
41	Primary Place of Performance Address Line 1 *	400 Rodgers Blvd		
42	Primary Place of Performance Address Line 2	Ste 700,		
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96819-1880		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Labor for Health Screening Document Collection and ID Verification. Please note for all primary airports Statewide Performance Period: 10/1/2020 to 12/30/2021		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - DOT - SCRF Airport Sreening and Health Assurance Security	\$-3,455,755.52	\$1,092,683.95	\$117,076.55	\$1,092,683.95
<b>Total</b>		\$-3,455,755.52	\$1,092,683.95	\$117,076.55	\$1,092,683.95

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	001 - DOT - SCRF Airport Sreening and Health Assurance Security	01/01/2021	03/31/2021	\$975,607.40	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$975,607.40

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	001 - DOT - SCRF Airport Sreening and Health Assurance Security	09/01/2021	12/31/2021	\$117,076.55	COVID-19 Testing and Contact Tracing		
<b>Total:</b>							\$117,076.55

**Sub Screen: Contract: 33115613**

34	Sub-Recipient Organization (Contractor)*	Roberts Hawaii Tours, Inc-094646841		
35	Contract Number*	33115613		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$3,000,000.00		
38	Contract Date *	11/05/2020		
39	Period of Performance Start Date *	11/05/2020		
40	Period of Performance End Date *	12/31/2021		
41	Primary Place of Performance Address Line 1 *	400 Rodgers Blvd		
42	Primary Place of Performance Address Line 2	Ste 700,		
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96819-1880		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Labor for Health Screening Document Collection and ID Verification. Please note for all primary airports Statewide. Period of Performance is: 10/1/2020 to 12/30/2020.		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - DOT - SCRF Airport Sreening and Health Assurance Security	\$0.00	\$3,000,000.00	\$134,483.98	\$3,000,000.00
<b>Total</b>		\$0.00	\$3,000,000.00	\$134,483.98	\$3,000,000.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - DOT - SCRF Airport Sreening and Health Assurance Security	11/05/2020	12/30/2020	\$2,865,516.02	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$2,865,516.02

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	001 - DOT - SCRF Airport Sreening and Health Assurance Security	09/01/2021	12/31/2021	\$134,483.98	COVID-19 Testing and Contact Tracing		
<b>Total:</b>							\$134,483.98

**Sub Screen: Contract: 33115594**

34	Sub-Recipient Organization (Contractor)*	Carahsoft Technology Corp-88365767		
35	Contract Number*	33115594		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$373,193.57		
38	Contract Date *	10/12/2020		
39	Period of Performance Start Date *	10/12/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	400 Rodgers Blvd Ste 700		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96819-1880		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Google Cloud Deploy. Please note for all primary airports Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - DOT - SCRF Airport Sreening and Health Assurance Security	\$00	\$373,193.57	\$00	\$373,193.57
<b>Total</b>		\$00	\$373,193.57	\$00	\$373,193.57

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - DOT - SCRF Airport Sreening and Health Assurance Security	10/12/2020	12/30/2020	\$373,193.57	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$373,193.57

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00



**Sub Screen: Contract: 33115632**

34	Sub-Recipient Organization (Contractor)*	Carahsoft Technology Corp-88365767		
35	Contract Number*	33115632		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$72,565.42		
38	Contract Date *	09/11/2020		
39	Period of Performance Start Date *	09/11/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	400 Rodgers Blvd		
42	Primary Place of Performance Address Line 2	Ste 700		
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96819-1880		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Google Cloud Deploy. Please note for all primary airports Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - DOT - SCRF Airport Sreening and Health Assurance Security	\$00	\$72,565.42	\$00	\$72,565.42
<b>Total</b>		\$00	\$72,565.42	\$00	\$72,565.42

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - DOT - SCRF Airport Sreening and Health Assurance Security	09/11/2020	12/30/2020	\$72,565.42	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$72,565.42

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 33115633**

34	Sub-Recipient Organization (Contractor)*	Carahsoft Technology Corp-88365767		
35	Contract Number*	33115633		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$228,062.74		
38	Contract Date *	12/10/2020		
39	Period of Performance Start Date *	12/10/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	400 Rodgers Blvd		
42	Primary Place of Performance Address Line 2	Ste 700,		
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96819-1880		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Google Cloud Deploy. Please note for all primary airports Statewide Period of Performance: 9/11/20 to 12/30/2020 Expenditure Date Range: 10/1/2020 to 12/30/2020		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - DOT - SCRF Airport Sreening and Health Assurance Security	\$00	\$228,062.74	\$00	\$228,062.74
<b>Total</b>		\$00	\$228,062.74	\$00	\$228,062.74

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - DOT - SCRF Airport Sreening and Health Assurance Security	12/10/2020	12/30/2020	\$228,062.74	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$228,062.74

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 33115602**

34	Sub-Recipient Organization (Contractor)*	Diagnostic Laboratory Services-144535598		
35	Contract Number*	33115602		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$8,800,000.00		
38	Contract Date *	09/18/2020		
39	Period of Performance Start Date *	09/18/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	400 Rodgers Blvd		
42	Primary Place of Performance Address Line 2	Ste 700		
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96819-1880		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Provide Nasopharyngeal Swab Testing Equipment: Test kits. Please note for all primary airports Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - DOT - SCRF Airport Sreening and Health Assurance Security	\$00	\$8,800,000.00	\$00	\$8,800,000.00
<b>Total</b>		\$00	\$8,800,000.00	\$00	\$8,800,000.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - DOT - SCRF Airport Sreening and Health Assurance Security	10/01/2020	12/30/2020	\$8,800,000.00	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$8,800,000.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 33115628**

34	Sub-Recipient Organization (Contractor)*	Clinical Laboratories of Hawaii, LLP-153598474		
35	Contract Number*	33115628		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$6,000,000.00		
38	Contract Date *	12/03/2020		
39	Period of Performance Start Date *	12/03/2020		
40	Period of Performance End Date *	12/31/2021		
41	Primary Place of Performance Address Line 1 *	400 Rodgers Blvd		
42	Primary Place of Performance Address Line 2	Ste 700,		
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96819-1880		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Provide SARS-Cov-2 Antigent Testing Equipment: Test Kits. Please note for all primary airports statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - DOT - SCRF Airport Sreening and Health Assurance Security	\$0.00	\$6,000,000.00	\$6,000,000.00	\$6,000,000.00
<b>Total</b>		\$0.00	\$6,000,000.00	\$6,000,000.00	\$6,000,000.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B	52 C	52 D	52 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0		\$0.00	Select	
<b>Total:</b>					\$0.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	001 - DOT - SCRF Airport Sreening and Health Assurance Security	09/01/2021	12/31/2021	\$6,000,000.00	COVID-19 Testing and Contact Tracing		
<b>Total:</b>							\$6,000,000.00

**Sub Screen: Contract: 33115604**

34	Sub-Recipient Organization (Contractor)*	Worldwide Flight Services-117447417		
35	Contract Number*	33115604		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$155,141.82		
38	Contract Date *	10/12/2020		
39	Period of Performance Start Date *	10/12/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	400 Rodgers Blvd		
42	Primary Place of Performance Address Line 2	Ste 700,		
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96819-1880		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	ADHOC Passenger Services. Please note for all primary airports statewide.		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - DOT - SCRF Airport Sreening and Health Assurance Security	\$00	\$155,141.82	\$00	\$155,141.82
<b>Total</b>		\$00	\$155,141.82	\$00	\$155,141.82

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - DOT - SCRF Airport Sreening and Health Assurance Security	10/12/2020	12/30/2020	\$155,141.82	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$155,141.82

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 33115612**

34	Sub-Recipient Organization (Contractor)*		Worldwide Flight Services-117447417	
35	Contract Number*		33115612	
36	Contract Type*		Purchase Order	
37	Contract Amount*		\$918,737.77	
38	Contract Date *		11/05/2020	
39	Period of Performance Start Date *		11/05/2020	
40	Period of Performance End Date *		12/31/2021	
41	Primary Place of Performance Address Line 1 *		400 Rodgers Blvd	
42	Primary Place of Performance Address Line 2		Ste 700	
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *		Honolulu	
45	Primary Place of Performance State Code *		HI	
46	Primary Place of Performance Zip+4 *		96819-1880	Verified
47	Primary Place of Performance Country Name *		United States	
48	Primary Place of Performance Country Code *		USA	
49	Primary Place of Performance Congressional District *		1	
50	Contract Description *		ADHOC Passenger Services. Please note for all primary airports Statewide.	

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - DOT - SCRF Airport Sreening and Health Assurance Security	\$-81,262.23	\$918,737.77	\$359,453.51	\$918,737.77
<b>Total</b>		\$-81,262.23	\$918,737.77	\$359,453.51	\$918,737.77

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - DOT - SCRF Airport Sreening and Health Assurance Security	11/05/2020	12/30/2020	\$466,935.39	COVID-19 Testing and Contact Tracing	
Line 2	001 - DOT - SCRF Airport Sreening and Health Assurance Security	01/01/2021	03/31/2021	\$92,348.87	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$559,284.26

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	001 - DOT - SCRF Airport Sreening and Health Assurance Security	09/01/2021	12/31/2021	\$359,453.51	COVID-19 Testing and Contact Tracing		
<b>Total:</b>							\$359,453.51

**Sub Screen: Contract: 33115617**

34	Sub-Recipient Organization (Contractor)*	eWorld Enterprise Solutions, Inc-162168186		
35	Contract Number*	33115617		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$492,400.00		
38	Contract Date *	11/20/2020		
39	Period of Performance Start Date *	11/20/2020		
40	Period of Performance End Date *	06/30/2021		
41	Primary Place of Performance Address Line 1 *	400 Rodgers Blvd		
42	Primary Place of Performance Address Line 2	Ste 700		
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96819-1880		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Support Services for STH application, screeners and travelers. Please note for all primary airports Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - DOT - SCRF Airport Sreening and Health Assurance Security	\$00	\$492,400.00	\$00	\$492,400.00
<b>Total</b>		\$00	\$492,400.00	\$00	\$492,400.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	001 - DOT - SCRF Airport Sreening and Health Assurance Security	01/01/2021	03/31/2021	\$492,400.00	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$492,400.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: HGIA 138-1002**

34	Sub-Recipient Organization (Contractor)*	Money Network Financial LLC-36-448354		
35	Contract Number*	HGIA 138-1002		
36	Contract Type*	Definitive Contract		
37	Contract Amount*	\$61,544,750.52		
38	Contract Date *	09/25/2020		
39	Period of Performance Start Date *	09/25/2020		
40	Period of Performance End Date *	12/31/2021		
41	Primary Place of Performance Address Line 1 *	250 S Hotel St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2831		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Produce and load prepaid debit cards (\$500) Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	006 - BED - Hawaii Restaurant Card Program	\$-192,443.12	\$61,544,750.52	\$-192,443.12	\$61,544,750.52
<b>Total</b>		\$-192,443.12	\$61,544,750.52	\$-192,443.12	\$61,544,750.52

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	006 - BED - Hawaii Restaurant Card Program	09/25/2020	12/30/2020	\$61,737,193.64	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Line 2	0			\$0.00	Select	
<b>Total:</b>						\$61,737,193.64

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	006 - BED - Hawaii Restaurant Card Program	09/25/2020	12/30/2020	\$-192,443.12	Economic Support (Other than Small Business, Housing, and Food Assistance)		
<b>Total:</b>							\$-192,443.12



**Sub Screen: Contract: 2020-642**

34	Sub-Recipient Organization (Contractor)*		B&H Foto & Electronics Corp. dba B&H Photo-Video-13-276807	
35	Contract Number*		2020-642	
36	Contract Type*		Purchase Order	
37	Contract Amount*		\$82,568.55	
38	Contract Date *		11/08/2020	
39	Period of Performance Start Date *		11/08/2020	
40	Period of Performance End Date *		12/30/2020	
41	Primary Place of Performance Address Line 1 *		415 S Beretania St	
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *		Honolulu	
45	Primary Place of Performance State Code *		HI	
46	Primary Place of Performance Zip+4 *		96813-2425	Verified
47	Primary Place of Performance Country Name *		United States	
48	Primary Place of Performance Country Code *		USA	
49	Primary Place of Performance Congressional District *		1	
50	Contract Description *		Purchase of equipment including video mixers, cameras, and rolling carts & stands to support video streaming of legislative briefings and hearings which must occur remotely in order to continue legislative functions while Capitol is closed due to COVID-19 pandemic.	

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HSE - Hawai'i House of Representative COVID-19 Financial Assistance	\$00	\$82,568.55	\$00	\$82,568.55
<b>Total:</b>		\$00	\$82,568.55	\$00	\$82,568.55

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - HSE - Hawai'i House of Representative COVID-19 Financial Assistance	11/08/2020	11/08/2020	\$82,568.55	Items Not Listed Above	Continuation of Essential Gov't Function
<b>Total:</b>						\$82,568.55

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 2020-645**

34	Sub-Recipient Organization (Contractor)*	LENOVO (UNITED STATES) INC.-153345173		
35	Contract Number*	2020-645		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$229,842.84		
38	Contract Date *	12/28/2020		
39	Period of Performance Start Date *	12/28/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	415 S Beretania St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2425		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Purchase of 100 laptop computers to facilitate distance working and continuance of operations in case of building shutdown.		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HSE - Hawai'i House of Representative COVID-19 Financial Assistance	\$00	\$229,842.84	\$00	\$229,842.84
<b>Total</b>		\$00	\$229,842.84	\$00	\$229,842.84

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - HSE - Hawai'i House of Representative COVID-19 Financial Assistance	12/28/2020	12/28/2020	\$229,842.84	Improve Telework Capabilities of Public Employees	
<b>Total:</b>						\$229,842.84

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: HGIA 138-1006**

34	Sub-Recipient Organization (Contractor)*	DATAHOUSE CONSULTING, INC.-079019282		
35	Contract Number*	HGIA 138-1006		
36	Contract Type*	Definitive Contract		
37	Contract Amount*	\$50,000.00		
38	Contract Date *	09/29/2020		
39	Period of Performance Start Date *	09/29/2020		
40	Period of Performance End Date *	12/31/2021		
41	Primary Place of Performance Address Line 1 *	250 S Hotel St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2831		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Download eligible UI and PUA data Primary Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	006 - BED - Hawaii Restaurant Card Program	\$-25,000.00	\$50,000.00	\$-25,000.00	\$50,000.00
<b>Total</b>		\$-25,000.00	\$50,000.00	\$-25,000.00	\$50,000.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	006 - BED - Hawaii Restaurant Card Program	09/29/2020	12/30/2020	\$50,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Line 2	006 - BED - Hawaii Restaurant Card Program	09/29/2020	12/30/2020	\$25,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
<b>Total:</b>						\$75,000.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	006 - BED - Hawaii Restaurant Card Program	09/29/2020	12/31/2020	\$-25,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)		
<b>Total:</b>							\$-25,000.00

**Sub Screen: Contract: HGIA 138-1005**

34	Sub-Recipient Organization (Contractor)*	Money Network Financial LLC-36-448354		
35	Contract Number*	HGIA 138-1005		
36	Contract Type*	Definitive Contract		
37	Contract Amount*	\$8,288,000.00		
38	Contract Date *	11/02/2020		
39	Period of Performance Start Date *	11/02/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	250 S Hotel St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2831		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Produce and load prepaid debit cards (\$500); Call Center Support Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	006 - BED - Hawaii Restaurant Card Program	\$00	\$8,288,000.00	\$00	\$8,288,000.00
<b>Total</b>		\$00	\$8,288,000.00	\$00	\$8,288,000.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	006 - BED - Hawaii Restaurant Card Program	11/02/2020	12/30/2020	\$8,288,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
<b>Total:</b>						\$8,288,000.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: HGIA 138-1007**

34	Sub-Recipient Organization (Contractor)*	Money Network Financial LLC-36-448354		
35	Contract Number*	HGIA 138-1007		
36	Contract Type*	Definitive Contract		
37	Contract Amount*			\$0.00
38	Contract Date *	12/10/2020		
39	Period of Performance Start Date *	12/10/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	250 S Hotel St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2831		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	To produce cards Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	006 - BED - Hawaii Restaurant Card Program	\$-85,000.00	\$0.00	\$-25,841.00	\$0.00
<b>Total</b>		\$-85,000.00	\$0.00	\$-25,841.00	\$0.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	006 - BED - Hawaii Restaurant Card Program	12/10/2020	12/30/2020	\$25,841.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
<b>Total:</b>						\$25,841.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	006 - BED - Hawaii Restaurant Card Program	12/10/2020	12/30/2020	\$-25,841.00	Economic Support (Other than Small Business, Housing, and Food Assistance)		
<b>Total:</b>							\$-25,841.00

**Sub Screen: Contract: 21003945**

34	Sub-Recipient Organization (Contractor)*	AIRGAS USA, LLC-56-073264		
35	Contract Number*	21003945		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$53,324.06
38	Contract Date *	11/12/2020		
39	Period of Performance Start Date *	11/12/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$53,324.06	\$00	\$53,324.06
<b>Total</b>		\$00	\$53,324.06	\$00	\$53,324.06

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	001 - PSD - Public Safety Response to COVID- 19 01	11/12/2020	03/31/2021	\$53,324.06	Public Health Expenses	
<b>Total:</b>						\$53,324.06

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21002622**

34	Sub-Recipient Organization (Contractor)*	ALTRES MEDICAL-99-033844		
35	Contract Number*	21002622		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$197,640.19		
38	Contract Date *	11/12/2020		
39	Period of Performance Start Date *	11/12/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	COVID related Inmate Care Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$197,640.19	\$00	\$197,640.19
<b>Total</b>		\$00	\$197,640.19	\$00	\$197,640.19

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	11/12/2020	11/12/2020	\$197,640.19	Medical Expenses	
<b>Total:</b>						\$197,640.19

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21002907**

34	Sub-Recipient Organization (Contractor)*	ALTRES MEDICAL-99-033844		
35	Contract Number*	21002907		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$72,676.25
38	Contract Date *	11/19/2020		
39	Period of Performance Start Date *	11/19/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	COVID related Inmate Care Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$72,676.25	\$00	\$72,676.25
<b>Total</b>		\$00	\$72,676.25	\$00	\$72,676.25

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	11/19/2020	11/19/2020	\$75,732.40	Medical Expenses	
Line 2	001 - PSD - Public Safety Response to COVID- 19 01	11/19/2020	03/31/2021	\$-3,056.15	Medical Expenses	
<b>Total:</b>						\$72,676.25

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00



**Sub Screen: Contract: 21003517**

34	Sub-Recipient Organization (Contractor)*	ALTRES MEDICAL-99-033844		
35	Contract Number*	21003517		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$73,897.78
38	Contract Date *	12/11/2020		
39	Period of Performance Start Date *	12/11/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	COVID related Inmate Care Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$73,897.78	\$00	\$73,897.78
<b>Total</b>		\$00	\$73,897.78	\$00	\$73,897.78

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	001 - PSD - Public Safety Response to COVID- 19 01	12/11/2020	03/31/2021	\$73,897.78	Medical Expenses	
<b>Total:</b>						\$73,897.78

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21003871**

34	Sub-Recipient Organization (Contractor)*	ALTRES MEDICAL-99-033844		
35	Contract Number*	21003871		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$254,374.60		
38	Contract Date *	12/11/2020		
39	Period of Performance Start Date *	12/11/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	COVID related Inmate Care Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$254,374.60	\$00	\$254,374.60
<b>Total</b>		\$00	\$254,374.60	\$00	\$254,374.60

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	001 - PSD - Public Safety Response to COVID- 19 01	12/11/2020	03/31/2021	\$254,374.60	Medical Expenses	
<b>Total:</b>						\$254,374.60

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21002953**

34	Sub-Recipient Organization (Contractor)*	AUDIO VISUAL COMPANY, THE-99-026464		
35	Contract Number*	21002953		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$160,985.01
38	Contract Date *	12/11/2020		
39	Period of Performance Start Date *	12/11/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Inmate Visitation and Education Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$160,985.01	\$00	\$160,985.01
<b>Total</b>		\$00	\$160,985.01	\$00	\$160,985.01

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	001 - PSD - Public Safety Response to COVID- 19 01	01/01/2021	03/31/2021	\$160,985.01	Public Health Expenses	
<b>Total:</b>						\$160,985.01

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21002839**

34	Sub-Recipient Organization (Contractor)*	CDW GOVERNMENT LLC-026157235		
35	Contract Number*	21002839		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$126,364.10		
38	Contract Date *	12/11/2020		
39	Period of Performance Start Date *	12/11/2020		
40	Period of Performance End Date *	06/30/2021		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	ACO/Sheriff Education & Information Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$126,364.10	\$00	\$126,364.10
<b>Total</b>		\$00	\$126,364.10	\$00	\$126,364.10

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	001 - PSD - Public Safety Response to COVID- 19 01	01/01/2021	03/31/2021	\$126,364.10	Improve Telework Capabilities of Public Employees	
<b>Total:</b>						\$126,364.10

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21003877**

34	Sub-Recipient Organization (Contractor)*	Clinical Laboratories of Hawaii, LLP-153598474		
35	Contract Number*	21003877		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$316,950.00
38	Contract Date *	12/11/2020		
39	Period of Performance Start Date *	12/11/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd Unit Honolulu		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	COVID testing for inmates & staff Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$316,950.00	\$00	\$316,950.00
<b>Total</b>		\$00	\$316,950.00	\$00	\$316,950.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	001 - PSD - Public Safety Response to COVID- 19 01	12/11/2020	03/31/2021	\$316,950.00	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$316,950.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21002318**

34	Sub-Recipient Organization (Contractor)*	CONTAINER STORAGE CO. OF-99-022398		
35	Contract Number*	21002318		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$375,000.00
38	Contract Date *	12/11/2020		
39	Period of Performance Start Date *	12/11/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Quarantine Containers Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$375,000.00	\$00	\$375,000.00
<b>Total</b>		\$00	\$375,000.00	\$00	\$375,000.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	12/11/2020	12/30/2020	\$375,000.00	Public Health Expenses	
<b>Total:</b>						\$375,000.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21003547**

34	Sub-Recipient Organization (Contractor)*	CONTAINER STORAGE CO. OF-99-022398		
35	Contract Number*	21003547		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$374,508.61		
38	Contract Date *	12/11/2020		
39	Period of Performance Start Date *	12/11/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Quarantine Containers Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$374,508.61	\$00	\$374,508.61
<b>Total</b>		\$00	\$374,508.61	\$00	\$374,508.61

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	12/11/2020	12/11/2020	\$374,508.61	Public Health Expenses	
Line 2	0			\$0.00	Select	
<b>Total:</b>						\$374,508.61

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21002830**

34	Sub-Recipient Organization (Contractor)*	Dell Marketing, L.P.-74-261680		
35	Contract Number*	21002830		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$67,122.65
38	Contract Date *	12/01/2020		
39	Period of Performance Start Date *	12/01/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	ACO/Sheriff Education & Information Place of Performance: Statwide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$67,122.65	\$00	\$67,112.65
<b>Total</b>		\$00	\$67,122.65	\$00	\$67,112.65

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	12/22/2020	12/22/2020	\$67,112.65	Improve Telework Capabilities of Public Employees	
<b>Total:</b>						\$67,112.65

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00



**Sub Screen: Contract: 21002886**

34	Sub-Recipient Organization (Contractor)*	EESPRO INC.-20-410680		
35	Contract Number*	21002886		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$324,587.29		
38	Contract Date *	11/30/2020		
39	Period of Performance Start Date *	11/30/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Training Facility upgrades for safety		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$324,587.29	\$00	\$324,587.29
<b>Total</b>		\$00	\$324,587.29	\$00	\$324,587.29

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	11/30/2020	11/30/2020	\$324,587.29	Improve Telework Capabilities of Public Employees	
<b>Total:</b>						\$324,587.29

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21003497**

34	Sub-Recipient Organization (Contractor)*	CoreCivic Saguaro-62-176387		
35	Contract Number*	21003497		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$87,605.00
38	Contract Date *	11/25/2020		
39	Period of Performance Start Date *	11/25/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *			
50	Contract Description *	COVID testing for inmates in AZ		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$87,605.00	\$00	\$87,605.00
<b>Total</b>		\$00	\$87,605.00	\$00	\$87,605.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	11/25/2020	11/25/2020	\$87,605.00	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$87,605.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21003732**

34	Sub-Recipient Organization (Contractor)*	CoreCivic Saguaro-62-176387		
35	Contract Number*	21003732		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$403,879.39
38	Contract Date *	10/01/2020		
39	Period of Performance Start Date *	10/01/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	COVID Facilities for AZ Inmates		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$403,879.39	\$00	\$403,879.39
<b>Total</b>		\$00	\$403,879.39	\$00	\$403,879.39

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	10/01/2020	12/30/2020	\$131,976.00	Items Not Listed Above	COVID Facilities for AZ Inmates
Line 2	001 - PSD - Public Safety Response to COVID- 19 01	01/01/2021	03/31/2021	\$271,903.39	Public Health Expenses	
<b>Total:</b>						\$403,879.39

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21003733**

34	Sub-Recipient Organization (Contractor)*	CoreCivic Saguaro-62-176387		
35	Contract Number*	21003733		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$677,156.00		
38	Contract Date *	12/01/2020		
39	Period of Performance Start Date *	12/01/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Inmate transport for safety		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$677,156.00	\$00	\$677,156.00
<b>Total</b>		\$00	\$677,156.00	\$00	\$677,156.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	12/01/2020	12/30/2020	\$677,156.00	Items Not Listed Above	Inmate transport for safety
<b>Total:</b>						\$677,156.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21003652**

34	Sub-Recipient Organization (Contractor)*	GLOBAL TEL*LINK CORPORATION-63-107100		
35	Contract Number*	21003652		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$500,000.00		
38	Contract Date *	12/01/2020		
39	Period of Performance Start Date *	12/01/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Inmate Visitation and Education		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$500,000.00	\$00	\$500,000.00
<b>Total</b>		\$00	\$500,000.00	\$00	\$500,000.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	001 - PSD - Public Safety Response to COVID- 19 01	01/01/2021	03/31/2021	\$500,000.00	Public Health Expenses	
<b>Total:</b>						\$500,000.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21002514**

34	Sub-Recipient Organization (Contractor)*	HAWAII CORRECTIONAL INDUSTRIES-965699994		
35	Contract Number*	21002514		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$60,882.52
38	Contract Date *	10/30/2020		
39	Period of Performance Start Date *	10/30/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Deep cleaning & disinfection Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$60,882.52	\$00	\$60,882.52
<b>Total</b>		\$00	\$60,882.52	\$00	\$60,882.52

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	10/30/2020	10/30/2020	\$60,882.52	Public Health Expenses	
<b>Total:</b>						\$60,882.52

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21002906**

34	Sub-Recipient Organization (Contractor)*	HAWAII CORRECTIONAL INDUSTRIES-965699994		
35	Contract Number*	21002906		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$71,557.07
38	Contract Date *	10/18/2020		
39	Period of Performance Start Date *	10/18/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Deep cleaning & disinfection Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$71,557.07	\$00	\$71,557.07
<b>Total</b>		\$00	\$71,557.07	\$00	\$71,557.07

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	10/18/2020	11/19/2020	\$71,557.07	Public Health Expenses	
<b>Total:</b>						\$71,557.07

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21003071**

34	Sub-Recipient Organization (Contractor)*	HAWAII CORRECTIONAL INDUSTRIES-965699994		
35	Contract Number*	21003071		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$50,000.00
38	Contract Date *	11/02/2020		
39	Period of Performance Start Date *	11/02/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd Unit Honolulu		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Deep cleaning & disinfection Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$50,000.00	\$00	\$50,000.00
<b>Total</b>		\$00	\$50,000.00	\$00	\$50,000.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	11/02/2020	12/30/2020	\$50,000.00	Public Health Expenses	
<b>Total:</b>						\$50,000.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00



**Sub Screen: Contract: 21003422**

34	Sub-Recipient Organization (Contractor)*	HAWAII CORRECTIONAL INDUSTRIES-965699994		
35	Contract Number*	21003422		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$59,881.00
38	Contract Date *	10/25/2020		
39	Period of Performance Start Date *	10/25/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Deep cleaning & disinfection Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$59,881.00	\$00	\$59,881.00
<b>Total</b>		\$00	\$59,881.00	\$00	\$59,881.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	001 - PSD - Public Safety Response to COVID- 19 01	10/25/2020	03/31/2021	\$59,881.00	Public Health Expenses	
<b>Total:</b>						\$59,881.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21003428**

34	Sub-Recipient Organization (Contractor)*	HAWAII CORRECTIONAL INDUSTRIES-965699994		
35	Contract Number*	21003428		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$82,652.96
38	Contract Date *	11/01/2020		
39	Period of Performance Start Date *	11/01/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Deep cleaning & disinfection Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$82,652.96	\$00	\$82,652.96
<b>Total</b>		\$00	\$82,652.96	\$00	\$82,652.96

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	11/01/2020	11/30/2020	\$82,652.96	Public Health Expenses	
Line 2	0			\$0.00	Select	
<b>Total:</b>						\$82,652.96

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21003724**

34	Sub-Recipient Organization (Contractor)*	HAWAII CORRECTIONAL INDUSTRIES-965699994		
35	Contract Number*	21003724		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$210,000.00		
38	Contract Date *	12/01/2020		
39	Period of Performance Start Date *	12/01/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Deep cleaning & disinfection Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$210,000.00	\$00	\$210,000.00
<b>Total</b>		\$00	\$210,000.00	\$00	\$210,000.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	12/01/2020	12/30/2020	\$287,989.85	Public Health Expenses	
Line 2	001 - PSD - Public Safety Response to COVID- 19 01	12/01/2020	03/31/2021	\$-77,989.85	Public Health Expenses	
<b>Total:</b>						\$210,000.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21003540**

34	Sub-Recipient Organization (Contractor)*	HAWAII CORRECTIONAL INDUSTRIES-965699994		
35	Contract Number*	21003540		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$407,892.67		
38	Contract Date *	11/01/2020		
39	Period of Performance Start Date *	11/01/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Deep cleaning & disinfection Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$407,892.67	\$00	\$407,892.67
<b>Total</b>		\$00	\$407,892.67	\$00	\$407,892.67

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	11/01/2020	12/30/2020	\$475,443.01	Public Health Expenses	
Line 2	001 - PSD - Public Safety Response to COVID- 19 01	11/01/2020	03/31/2021	\$-67,550.34	Public Health Expenses	
<b>Total:</b>						\$407,892.67

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21003944**

34	Sub-Recipient Organization (Contractor)*	HAWAII CORRECTIONAL INDUSTRIES-965699994		
35	Contract Number*	21003944		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$295,798.93		
38	Contract Date *	11/01/2020		
39	Period of Performance Start Date *	11/01/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Deep cleaning & disinfection Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$295,798.93	\$00	\$295,798.93
<b>Total</b>		\$00	\$295,798.93	\$00	\$295,798.93

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	001 - PSD - Public Safety Response to COVID- 19 01	01/01/2021	03/31/2021	\$295,798.93	Public Health Expenses	
<b>Total:</b>						\$295,798.93

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00JM1711**

34	Sub-Recipient Organization (Contractor)*	Hawaii Unified Industries PO 21001650-26-028848		
35	Contract Number*	00JM1711		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$114,450.74		
38	Contract Date *	08/25/2020		
39	Period of Performance Start Date *	08/25/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Deep cleaning & disinfection Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$114,450.74	\$00	\$114,450.74
<b>Total</b>		\$00	\$114,450.74	\$00	\$114,450.74

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	08/25/2020	10/01/2020	\$114,450.74	Public Health Expenses	
<b>Total:</b>						\$114,450.74

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21002600**

34	Sub-Recipient Organization (Contractor)*	HAWAII NURSING INC.-46-148358		
35	Contract Number*	21002600		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$67,008.37
38	Contract Date *	08/31/2020		
39	Period of Performance Start Date *	08/31/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	COVID related Inmate Care Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$67,008.37	\$00	\$67,008.37
<b>Total</b>		\$00	\$67,008.37	\$00	\$67,008.37

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	08/31/2020	11/10/2020	\$67,008.37	Medical Expenses	
<b>Total:</b>						\$67,008.37

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21003703**

34	Sub-Recipient Organization (Contractor)*	HAWAII NURSING INC.-46-148358		
35	Contract Number*	21003703		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$57,274.03
38	Contract Date *	11/02/2020		
39	Period of Performance Start Date *	11/02/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd Unit Honolulu		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Deep cleaning & disinfection Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$57,274.03	\$00	\$57,274.03
<b>Total</b>		\$00	\$57,274.03	\$00	\$57,274.03

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	11/02/2020	12/30/2020	\$57,274.03	Medical Expenses	
<b>Total:</b>						\$57,274.03

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00



**Sub Screen: Contract: 21003873**

34	Sub-Recipient Organization (Contractor)*	HAWAII NURSING INC.-46-148358		
35	Contract Number*	21003873		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$86,899.00
38	Contract Date *	11/02/2020		
39	Period of Performance Start Date *	11/02/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	COVID related Inmate Care Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$86,899.00	\$00	\$86,899.00
<b>Total</b>		\$00	\$86,899.00	\$00	\$86,899.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	001 - PSD - Public Safety Response to COVID- 19 01	11/02/2020	03/31/2021	\$86,899.00	Public Health Expenses	
<b>Total:</b>						\$86,899.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21002713**

34	Sub-Recipient Organization (Contractor)*	INTERISLAND AIRWAYS-99-021994		
35	Contract Number*	21002713		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$78,187.50
38	Contract Date *	10/01/2020		
39	Period of Performance Start Date *	10/01/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Inmate transport for Safety Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$78,187.50	\$00	\$78,187.50
<b>Total</b>		\$00	\$78,187.50	\$00	\$78,187.50

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	10/01/2020	10/26/2020	\$78,187.50	Items Not Listed Above	Inmate transport for Safety
<b>Total:</b>						\$78,187.50

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21003775**

34	Sub-Recipient Organization (Contractor)*	INTERISLAND AIRWAYS-99-021994		
35	Contract Number*	21003775		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$82,125.00		
38	Contract Date *	12/11/2020		
39	Period of Performance Start Date *	12/11/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Inmate transport for Safety Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$82,125.00	\$00	\$82,125.00
<b>Total</b>		\$00	\$82,125.00	\$00	\$82,125.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	12/11/2020	12/30/2020	\$32,062.50	Items Not Listed Above	Inmate transport for Safety
Line 2	001 - PSD - Public Safety Response to COVID- 19 01	01/01/2021	03/31/2021	\$50,062.50	Public Health Expenses	
<b>Total:</b>						\$82,125.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21003878**

34	Sub-Recipient Organization (Contractor)*	PROJECT VISION HAWAII-27-283163		
35	Contract Number*	21003878		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$80,000.00
38	Contract Date *	12/21/2020		
39	Period of Performance Start Date *	12/21/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	COVID testing inmates & Staff Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$80,000.00	\$00	\$80,000.00
<b>Total</b>		\$00	\$80,000.00	\$00	\$80,000.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	12/21/2020	12/21/2020	\$80,000.00	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$80,000.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21003874**

34	Sub-Recipient Organization (Contractor)*	SUMO MEDICAL STAFFING-26-147947		
35	Contract Number*	21003874		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$0.00
38	Contract Date *	12/21/2020		
39	Period of Performance Start Date *	12/21/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	COVID related Inmate Care Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$0.00	\$00	\$0.00
<b>Total</b>		\$00	\$0.00	\$00	\$0.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B	52 C	52 D	52 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0		\$0.00	Select	
Line 2	0		\$0.00	Select	
<b>Total:</b>					\$0.00

**Current Quarter Expenditures**

	53 A	53 B	53 C	53 D	53 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
<b>Total:</b>						\$00

**Sub Screen: Contract: 21003068**

34	Sub-Recipient Organization (Contractor)*	ZR SYSTEMS GROUP LLC-809511590		
35	Contract Number*	21003068		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$61,854.14		
38	Contract Date *	12/21/2020		
39	Period of Performance Start Date *	12/21/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Inmate Visitation and Education Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$61,854.14	\$00	\$61,854.14
<b>Total</b>		\$00	\$61,854.14	\$00	\$61,854.14

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	001 - PSD - Public Safety Response to COVID- 19 01	01/01/2021	03/31/2021	\$61,854.14	Public Health Expenses	
<b>Total:</b>						\$61,854.14

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21350009 - 1**

34	Sub-Recipient Organization (Contractor)*	ISLAND SLIPPER FACTORY, LIMITED-009198987		
35	Contract Number*	21350009 - 1		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$575,916.00		
38	Contract Date *	08/14/2020		
39	Period of Performance Start Date *	08/14/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	3949 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4413		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	PLEATED FABRIC FACE MASKS - 100K EA.		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - DEF - SCRF Personal Protection Equipment	\$00	\$575,916.00	\$00	\$575,916.00
<b>Total</b>		\$00	\$575,916.00	\$00	\$575,916.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - DEF - SCRF Personal Protection Equipment	08/14/2020	12/31/2020	\$431,937.00	Personal Protective Equipment	
Line 2	001 - DEF - SCRF Personal Protection Equipment	08/14/2020	03/31/2021	\$143,979.00	Personal Protective Equipment	
<b>Total:</b>						\$575,916.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21350045**

34	Sub-Recipient Organization (Contractor)*	NATIONWIDE MEDICAL SUPPLY INC.-130676565		
35	Contract Number*	21350045		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$1,465,968.01		
38	Contract Date *	08/14/2020		
39	Period of Performance Start Date *	08/14/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	3949 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4413		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	200K EA MAKRITE 9500-N95; 200K EA MAKRITE 9500-N95S Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - DEF - SCRF Personal Protection Equipment	\$00	\$1,465,968.01	\$00	\$1,465,968.01
<b>Total</b>		\$00	\$1,465,968.01	\$00	\$1,465,968.01

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - DEF - SCRF Personal Protection Equipment	08/14/2020	12/31/2020	\$142,052.30	Personal Protective Equipment	
Line 2	001 - DEF - SCRF Personal Protection Equipment	08/14/2020	03/31/2021	\$1,323,915.71	Personal Protective Equipment	
<b>Total:</b>						\$1,465,968.01

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00



**Sub Screen: Contract: 21350052**

34	Sub-Recipient Organization (Contractor)*	DIREST SUPPORT RESOURCES, INC-078455767		
35	Contract Number*	21350052		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$1,450,000.00		
38	Contract Date *	12/14/2020		
39	Period of Performance Start Date *	12/14/2020		
40	Period of Performance End Date *	12/31/2021		
41	Primary Place of Performance Address Line 1 *	3949 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4413		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	MO. WAREHOUSE STORAGE, HANDLING, AND TRANSPORTATION		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - DEF - SCRF Personal Protection Equipment	\$00	\$1,450,000.00	\$00	\$730,435.06
<b>Total</b>		\$00	\$1,450,000.00	\$00	\$730,435.06

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - DEF - SCRF Personal Protection Equipment	12/14/2020	12/31/2020	\$158,533.59	Personal Protective Equipment	
Line 2	001 - DEF - SCRF Personal Protection Equipment	12/14/2020	03/31/2021	\$1,057,839.11	Personal Protective Equipment	
Line 3	001 - DEF - SCRF Personal Protection Equipment	12/14/2020	06/30/2021	\$-485,937.64	Personal Protective Equipment	
<b>Total:</b>						\$730,435.06

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21527011**

34	Sub-Recipient Organization (Contractor)*	VERITIV OPERATING CO.-044002046		
35	Contract Number*	21527011		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$151,525.92		
38	Contract Date *	09/18/2020		
39	Period of Performance Start Date *	09/18/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	3949 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4413		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Not Specified		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - DEF - COVID19 Response	\$00	\$151,525.92	\$00	\$151,525.92
<b>Total</b>		\$00	\$151,525.92	\$00	\$151,525.92

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	002 - DEF - COVID19 Response	09/18/2020	03/31/2021	\$151,525.92	Personal Protective Equipment	
<b>Total:</b>						\$151,525.92

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21527012**

34	Sub-Recipient Organization (Contractor)*	TRIPLE F HOLDINGS, LLC-094639887		
35	Contract Number*	21527012		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$248,808.65		
38	Contract Date *	10/01/2020		
39	Period of Performance Start Date *	10/01/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	3949 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4413		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	3500 EA HAND SANITIZER 5 GAL DRUM; 130CS TOWEL ROLL		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - DEF - COVID19 Response	\$00	\$248,808.65	\$00	\$248,808.65
<b>Total</b>		\$00	\$248,808.65	\$00	\$248,808.65

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	002 - DEF - COVID19 Response	10/01/2020	12/31/2020	\$248,808.65	Personal Protective Equipment	
Line 2	0			\$0.00	Select	
<b>Total:</b>						\$248,808.65

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21527015**

34	Sub-Recipient Organization (Contractor)*	WW GRAINGER, INC.-606154490		
35	Contract Number*	21527015		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$54,540.22
38	Contract Date *	10/01/2020		
39	Period of Performance Start Date *	10/01/2020		
40	Period of Performance End Date *	12/31/2021		
41	Primary Place of Performance Address Line 1 *	3954 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4414		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	1334 EA PK 6 BLEACH, 445 CS PK 9 DISINFECTANT CLEANER		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - DEF - COVID19 Response	\$00	\$54,540.22	\$00	\$54,540.22
<b>Total</b>		\$00	\$54,540.22	\$00	\$54,540.22

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	002 - DEF - COVID19 Response	10/01/2020	06/30/2021	\$54,540.22	Personal Protective Equipment	
<b>Total:</b>						\$54,540.22

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 078607093**

34	Sub-Recipient Organization (Contractor)*	MANULELE DISTILLERS, LLC-044450399		
35	Contract Number*	078607093		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$2,186,950.00		
38	Contract Date *	10/05/2020		
39	Period of Performance Start Date *	10/05/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	3954 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4414		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	CHEMWIPES DRY GREEN CLOTHS		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - DEF - COVID19 Response	\$00	\$2,186,950.00	\$00	\$955,492.20
<b>Total</b>		\$00	\$2,186,950.00	\$00	\$955,492.20

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	002 - DEF - COVID19 Response	10/05/2020	12/31/2020	\$955,492.20	Personal Protective Equipment	
<b>Total:</b>						\$955,492.20

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21527019**

34	Sub-Recipient Organization (Contractor)*	THE HB GROUP-604586677		
35	Contract Number*	21527019		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$448,690.92
38	Contract Date *	10/06/2020		
39	Period of Performance Start Date *	10/06/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	3956 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4414		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *			
50	Contract Description *	NITRILE GLOVES		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - DEF - COVID19 Response	\$00	\$448,690.92	\$00	\$100,724.57
<b>Total</b>		\$00	\$448,690.92	\$00	\$100,724.57

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	002 - DEF - COVID19 Response	10/06/2020	03/31/2021	\$100,724.57	Personal Protective Equipment	
<b>Total:</b>						\$100,724.57

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21527020**

34	Sub-Recipient Organization (Contractor)*	BODY ARMOR OUTLET, LLC-022599101		
35	Contract Number*	21527020		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$879,371.38		
38	Contract Date *	10/06/2020		
39	Period of Performance Start Date *	10/06/2020		
40	Period of Performance End Date *	12/31/2021		
41	Primary Place of Performance Address Line 1 *	3957 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4413		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	ISOLATION GOWNS		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - DEF - COVID19 Response	\$00	\$879,371.38	\$00	\$879,316.16
<b>Total</b>		\$00	\$879,371.38	\$00	\$879,316.16

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	002 - DEF - COVID19 Response	10/06/2020	12/31/2020	\$126,384.97	Personal Protective Equipment	
Line 2	002 - DEF - COVID19 Response	10/06/2020	03/31/2021	\$468,037.42	Personal Protective Equipment	
Line 3	002 - DEF - COVID19 Response	10/06/2020	06/30/2021	\$284,893.77	Personal Protective Equipment	
<b>Total:</b>						\$879,316.16

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 606154490**

34	Sub-Recipient Organization (Contractor)*	WW GRAINGER, INC.-606154490		
35	Contract Number*	606154490		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$837,696.00		
38	Contract Date *	11/12/2020		
39	Period of Performance Start Date *	11/12/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	3961 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4413		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	PROTECTIVE COVERALLS		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - DEF - COVID19 Response	\$00	\$837,696.00	\$00	\$0.00
<b>Total</b>		\$00	\$837,696.00	\$00	\$0.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B	52 C	52 D	52 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0		\$0.00	Select	
<b>Total:</b>					\$0.00

**Current Quarter Expenditures**

	53 A	53 B	53 C	53 D	53 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
<b>Total:</b>						\$00



**Sub Screen: Contract: 21527026**

34	Sub-Recipient Organization (Contractor)*	TRIPLE F HOLDINGS, LLC-094639887		
35	Contract Number*	21527026		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$225,549.65		
38	Contract Date *	11/12/2020		
39	Period of Performance Start Date *	11/12/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	3963 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4413		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	BLEACH, DISINFECTANTS, SPRAYERS		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - DEF - COVID19 Response	\$00	\$225,549.65	\$00	\$225,549.65
<b>Total</b>		\$00	\$225,549.65	\$00	\$225,549.65

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0	11/12/2020	12/31/2020	\$0.00	Select	
Line 2	002 - DEF - COVID19 Response	11/12/2020	03/31/2021	\$225,549.65	Personal Protective Equipment	
<b>Total:</b>						\$225,549.65

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21527052**

34	Sub-Recipient Organization (Contractor)*	HAWAII CORRECTIONAL INDUSTRIES-965699994		
35	Contract Number*	21527052		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$0.00
38	Contract Date *	11/02/2020		
39	Period of Performance Start Date *	11/02/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	3969 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4413		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	HALO FOGGERS FOR DOD/DAGS; ORIGINAL PO 21524054		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - DEF - COVID19 Response	\$00	\$0.00	\$00	\$0.00
<b>Total</b>		\$00	\$0.00	\$00	\$0.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	002 - DEF - COVID19 Response	11/02/2020	03/31/2021	\$127,375.00	Personal Protective Equipment	
Line 3	002 - DEF - COVID19 Response	11/02/2020	03/31/2021	\$-127,375.00	Personal Protective Equipment	
<b>Total:</b>						\$0.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21524049**

34	Sub-Recipient Organization (Contractor)*	SMS RESEARCH AND MARKETING SERVICES INC-967748224		
35	Contract Number*	21524049		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$84,586.24
38	Contract Date *	12/23/2020		
39	Period of Performance Start Date *	12/23/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	3974 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4414		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	MANDATORY ARRIVAL TRAVEL DECLARATION PROJECT 1321.0 HRS		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - DEF - COVID19 Response	\$00	\$84,586.24	\$00	\$84,586.24
<b>Total</b>		\$00	\$84,586.24	\$00	\$84,586.24

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	002 - DEF - COVID19 Response	12/23/2020	12/31/2020	\$84,586.24	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$84,586.24

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21524063**

34	Sub-Recipient Organization (Contractor)*	HAWAII VISITORS AND CONVENTION BUREAU-003196271		
35	Contract Number*	21524063		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$177,820.00		
38	Contract Date *	11/25/2020		
39	Period of Performance Start Date *	11/25/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	3974 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4414		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	COVID CALL CENTER 1-30 NOV20, 1-31 DEC20		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - DEF - COVID19 Response	\$00	\$177,820.00	\$00	\$177,802.00
<b>Total</b>		\$00	\$177,820.00	\$00	\$177,802.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	002 - DEF - COVID19 Response	11/25/2020	12/31/2020	\$177,820.00	COVID-19 Testing and Contact Tracing	
Line 2	002 - DEF - COVID19 Response	11/25/2020	12/31/2020	\$-18.00	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$177,802.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: PO 261897**

34	Sub-Recipient Organization (Contractor)*	Prolink Healthcare, LLC-357246		
35	Contract Number*	PO 261897		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$14,000,000.00		
38	Contract Date *	10/01/2020		
39	Period of Performance Start Date *	10/01/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	1250 Punchbowl St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Surge staffing for hospitals Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	003 - HTH - Medical Staffing to Meet Critical Surge Capacity Needs of Hawaii Hospitals	\$00	\$14,000,000.00	\$00	\$14,000,000.00
<b>Total</b>		\$00	\$14,000,000.00	\$00	\$14,000,000.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	003 - HTH - Medical Staffing to Meet Critical Surge Capacity Needs of Hawaii Hospitals	10/01/2020	12/31/2020	\$10,886,561.41	Public Health Expenses	
Line 2	003 - HTH - Medical Staffing to Meet Critical Surge Capacity Needs of Hawaii Hospitals	12/01/2020	03/31/2021	\$3,113,438.59	Medical Expenses	
<b>Total:</b>						\$14,000,000.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: PO 262466**

34	Sub-Recipient Organization (Contractor)*	FISHER SCIENTIFIC COMPANY L.L.C.-074399684		
35	Contract Number*	PO 262466		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$185,073.22		
38	Contract Date *	10/01/2020		
39	Period of Performance Start Date *	10/01/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	2725 Waimano Home Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Pearl City		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96782-1401		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Testing supplies		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - HTH - DOH COVID-19 Enhanced Testing and Surveillance	\$00	\$185,073.22	\$00	\$185,073.22
<b>Total</b>		\$00	\$185,073.22	\$00	\$185,073.22

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	002 - HTH - DOH COVID-19 Enhanced Testing and Surveillance	11/12/2020	11/12/2020	\$185,073.22	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$185,073.22

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: PO 262634**

34	Sub-Recipient Organization (Contractor)*	PAC/RIM MEDICAL TECHNOLOGY AND SUPPLIES CORP-186668992		
35	Contract Number*	PO 262634		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$17,732,060.97		
38	Contract Date *	10/14/2020		
39	Period of Performance Start Date *	10/14/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1250 Punchbowl St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Rapid Antigen Tests, Veritor Analyzers		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - HTH - DOH COVID-19 Enhanced Testing and Surveillance	\$00	\$17,732,060.97	\$00	\$17,732,060.97
<b>Total</b>		\$00	\$17,732,060.97	\$00	\$17,732,060.97

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	002 - HTH - DOH COVID-19 Enhanced Testing and Surveillance	10/14/2020	10/14/2020	\$17,732,060.97	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$17,732,060.97

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: PO 261781**

34	Sub-Recipient Organization (Contractor)*	Biomerieux Inc-56469		
35	Contract Number*	PO 261781		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$64,005.78		
38	Contract Date *	11/01/2020		
39	Period of Performance Start Date *	11/01/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	2725 Waimano Home Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Pearl City		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96782-1401		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Cart for NicliSENS easyMag		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - HTH - DOH COVID-19 Enhanced Testing and Surveillance	\$00	\$64,005.78	\$00	\$64,005.78
<b>Total</b>		\$00	\$64,005.78	\$00	\$64,005.78

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	002 - HTH - DOH COVID-19 Enhanced Testing and Surveillance	11/01/2020	12/31/2020	\$64,005.78	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$64,005.78

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00



**Sub Screen: Contract: PO 263086**

34	Sub-Recipient Organization (Contractor)*	Illumina Inc-31034		
35	Contract Number*	PO 263086		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$100,033.22		
38	Contract Date *	12/14/2020		
39	Period of Performance Start Date *	12/14/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	2725 Waimano Home Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Pearl City		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96782-1401		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Illumina RNA Prep with Enrichment Tagmentation		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - HTH - DOH COVID-19 Enhanced Testing and Surveillance	\$00	\$100,033.22	\$00	\$100,033.22
<b>Total</b>		\$00	\$100,033.22	\$00	\$100,033.22

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	002 - HTH - DOH COVID-19 Enhanced Testing and Surveillance	12/14/2020	12/31/2020	\$100,033.22	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$100,033.22

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: PO 262130**

34	Sub-Recipient Organization (Contractor)*	PAC/RIM MEDICAL TECHNOLOGY AND SUPPLIES CORP-186668992		
35	Contract Number*	PO 262130		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$12,225,709.66		
38	Contract Date *	10/01/2020		
39	Period of Performance Start Date *	10/01/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1250 Punchbowl St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Becton Dickenson Rapid Antigen Tests and Veritor Analyzers		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - HTH - DOH COVID-19 Enhanced Testing and Surveillance	\$00	\$12,225,709.66	\$00	\$12,225,709.66
<b>Total</b>		\$00	\$12,225,709.66	\$00	\$12,225,709.66

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	002 - HTH - DOH COVID-19 Enhanced Testing and Surveillance	10/01/2020	12/31/2020	\$12,225,709.66	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$12,225,709.66

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: PO 262616**

34	Sub-Recipient Organization (Contractor)*	Hologic-36358		
35	Contract Number*	PO 262616		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$133,539.21		
38	Contract Date *	10/01/2020		
39	Period of Performance Start Date *	10/01/2020		
40	Period of Performance End Date *	12/31/2021		
41	Primary Place of Performance Address Line 1 *	2725 Waimano Home Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Pearl City		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96782-1401		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	SAR-COV2 Assay Kits and Supplies		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - HTH - DOH COVID-19 Enhanced Testing and Surveillance	\$00	\$133,539.21	\$00	\$35,938.85
<b>Total</b>		\$00	\$133,539.21	\$00	\$35,938.85

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	002 - HTH - DOH COVID-19 Enhanced Testing and Surveillance	10/01/2020	12/31/2020	\$97,600.86	COVID-19 Testing and Contact Tracing	
Line 2	002 - HTH - DOH COVID-19 Enhanced Testing and Surveillance	10/01/2020	08/31/2021	\$-61,662.01	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$35,938.85

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: PO 262765**

34	Sub-Recipient Organization (Contractor)*	Hologic-36358		
35	Contract Number*	PO 262765		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$256,785.24		
38	Contract Date *	10/01/2020		
39	Period of Performance Start Date *	10/01/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	2725 Waimano Home Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Pearl City		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96782-1401		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	PRD 04172 Panther Fusion		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - HTH - DOH COVID-19 Enhanced Testing and Surveillance	\$00	\$256,785.24	\$00	\$256,785.24
<b>Total</b>		\$00	\$256,785.24	\$00	\$256,785.24

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	002 - HTH - DOH COVID-19 Enhanced Testing and Surveillance	10/01/2020	12/30/2020	\$256,785.24	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$256,785.24

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: PO 262991**

34	Sub-Recipient Organization (Contractor)*	Clinical Micro Sensors Inc-43387		
35	Contract Number*	PO 262991		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$274,045.00		
38	Contract Date *	10/01/2020		
39	Period of Performance Start Date *	10/01/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	2725 Waimano Home Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Pearl City		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96782-1401		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	ePlex System, Add-on Tower, Supplies		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - HTH - DOH COVID-19 Enhanced Testing and Surveillance	\$00	\$274,045.00	\$00	\$274,045.00
<b>Total</b>		\$00	\$274,045.00	\$00	\$274,045.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	002 - HTH - DOH COVID-19 Enhanced Testing and Surveillance	10/01/2020	12/30/2020	\$274,045.00	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$274,045.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: PO 263009**

34	Sub-Recipient Organization (Contractor)*	Diagnostic Laboratory Services-144535598		
35	Contract Number*	PO 263009		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$64,000.00
38	Contract Date *	12/14/2020		
39	Period of Performance Start Date *	12/14/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	2725 Waimano Home Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Pearl City		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96782-1401		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Clinical Lab Testing - SARS CoV-2		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - HTH - DOH COVID-19 Enhanced Testing and Surveillance	\$00	\$64,000.00	\$00	\$64,000.00
<b>Total</b>		\$00	\$64,000.00	\$00	\$64,000.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	002 - HTH - DOH COVID-19 Enhanced Testing and Surveillance	12/14/2020	12/30/2020	\$64,000.00	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$64,000.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: PO 263014**

34	Sub-Recipient Organization (Contractor)*	Clinical Laboratories of Hawaii, LLP-153598474		
35	Contract Number*	PO 263014		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$64,000.00
38	Contract Date *	12/14/2020		
39	Period of Performance Start Date *	12/14/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	2725 Waimano Home Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Pearl City		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96782-1401		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Clinical Lab Testing - SARS CoV-2		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - HTH - DOH COVID-19 Enhanced Testing and Surveillance	\$00	\$64,000.00	\$00	\$64,000.00
<b>Total</b>		\$00	\$64,000.00	\$00	\$64,000.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	002 - HTH - DOH COVID-19 Enhanced Testing and Surveillance	12/14/2020	12/30/2020	\$64,000.00	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$64,000.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: PO 263064**

34	Sub-Recipient Organization (Contractor)*	Hologic-36358		
35	Contract Number*	PO 263064		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$322,303.54		
38	Contract Date *	12/14/2020		
39	Period of Performance Start Date *	12/14/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	2725 Waimano Home Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Pearl City		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96782-1401		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	SARS-COV2		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - HTH - DOH COVID-19 Enhanced Testing and Surveillance	\$00	\$322,303.54	\$00	\$262,822.14
<b>Total</b>		\$00	\$322,303.54	\$00	\$262,822.14

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	002 - HTH - DOH COVID-19 Enhanced Testing and Surveillance	12/14/2020	12/31/2020	\$59,481.40	COVID-19 Testing and Contact Tracing	
Line 2	002 - HTH - DOH COVID-19 Enhanced Testing and Surveillance	12/14/2020	12/30/2020	\$203,340.74	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$262,822.14

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00



**Sub Screen: Contract: PO 263066**

34	Sub-Recipient Organization (Contractor)*	Clinical Micro Sensors Inc-43387		
35	Contract Number*	PO 263066		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$175,351.00		
38	Contract Date *	12/14/2020		
39	Period of Performance Start Date *	12/14/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	2725 Waimano Home Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Pearl City		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96782-1401		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	ePlex Respiratory Pathogen Panel		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - HTH - DOH COVID-19 Enhanced Testing and Surveillance	\$00	\$175,351.00	\$00	\$175,351.00
<b>Total</b>		\$00	\$175,351.00	\$00	\$175,351.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	002 - HTH - DOH COVID-19 Enhanced Testing and Surveillance	12/14/2020	12/30/2020	\$175,351.00	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$175,351.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: PO 069274**

34	Sub-Recipient Organization (Contractor)*	HC Builders LLC-313180		
35	Contract Number*	PO 069274		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$85,000.00
38	Contract Date *	10/01/2020		
39	Period of Performance Start Date *	10/01/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	2725 Waimano Home Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Pearl City		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96782-1401		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *			
50	Contract Description *	Not Specified		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - HTH - DOH COVID-19 Enhanced Testing and Surveillance	\$00	\$85,000.00	\$00	\$85,000.00
<b>Total</b>		\$00	\$85,000.00	\$00	\$85,000.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	002 - HTH - DOH COVID-19 Enhanced Testing and Surveillance	10/01/2020	12/30/2020	\$85,000.00	Public Health Expenses	
<b>Total:</b>						\$85,000.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00261110-01**

34	Sub-Recipient Organization (Contractor)*	Oahu Publications-269134		
35	Contract Number*	00261110-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$57,827.20
38	Contract Date *	08/18/2020		
39	Period of Performance Start Date *	08/18/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1250 Punchbowl St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	"Not taking Chances" communications segment		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$57,827.20	\$00	\$23,560.00
<b>Total</b>		\$00	\$57,827.20	\$00	\$23,560.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	001 - HTH - DOH COVID-19 Statewide Response Effort	08/18/2020	12/30/2020	\$23,560.00	Items Not Listed Above	COVID-19 communications/education/outreach
<b>Total:</b>						\$23,560.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00261990-01**

34	Sub-Recipient Organization (Contractor)*	Oahu Publications-269134		
35	Contract Number*	00261990-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$57,827.20		
38	Contract Date *	09/01/2020		
39	Period of Performance Start Date *	09/01/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1250 Punchbowl St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	"Live with no Regrets" communications segment		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$57,827.20	\$00	\$29,071.16
<b>Total</b>		\$00	\$57,827.20	\$00	\$29,071.16

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	001 - HTH - DOH COVID-19 Statewide Response Effort	09/01/2020	12/30/2020	\$29,071.16	Items Not Listed Above	COVID-19 communications/education/outreach
<b>Total:</b>						\$29,071.16

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00261961-01**

34	Sub-Recipient Organization (Contractor)*	Hawaii Association of Broadcasters, Inc.-264565		
35	Contract Number*	00261961-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$60,000.00
38	Contract Date *	09/14/2020		
39	Period of Performance Start Date *	09/14/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	1250 Punchbowl St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	"Doing our Part" communications segment		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$60,000.00	\$00	\$60,000.00
<b>Total</b>		\$00	\$60,000.00	\$00	\$60,000.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	001 - HTH - DOH COVID-19 Statewide Response Effort	09/14/2020	12/27/2020	\$60,000.00	Items Not Listed Above	COVID-19 communications/education/outreach
<b>Total:</b>						\$60,000.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00262277-01**

34	Sub-Recipient Organization (Contractor)*	Staffing Solutions of Hawaii-273449		
35	Contract Number*	00262277-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$66,252.08		
38	Contract Date *	04/15/2020		
39	Period of Performance Start Date *	04/15/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	1250 Punchbowl St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Clerical Services for OSHM Vital Records		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$66,252.08	\$00	\$66,252.08
<b>Total</b>		\$00	\$66,252.08	\$00	\$66,252.08

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	04/15/2020	12/30/2020	\$47,700.34	Administrative Expenses	
Line 2	001 - HTH - DOH COVID-19 Statewide Response Effort	04/17/2020	12/30/2020	\$18,551.74	Items Not Listed Above	COVID-19 communications/education/outreach
<b>Total:</b>						\$66,252.08

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00261106-01**

34	Sub-Recipient Organization (Contractor)*	KITV-13922		
35	Contract Number*	00261106-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$74,999.96		
38	Contract Date *	08/18/2020		
39	Period of Performance Start Date *	08/18/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	1250 Punchbowl St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	"Not Taking Chances" campaign		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$74,999.96	\$00	\$74,999.96
<b>Total</b>		\$00	\$74,999.96	\$00	\$74,999.96

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	08/18/2020	12/30/2020	\$47,905.75	Items Not Listed Above	COVID 19 communications/education/outreach
Line 2	001 - HTH - DOH COVID-19 Statewide Response Effort	08/18/2020	12/30/2020	\$27,094.21	Items Not Listed Above	COVID-19 communications/education/outreach
<b>Total:</b>						\$74,999.96

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00261479-01**

34	Sub-Recipient Organization (Contractor)*	Charter Communications Operating LLC-342859		
35	Contract Number*	00261479-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$78,375.00		
38	Contract Date *	09/10/2020		
39	Period of Performance Start Date *	09/10/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1250 Punchbowl St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	"Live with no Regrets" campaign		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$78,375.00	\$00	\$39,547.54
<b>Total</b>		\$00	\$78,375.00	\$00	\$39,547.54

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	09/10/2020	12/31/2020	\$39,547.54	Items Not Listed Above	COVID 19 communications/education/outreach
<b>Total:</b>						\$39,547.54

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00



**Sub Screen: Contract: 00261787-01**

34	Sub-Recipient Organization (Contractor)*	Capstar Radio Operating Company-327751		
35	Contract Number*	00261787-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$89,937.13
38	Contract Date *	10/01/2020		
39	Period of Performance Start Date *	10/01/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1250 Punchbowl St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	"If I Only Had Known" campaign		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$89,937.13	\$00	\$89,937.13
<b>Total</b>		\$00	\$89,937.13	\$00	\$89,937.13

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	10/01/2020	12/31/2020	\$44,540.99	Items Not Listed Above	COVID 19 communications/education/outreach
Line 2	001 - HTH - DOH COVID-19 Statewide Response Effort	10/01/2020	12/30/2020	\$45,396.14	Items Not Listed Above	COVID-19 communications/education/outreach
<b>Total:</b>						\$89,937.13

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00262705-01**

34	Sub-Recipient Organization (Contractor)*	PC Specialist Inc. dba Technology Integration Group-95-382559		
35	Contract Number*	00262705-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$93,717.24
38	Contract Date *	11/16/2020		
39	Period of Performance Start Date *	11/16/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1250 Punchbowl St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Backup and recovery of DOH data		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$93,717.24	\$00	\$93,717.24
<b>Total</b>		\$00	\$93,717.24	\$00	\$93,717.24

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	001 - HTH - DOH COVID-19 Statewide Response Effort	11/16/2020	12/30/2020	\$93,717.24	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$93,717.24

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00262689-01**

34	Sub-Recipient Organization (Contractor)*	Hawaiian Telcom-006926943		
35	Contract Number*	00262689-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$99,476.40		
38	Contract Date *	11/10/2020		
39	Period of Performance Start Date *	11/10/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1250 Punchbowl St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Network connectivity		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$99,476.40	\$00	\$99,476.40
<b>Total</b>		\$00	\$99,476.40	\$00	\$99,476.40

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0	11/10/2020	12/30/2020	\$0.00	Select	
Line 2	001 - HTH - DOH COVID-19 Statewide Response Effort	11/10/2020	12/30/2020	\$99,476.40	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$99,476.40

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00261861-01**

34	Sub-Recipient Organization (Contractor)*	Gray Media Group, Inc.-354372		
35	Contract Number*	00261861-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$104,999.95		
38	Contract Date *	10/01/2020		
39	Period of Performance Start Date *	10/01/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1250 Punchbowl St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	"If I Only Had Known" campaign		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$104,999.95	\$00	\$104,999.95
<b>Total</b>		\$00	\$104,999.95	\$00	\$104,999.95

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	001 - HTH - DOH COVID-19 Statewide Response Effort	10/01/2020	12/30/2020	\$104,999.95	Items Not Listed Above	COVID-19 communications/education/outreach
<b>Total:</b>						\$104,999.95

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00261782-01**

34	Sub-Recipient Organization (Contractor)*	Nexstar Broadcasting, Inc.-326368		
35	Contract Number*	00261782-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$111,356.50		
38	Contract Date *	09/28/2020		
39	Period of Performance Start Date *	09/28/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1250 Punchbowl St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	"If I Only Had Known" campaign		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$111,356.50	\$00	\$111,356.50
<b>Total</b>		\$00	\$111,356.50	\$00	\$111,356.50

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	09/28/2020	12/31/2020	\$71,860.20	Items Not Listed Above	COVID 19 communications/education/outreach
Line 2	001 - HTH - DOH COVID-19 Statewide Response Effort	09/28/2020	12/30/2020	\$39,496.30	Items Not Listed Above	COVID-19 communications/education/outreach
<b>Total:</b>						\$111,356.50

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00261102-01**

34	Sub-Recipient Organization (Contractor)*	Nexstar Broadcasting, Inc.-326368		
35	Contract Number*	00261102-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$130,235.55		
38	Contract Date *	08/18/2020		
39	Period of Performance Start Date *	08/18/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1250C Punchbowl St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	"Not Taking Chances" campaign		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$130,235.55	\$00	\$76,888.82
<b>Total</b>		\$00	\$130,235.55	\$00	\$76,888.82

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	08/18/2020	12/31/2020	\$76,888.82	Items Not Listed Above	COVID 19 communications/education/outreach
Line 2	0			\$0.00	Select	
<b>Total:</b>						\$76,888.82

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00262495-01**

34	Sub-Recipient Organization (Contractor)*	Staffing Solutions of Hawaii-273449		
35	Contract Number*	00262495-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$136,319.95		
38	Contract Date *	11/01/2020		
39	Period of Performance Start Date *	11/01/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1250 Punchbowl St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	KDHO Surge Staffing		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$136,319.95	\$00	\$105,740.37
<b>Total</b>		\$00	\$136,319.95	\$00	\$105,740.37

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	11/01/2020	12/31/2020	\$30,579.58	COVID-19 Testing and Contact Tracing	
Line 2	001 - HTH - DOH COVID-19 Statewide Response Effort	11/01/2020	12/30/2020	\$75,160.79	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$105,740.37

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00261111-01**

34	Sub-Recipient Organization (Contractor)*	Capstar Radio Operating Company-327751		
35	Contract Number*	00261111-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$149,475.57		
38	Contract Date *	08/18/2020		
39	Period of Performance Start Date *	08/18/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1250 Punchbowl St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	"Not Taking Chances" campaign		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$149,475.57	\$00	\$149,475.57
<b>Total</b>		\$00	\$149,475.57	\$00	\$149,475.57

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	08/18/2020	12/31/2020	\$87,251.28	Items Not Listed Above	COVID 19 communications/education/outreach
Line 2	001 - HTH - DOH COVID-19 Statewide Response Effort	08/18/2020	12/27/2020	\$62,224.29	Items Not Listed Above	COVID-19 communications/education/outreach
<b>Total:</b>						\$149,475.57

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00



**Sub Screen: Contract: 00262688-01**

34	Sub-Recipient Organization (Contractor)*	ReadyzoneHQ, Inc.-329670		
35	Contract Number*	00262688-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$150,000.00		
38	Contract Date *	11/02/2020		
39	Period of Performance Start Date *	11/02/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1250 Punchbowl St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Training materials - vaccine distribution		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$150,000.00	\$00	\$0.00
<b>Total</b>		\$00	\$150,000.00	\$00	\$0.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B	52 C	52 D	52 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0		\$0.00	Select	
<b>Total:</b>					\$0.00

**Current Quarter Expenditures**

	53 A	53 B	53 C	53 D	53 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
<b>Total:</b>						\$00

**Sub Screen: Contract: 00263122-01**

34	Sub-Recipient Organization (Contractor)*	Nexstar Broadcasting, Inc.-326368		
35	Contract Number*	00263122-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$174,999.68		
38	Contract Date *	12/01/2020		
39	Period of Performance Start Date *	12/01/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1250 Punchbowl St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Mental Health, Self Care digital ad time		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$174,999.68	\$00	\$174,999.68
<b>Total</b>		\$00	\$174,999.68	\$00	\$174,999.68

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	001 - HTH - DOH COVID-19 Statewide Response Effort	12/01/2020	12/30/2020	\$174,999.68	Items Not Listed Above	COVID-19 communications/education/outreach
<b>Total:</b>						\$174,999.68

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00261103-01**

34	Sub-Recipient Organization (Contractor)*	Gray Media Group, Inc.-354372		
35	Contract Number*	00261103-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$174,999.94		
38	Contract Date *	08/18/2020		
39	Period of Performance Start Date *	08/18/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1250 Punchbowl St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	"Not Taking Chances" campaign		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$174,999.94	\$00	\$174,999.94
<b>Total</b>		\$00	\$174,999.94	\$00	\$174,999.94

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	08/18/2020	12/31/2020	\$69,999.97	Items Not Listed Above	COVID 19 communications/education/outreach
Line 2	001 - HTH - DOH COVID-19 Statewide Response Effort	08/18/2020	12/30/2020	\$104,999.97	Items Not Listed Above	COVID-19 communications/education/outreach
<b>Total:</b>						\$174,999.94

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00262568-01**

34	Sub-Recipient Organization (Contractor)*	Danesh, Reza, MD-357333		
35	Contract Number*	00262568-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$276,410.93		
38	Contract Date *	08/01/2020		
39	Period of Performance Start Date *	08/01/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	54 S High St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Wailuku		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96793-2102		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	2		
50	Contract Description *	Roselani Maui Outbreak Mobile Doctor		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$276,410.93	\$00	\$275,410.93
<b>Total</b>		\$00	\$276,410.93	\$00	\$275,410.93

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	001 - HTH - DOH COVID-19 Statewide Response Effort	08/01/2020	09/30/2020	\$275,410.93	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$275,410.93

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00262419-01**

34	Sub-Recipient Organization (Contractor)*	Wahiawa General Hospital-81034		
35	Contract Number*	00262419-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$300,000.00		
38	Contract Date *	09/10/2020		
39	Period of Performance Start Date *	09/10/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1250 Punchbowl St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Sub-acute patient care		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$300,000.00	\$00	\$300,000.00
<b>Total</b>		\$00	\$300,000.00	\$00	\$300,000.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	09/10/2020	12/31/2020	\$111,250.00	Public Health Expenses	
Line 2	001 - HTH - DOH COVID-19 Statewide Response Effort	09/10/2020	12/28/2020	\$188,750.00	Public Health Expenses	
<b>Total:</b>						\$300,000.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00262407-01**

34	Sub-Recipient Organization (Contractor)*	Hawaii Health and Harm Reduction Center-352143		
35	Contract Number*	00262407-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$789,888.00		
38	Contract Date *	09/01/2020		
39	Period of Performance Start Date *	09/01/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1250 Punchbowl St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Case management services		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$789,888.00	\$00	\$789,888.00
<b>Total</b>		\$00	\$789,888.00	\$00	\$789,888.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	09/01/2020	12/31/2020	\$402,816.05	Public Health Expenses	
Line 2	001 - HTH - DOH COVID-19 Statewide Response Effort	09/30/2020	12/28/2020	\$387,071.95	Public Health Expenses	
<b>Total:</b>						\$789,888.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00262413-01**

34	Sub-Recipient Organization (Contractor)*	Care Hawaii, Inc.-264212		
35	Contract Number*	00262413-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$548,208.00		
38	Contract Date *	08/10/2020		
39	Period of Performance Start Date *	08/10/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1250 Punchbowl St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Case management services		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$548,208.00	\$00	\$548,208.00
<b>Total</b>		\$00	\$548,208.00	\$00	\$548,208.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	08/10/2020	12/28/2020	\$284,958.00	Public Health Expenses	
Line 2	001 - HTH - DOH COVID-19 Statewide Response Effort	08/10/2020	12/28/2020	\$263,250.00	Public Health Expenses	
<b>Total:</b>						\$548,208.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00262405-01**

34	Sub-Recipient Organization (Contractor)*	CONTAINER STORAGE CO. OF-99-022398		
35	Contract Number*	00262405-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$791,164.60		
38	Contract Date *	11/02/2020		
39	Period of Performance Start Date *	11/02/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1250 Punchbowl St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Iso/quarantine container units		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$791,164.60	\$00	\$791,164.00
<b>Total</b>		\$00	\$791,164.60	\$00	\$791,164.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	11/02/2020	12/28/2020	\$791,164.00	Public Health Expenses	
<b>Total:</b>						\$791,164.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00



**Sub Screen: Contract: 00262418-01**

34	Sub-Recipient Organization (Contractor)*	Partners in Development-284478		
35	Contract Number*	00262418-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$896,280.00		
38	Contract Date *	08/31/2020		
39	Period of Performance Start Date *	08/31/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1250 Punchbowl St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Case management services		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$896,280.00	\$00	\$896,280.00
<b>Total</b>		\$00	\$896,280.00	\$00	\$896,280.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	08/31/2020	12/28/2020	\$733,320.00	Public Health Expenses	
Line 2	001 - HTH - DOH COVID-19 Statewide Response Effort	08/31/2020	12/28/2020	\$162,960.00	Public Health Expenses	
<b>Total:</b>						\$896,280.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00263172-01**

34	Sub-Recipient Organization (Contractor)*	SHI International Corporation-319284		
35	Contract Number*	00263172-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$979,240.35		
38	Contract Date *	12/15/2020		
39	Period of Performance Start Date *	12/15/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	1250 Punchbowl St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	COVID 19 Dashboard		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$979,240.35	\$00	\$979,240.35
<b>Total</b>		\$00	\$979,240.35	\$00	\$979,240.35

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	001 - HTH - DOH COVID-19 Statewide Response Effort	12/15/2020	12/30/2020	\$979,240.35	Public Health Expenses	
<b>Total:</b>						\$979,240.35

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00262415-01**

34	Sub-Recipient Organization (Contractor)*	Community Empowerment Resources-323373		
35	Contract Number*	00262415-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$1,060,662.00		
38	Contract Date *	08/25/2020		
39	Period of Performance Start Date *	08/25/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1250 Punchbowl St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Case management services		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$1,060,662.00	\$00	\$1,060,622.00
<b>Total</b>		\$00	\$1,060,662.00	\$00	\$1,060,622.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	08/25/2020	12/31/2020	\$866,943.00	Public Health Expenses	
Line 2	001 - HTH - DOH COVID-19 Statewide Response Effort	08/25/2020	12/28/2020	\$193,679.00	Public Health Expenses	
<b>Total:</b>						\$1,060,622.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00262414-01**

34	Sub-Recipient Organization (Contractor)*	Banquet Solutions of Hawaii-355762		
35	Contract Number*	00262414-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$1,065,663.00		
38	Contract Date *	03/15/2020		
39	Period of Performance Start Date *	03/15/2020		
40	Period of Performance End Date *	12/28/2020		
41	Primary Place of Performance Address Line 1 *	1250 Punchbowl St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Housekeeping/meal svcs for quarantine		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$1,065,663.00	\$00	\$1,065,663.00
<b>Total</b>		\$00	\$1,065,663.00	\$00	\$1,065,663.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	03/15/2020	12/28/2020	\$869,133.50	Public Health Expenses	
Line 2	001 - HTH - DOH COVID-19 Statewide Response Effort	03/15/2020	12/28/2020	\$196,529.50	Public Health Expenses	
<b>Total:</b>						\$1,065,663.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00263189-01**

34	Sub-Recipient Organization (Contractor)*	Child and Family Service-228062		
35	Contract Number*	00263189-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$1,250,000.00		
38	Contract Date *	10/01/2020		
39	Period of Performance Start Date *	10/01/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	1250 Punchbowl St		
42	Primary Place of Performance Address Line 2	Rm 325		
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	COVID -19 Safe Practices Outreach		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$1,250,000.00	\$00	\$1,250,000.00
<b>Total</b>		\$00	\$1,250,000.00	\$00	\$1,250,000.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	001 - HTH - DOH COVID-19 Statewide Response Effort	10/10/2020	12/30/2020	\$1,250,000.00	Items Not Listed Above	COVID-19 communications/education/outreach
<b>Total:</b>						\$1,250,000.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00262417-01**

34	Sub-Recipient Organization (Contractor)*	North Shore Mental Health-264329		
35	Contract Number*	00262417-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$1,510,245.00		
38	Contract Date *	08/10/2020		
39	Period of Performance Start Date *	08/10/2020		
40	Period of Performance End Date *	12/28/2020		
41	Primary Place of Performance Address Line 1 *	1250 Punchbowl St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Case management services		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$1,510,245.00	\$00	\$1,510,245.00
<b>Total</b>		\$00	\$1,510,245.00	\$00	\$1,510,245.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	08/10/2020	12/28/2020	\$1,510,245.00	Public Health Expenses	
<b>Total:</b>						\$1,510,245.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00262109-01**

34	Sub-Recipient Organization (Contractor)*	Remedy Intelligent Staffing-37504		
35	Contract Number*	00262109-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$764,879.48		
38	Contract Date *	10/19/2020		
39	Period of Performance Start Date *	10/19/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	1250 Punchbowl St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Surge staffing for contact tracing		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$764,879.48	\$00	\$764,879.48
<b>Total</b>		\$00	\$764,879.48	\$00	\$764,879.48

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	10/19/2020	12/30/2020	\$764,879.48	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$764,879.48

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00261887-01**

34	Sub-Recipient Organization (Contractor)*	Hawaii Convention Center-66364		
35	Contract Number*	00261887-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$56,547.25
38	Contract Date *	08/01/2020		
39	Period of Performance Start Date *	08/01/2020		
40	Period of Performance End Date *	10/31/2020		
41	Primary Place of Performance Address Line 1 *	1801 Kalakaua Ave		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96815-1513		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Contact tracing center		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$56,547.25	\$00	\$56,547.25
<b>Total</b>		\$00	\$56,547.25	\$00	\$56,547.25

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	08/01/2020	10/31/2020	\$56,547.25	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$56,547.25

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00



**Sub Screen: Contract: 00262276-01**

34	Sub-Recipient Organization (Contractor)*	Danesh, Reza, MD-357333		
35	Contract Number*	00262276-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$124,998.79		
38	Contract Date *	09/01/2020		
39	Period of Performance Start Date *	09/01/2020		
40	Period of Performance End Date *	10/31/2020		
41	Primary Place of Performance Address Line 1 *	54 S High St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Wailuku		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96793-2102		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	2		
50	Contract Description *	Roselani Maui Outbreak Mobile Doctor		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$124,998.79	\$00	\$124,998.79
<b>Total</b>		\$00	\$124,998.79	\$00	\$124,998.79

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	09/01/2020	10/31/2020	\$124,998.79	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$124,998.79

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00262372-01**

34	Sub-Recipient Organization (Contractor)*	David's Fencing-25115		
35	Contract Number*	00262372-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$100,000.00		
38	Contract Date *	10/27/2020		
39	Period of Performance Start Date *	10/27/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	45-710 Keaahala Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Kaneohe		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96744-3528		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	2		
50	Contract Description *	JPAD Project HSH - for quarantine of patients		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$100,000.00	\$00	\$100,000.00
<b>Total</b>		\$00	\$100,000.00	\$00	\$100,000.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	10/27/2020	11/06/2020	\$100,000.00	Public Health Expenses	
<b>Total:</b>						\$100,000.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00262375-01**

34	Sub-Recipient Organization (Contractor)*	Dell Marketing, L.P.-74-261680		
35	Contract Number*	00262375-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$55,083.76
38	Contract Date *	10/27/2020		
39	Period of Performance Start Date *	10/27/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	1250 Punchbowl St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *			
50	Contract Description *	Laptops for contact tracing		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$55,083.76	\$00	\$55,083.76
<b>Total</b>		\$00	\$55,083.76	\$00	\$55,083.76

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	10/27/2020	10/27/2020	\$55,083.76	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$55,083.76

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00262416-01**

34	Sub-Recipient Organization (Contractor)*	Institute for Human Services-33027		
35	Contract Number*	00262416-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$1,040,232.00		
38	Contract Date *	10/01/2020		
39	Period of Performance Start Date *	10/01/2020		
40	Period of Performance End Date *	12/28/2020		
41	Primary Place of Performance Address Line 1 *	1250 Punchbowl St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Iso/quarantine		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$1,040,232.00	\$00	\$1,040,232.00
<b>Total</b>		\$00	\$1,040,232.00	\$00	\$1,040,232.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	10/01/2020	12/28/2020	\$1,040,232.00	Public Health Expenses	
<b>Total:</b>						\$1,040,232.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00262426-01**

34	Sub-Recipient Organization (Contractor)*	Dell Marketing, L.P.-74-261680		
35	Contract Number*	00262426-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$55,607.14		
38	Contract Date *	10/29/2020		
39	Period of Performance Start Date *	10/29/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	45-710 Keaahala Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Kaneohe		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96744-3528		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	2		
50	Contract Description *	Desktops		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$55,607.14	\$00	\$55,607.14
<b>Total</b>		\$00	\$55,607.14	\$00	\$55,607.14

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	10/29/2020	10/29/2020	\$55,607.14	Public Health Expenses	
<b>Total:</b>						\$55,607.14

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00262563-01**

34	Sub-Recipient Organization (Contractor)*	Orchestrare Healthcare-19713		
35	Contract Number*	00262563-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$82,000.00
38	Contract Date *	11/15/2020		
39	Period of Performance Start Date *	11/15/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1250 Punchbowl St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *			
50	Contract Description *	Rhapsody translator services		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$82,000.00	\$00	\$82,000.00
<b>Total</b>		\$00	\$82,000.00	\$00	\$82,000.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	11/15/2020	12/30/2020	\$82,000.00	Public Health Expenses	
<b>Total:</b>						\$82,000.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00262717-01**

34	Sub-Recipient Organization (Contractor)*	Habilitat Inc-19990		
35	Contract Number*	00262717-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$91,319.34		
38	Contract Date *	11/16/2020		
39	Period of Performance Start Date *	11/16/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	45-710 Keaahala Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Kaneohe		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96744-3528		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	2		
50	Contract Description *	Fencing for JPAD		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$91,319.34	\$00	\$91,319.34
<b>Total</b>		\$00	\$91,319.34	\$00	\$91,319.34

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	11/16/2020	11/16/2020	\$91,319.34	Public Health Expenses	
<b>Total:</b>						\$91,319.34

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00262771-01**

34	Sub-Recipient Organization (Contractor)*	Hawaii Convention Center-66364		
35	Contract Number*	00262771-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$395,351.83		
38	Contract Date *	08/11/2020		
39	Period of Performance Start Date *	08/11/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1250 Punchbowl St		
42	Primary Place of Performance Address Line 2	Rm 325		
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Ballroom rental for contact tracing/surveillance		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$395,351.83	\$00	\$395,351.83
<b>Total</b>		\$00	\$395,351.83	\$00	\$395,351.83

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	08/11/2020	12/30/2020	\$395,351.83	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$395,351.83

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00



**Sub Screen: Contract: 00263163-01**

34	Sub-Recipient Organization (Contractor)*	RSM US LLP-44358		
35	Contract Number*	00263163-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$60,000.00		
38	Contract Date *	11/01/2020		
39	Period of Performance Start Date *	11/01/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	1250 Punchbowl St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2416		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Iso/quarantine case management		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$60,000.00	\$00	\$60,000.00
<b>Total</b>		\$00	\$60,000.00	\$00	\$60,000.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	11/01/2020	12/15/2020	\$60,000.00	Public Health Expenses	
<b>Total:</b>						\$60,000.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00261080-04**

34	Sub-Recipient Organization (Contractor)*	UNIVERSITY OF HAWAII SYSTEMS-965088057		
35	Contract Number*	00261080-04		
36	Contract Type*	Definitive Contract		
37	Contract Amount*	\$750,000.00		
38	Contract Date *	07/01/2020		
39	Period of Performance Start Date *	07/01/2020		
40	Period of Performance End Date *	12/31/2021		
41	Primary Place of Performance Address Line 1 *	2425 Campus Rd		
42	Primary Place of Performance Address Line 2	Sinclair Library Rm 1		
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96822-2247		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Hawaii COC Response System of Care		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$750,000.00	\$00	\$0.00
<b>Total</b>		\$00	\$750,000.00	\$00	\$0.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B	52 C	52 D	52 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0		\$0.00	Select	
<b>Total:</b>					\$0.00

**Current Quarter Expenditures**

	53 A	53 B	53 C	53 D	53 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
<b>Total:</b>						\$00

**Sub Screen: Contract: 039003**

34	Sub-Recipient Organization (Contractor)*	UNIVERSITY OF HAWAII SYSTEMS-965088057		
35	Contract Number*	039003		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$244,504.20		
38	Contract Date *	10/08/2020		
39	Period of Performance Start Date *	10/08/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	2500 Campus Rd		
42	Primary Place of Performance Address Line 2	Hawaii Hall 102,		
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96822-2217		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	51,000 - Face mask; 25,500 - Thermometer; 25,500 - Wipes 10 ct; 25,500 - Hand sanitizer 2 oz 244		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - DEF - SCRF Personal Protection Equipment	\$00	\$244,504.20	\$00	\$244,504.20
<b>Total</b>		\$00	\$244,504.20	\$00	\$244,504.20

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - DEF - SCRF Personal Protection Equipment	11/18/2020	11/18/2020	\$244,504.20	Public Health Expenses	
<b>Total:</b>						\$244,504.20

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

## Sub Screen: Contract: 215155

34	Sub-Recipient Organization (Contractor)*		Von K. Kaneshiro dba Von Kenric Brushes-47397948	
35	Contract Number*		215155	
36	Contract Type*		Purchase Order	
37	Contract Amount*		\$50,663.85	
38	Contract Date *		05/28/2020	
39	Period of Performance Start Date *		05/28/2020	
40	Period of Performance End Date *		12/30/2020	
41	Primary Place of Performance Address Line 1 *		2002 East West Rd	
42	Primary Place of Performance Address Line 2		Room 110	
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *		Honolulu	
45	Primary Place of Performance State Code *		HI	
46	Primary Place of Performance Zip+4 *		96822-2320	Verified
47	Primary Place of Performance Country Name *		United States	
48	Primary Place of Performance Country Code *		USA	
49	Primary Place of Performance Congressional District *		1	
50	Contract Description *		960 - Alcohol hand gel w/ pump	

### Obligations

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - DEF - SCRF Personal Protection Equipment	\$00	\$50,663.85	\$00	\$50,663.85
<b>Total</b>		\$00	\$50,663.85	\$00	\$50,663.85

### Previous Expenditures (All previous quarters)

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - DEF - SCRF Personal Protection Equipment	07/13/2020	07/13/2020	\$50,663.85	Public Health Expenses	
<b>Total:</b>						\$50,663.85

### Current Quarter Expenditures

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 40129004-40129030**

34	Sub-Recipient Organization (Contractor)*	WORLD WIDE INTERNET TECHNOLOGIES-16341666		
35	Contract Number*	40129004-40129030		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$0.00
38	Contract Date *	10/19/2020		
39	Period of Performance Start Date *	10/19/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	To acquire and implement CISCO hardware and software technology that enables DHS to (1) increase server and network infrastructure capacity to respond to the increased demand for DHS support and benefit programs. (2) provide secure remote telework capabilities, and (3) stand up a central contact center/call center to respond to the increased number of calls from citizens impacted by the pandemic		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	003 - DHS - DHS IT Infrastructure Systems	\$00	\$0.00	\$00	\$0.00
<b>Total</b>		\$00	\$0.00	\$00	\$0.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	003 - DHS - DHS IT Infrastructure Systems	10/19/2020	12/30/2020	\$2,664,791.56	Improve Telework Capabilities of Public Employees	
Line 2	003 - DHS - DHS IT Infrastructure Systems	10/19/2020	12/30/2020	\$-2,664,791.56	Improve Telework Capabilities of Public Employees	
<b>Total:</b>						\$0.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 40128921**

34	Sub-Recipient Organization (Contractor)*	SIRIUS COMPUTER SOLUTIONS, INC.-004161712		
35	Contract Number*	40128921		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$94,321.70		
38	Contract Date *	05/19/2020		
39	Period of Performance Start Date *	05/19/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	To acquire and implement secure remote access technologies including Virtual Private Network (VPN), Virtual Desktop Infrastructure (VDI) with WAN acceleration, Windows Server and Remote Desktop Connection Service.		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	003 - DHS - DHS IT Infrastructure Systems	\$00	\$94,321.70	\$00	\$94,321.70
<b>Total</b>		\$00	\$94,321.70	\$00	\$94,321.70

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	003 - DHS - DHS IT Infrastructure Systems	10/01/2020	12/30/2020	\$94,321.70	Improve Telework Capabilities of Public Employees	
<b>Total:</b>						\$94,321.70

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 40128920-40128998-40129003-40129027**

34	Sub-Recipient Organization (Contractor)*	SHI International Corporation-319284		
35	Contract Number*	40128920-40128998-40129003-40129027		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$494,118.90
38	Contract Date *	04/01/2020		
39	Period of Performance Start Date *	04/01/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	To acquire and implement secure remote access technologies including Virtual Private Network (VPN), Virtual Desktop Infrastructure (VDI) with WAN acceleration, Windows Server and Remote Desktop Connection Service. For '40128920' only.		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	003 - DHS - DHS IT Infrastructure Systems	\$00	\$494,118.90	\$00	\$494,118.90
<b>Total</b>		\$00	\$494,118.90	\$00	\$494,118.90

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	003 - DHS - DHS IT Infrastructure Systems	10/01/2020	12/30/2020	\$535,554.84	Improve Telework Capabilities of Public Employees	
Line 2	003 - DHS - DHS IT Infrastructure Systems	01/01/2021	03/31/2021	\$-41,435.94	Improve Telework Capabilities of Public Employees	
<b>Total:</b>						\$494,118.90

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 40128922**

34	Sub-Recipient Organization (Contractor)*	Century Computers Inc. dba Pacxa-99-035642		
35	Contract Number*	40128922		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$149,937.12
38	Contract Date *	05/22/2020		
39	Period of Performance Start Date *	05/22/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	To acquire and implement secure remote access technologies including Virtual Private Network (VPN), Virtual Desktop Infrastructure (VDI) with WAN acceleration, Windows Server and Remote Desktop Connection Service.		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	003 - DHS - DHS IT Infrastructure Systems	\$00	\$149,937.12	\$00	\$149,937.12
<b>Total</b>		\$00	\$149,937.12	\$00	\$149,937.12

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	003 - DHS - DHS IT Infrastructure Systems	10/01/2020	12/30/2020	\$149,937.12	Improve Telework Capabilities of Public Employees	
<b>Total:</b>						\$149,937.12

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00



**Sub Screen: Contract: 40128996-40128990**

34	Sub-Recipient Organization (Contractor)*	CDW GOVERNMENT LLC-026157235		
35	Contract Number*	40128996-40128990		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$140,860.70		
38	Contract Date *	10/13/2020		
39	Period of Performance Start Date *	10/13/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	To acquire and implement secure remote access technologies including Virtual Private Network (VPN), Virtual Desktop Infrastructure (VDI) with WAN acceleration, Windows Server and Remote Desktop Connection Service.		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	003 - DHS - DHS IT Infrastructure Systems	\$00	\$140,860.70	\$00	\$140,860.70
<b>Total</b>		\$00	\$140,860.70	\$00	\$140,860.70

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	003 - DHS - DHS IT Infrastructure Systems	10/13/2020	12/30/2020	\$142,475.98	Improve Telework Capabilities of Public Employees	
Line 2	003 - DHS - DHS IT Infrastructure Systems	10/13/2020	12/30/2020	\$-1,615.28	Improve Telework Capabilities of Public Employees	
<b>Total:</b>						\$140,860.70

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 40128995**

34	Sub-Recipient Organization (Contractor)*	Dell Marketing, L.P.-74-261680		
35	Contract Number*	40128995		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$736,220.65		
38	Contract Date *	10/09/2020		
39	Period of Performance Start Date *	10/09/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	To acquire "work from home kits" including computer laptop and peripheral equipment to allow employees to telework.		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	003 - DHS - DHS IT Infrastructure Systems	\$00	\$736,220.65	\$00	\$736,220.65
<b>Total</b>		\$00	\$736,220.65	\$00	\$736,220.65

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	003 - DHS - DHS IT Infrastructure Systems	10/09/2020	12/30/2020	\$736,220.65	Improve Telework Capabilities of Public Employees	
<b>Total:</b>						\$736,220.65

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 40129029**

34	Sub-Recipient Organization (Contractor)*	eWorld Enterprise Solutions, Inc-162168186		
35	Contract Number*	40129029		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$850,000.00		
38	Contract Date *	11/17/2020		
39	Period of Performance Start Date *	11/17/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	To provide a modern cloud-based solution with case management capabilities that will assist programs and staff offices to electronically receive, route and approve documents for online food and financial benefit applications during the Pandemic.		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	003 - DHS - DHS IT Infrastructure Systems	\$00	\$850,000.00	\$00	\$850,000.00
<b>Total</b>		\$00	\$850,000.00	\$00	\$850,000.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	003 - DHS - DHS IT Infrastructure Systems	11/17/2020	12/30/2020	\$850,000.00	Improve Telework Capabilities of Public Employees	
<b>Total:</b>						\$850,000.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 40129000-40129007**

34	Sub-Recipient Organization (Contractor)*	CHERRYROAD TECHNOLOGIES INC.-021874650		
35	Contract Number*	40129000-40129007		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$139,751.36		
38	Contract Date *	10/14/2020		
39	Period of Performance Start Date *	10/14/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	To increase the capacity, reliability, and reach of DHS services to citizens by implementing datacenter colo-racks, scalable server, and information and communication technology infrastructure systems to support all online benefits application systems for all DHS safety net programs. To deploy Secure Wifi APs at all DHS facilities and software registration system to capture employee and visitor information for use in contact tracing if/when positive COVID test results are reported For '40128995'		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	003 - DHS - DHS IT Infrastructure Systems	\$00	\$139,751.36	\$00	\$139,751.36
<b>Total</b>		\$00	\$139,751.36	\$00	\$139,751.36

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	003 - DHS - DHS IT Infrastructure Systems	10/14/2020	12/30/2020	\$216,140.74	Improve Telework Capabilities of Public Employees	
Line 2	003 - DHS - DHS IT Infrastructure Systems	10/14/2020	03/31/2021	\$-76,389.38	Improve Telework Capabilities of Public Employees	
<b>Total:</b>						\$139,751.36

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 40128999**

34	Sub-Recipient Organization (Contractor)*	BOSS COMMUNICATION TECHNOLOGIES INC.-081919797		
35	Contract Number*	40128999		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$34,887.00		
38	Contract Date *	10/13/2020		
39	Period of Performance Start Date *	10/13/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	To increase the capacity, reliability, and reach of DHS services to citizens by implementing datacenter colo-racks, scalable server, and information and communication technology infrastructure systems to support all online benefits application systems for all DHS safety net programs. To deploy Secure Wifi APs at all DHS facilities and software registration system to capture employee and visitor information for use in contact tracing if/when positive COVID test results are reported		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	003 - DHS - DHS IT Infrastructure Systems	\$00	\$34,887.00	\$00	\$34,887.00
<b>Total</b>		\$00	\$34,887.00	\$00	\$34,887.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	003 - DHS - DHS IT Infrastructure Systems	10/13/2020	12/30/2020	\$34,887.00	Improve Telework Capabilities of Public Employees	
<b>Total:</b>						\$34,887.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 40129028**

34	Sub-Recipient Organization (Contractor)*	Hawaiian Telcom-006926943		
35	Contract Number*	40129028		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$86,840.42
38	Contract Date *	11/17/2020		
39	Period of Performance Start Date *	11/17/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	To increase the capacity, reliability, and reach of DHS services to citizens by implementing datacenter colo-racks, scalable server, and information and communication technology infrastructure systems to support all online benefits application systems for all DHS safety net programs. To deploy Secure Wifi APs at all DHS facilities and software registration system to capture employee and visitor information for use in contact tracing if/when positive COVID test results are reported		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	003 - DHS - DHS IT Infrastructure Systems	\$00	\$86,840.42	\$00	\$86,840.42
<b>Total</b>		\$00	\$86,840.42	\$00	\$86,840.42

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	003 - DHS - DHS IT Infrastructure Systems	11/17/2020	12/30/2020	\$86,840.42	Improve Telework Capabilities of Public Employees	
<b>Total:</b>						\$86,840.42

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 40129015**

34	Sub-Recipient Organization (Contractor)*	Century Computers Inc. dba Pacxa-99-035642		
35	Contract Number*	40129015		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$75,000.00
38	Contract Date *	10/01/2020		
39	Period of Performance Start Date *	10/01/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	To implement Emergency management and COVID safe workplace application modules in ServiceNOW that will assist in practicing social distancing through safe workplace/safe reopening facilities tracking, health and wellness screening applications, enhanced internal contact tracing application for employees, PPE inventory management, emergency communications and messaging technologies.		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	003 - DHS - DHS IT Infrastructure Systems	\$00	\$75,000.00	\$00	\$75,000.00
<b>Total</b>		\$00	\$75,000.00	\$00	\$75,000.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	003 - DHS - DHS IT Infrastructure Systems	10/01/2020	12/30/2020	\$75,000.00	Improve Telework Capabilities of Public Employees	
<b>Total:</b>						\$75,000.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 40129013**

34	Sub-Recipient Organization (Contractor)*	Carahsoft Technology Corp-88365767		
35	Contract Number*	40129013		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$45,055.43
38	Contract Date *	10/22/2020		
39	Period of Performance Start Date *	10/22/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	To implement Emergency management and COVID safe workplace application modules in ServiceNOW that will assist in practicing social distancing through safe workplace/safe reopening facilities tracking, health and wellness screening applications, enhanced internal contact tracing application for employees, PPE inventory management, emergency communications and messaging technologies.		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	003 - DHS - DHS IT Infrastructure Systems	\$00	\$45,055.43	\$00	\$45,055.43
<b>Total</b>		\$00	\$45,055.43	\$00	\$45,055.43

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	003 - DHS - DHS IT Infrastructure Systems	10/22/2020	12/31/2020	\$45,055.43	Improve Telework Capabilities of Public Employees	
<b>Total:</b>						\$45,055.43

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00



**Sub Screen: Contract: 40129001**

34	Sub-Recipient Organization (Contractor)*	INSIGHT PUBLIC SECTOR, INC.-555569529		
35	Contract Number*	40129001		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$138,392.74		
38	Contract Date *	10/22/2020		
39	Period of Performance Start Date *	10/22/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	To support telework by implementing a cloud-based Procure-to-Pay Automation solution that will replace the manual, paper-based, in-person processes used to electronically create, receive, route, approve, and e-sign T205s, purchase orders, invoices and supporting documents for payment to DAGS, automated reconciliation of DAGS payments, and provide financial reporting.		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	003 - DHS - DHS IT Infrastructure Systems	\$00	\$138,392.74	\$00	\$138,392.74
<b>Total</b>		\$00	\$138,392.74	\$00	\$138,392.74

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	003 - DHS - DHS IT Infrastructure Systems	10/22/2020	12/30/2020	\$138,392.74	Improve Telework Capabilities of Public Employees	
<b>Total:</b>						\$138,392.74

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 40129012**

34	Sub-Recipient Organization (Contractor)*	THOMPSON REUTERS-41-142697		
35	Contract Number*	40129012		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$138,607.20		
38	Contract Date *	10/22/2020		
39	Period of Performance Start Date *	10/22/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	To implement cybersecurity related to security monitoring, secure identity management, and secure system access for the increased telework employees, and to provide fraud prevention capabilities to minimize the high number of fraudulent application due to increased citizen applications for DHS benefit programs caused by the pandemic and high unemployment.		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	003 - DHS - DHS IT Infrastructure Systems	\$00	\$138,607.20	\$00	\$138,607.20
<b>Total</b>		\$00	\$138,607.20	\$00	\$138,607.20

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	003 - DHS - DHS IT Infrastructure Systems	10/22/2020	12/30/2020	\$138,607.20	Improve Telework Capabilities of Public Employees	
<b>Total:</b>						\$138,607.20

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 40129010-40129002**

34	Sub-Recipient Organization (Contractor)*	CDW GOVERNMENT LLC-026157235		
35	Contract Number*	40129010-40129002		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$215,968.75		
38	Contract Date *	10/15/2020		
39	Period of Performance Start Date *	10/15/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	To implement cybersecurity related to security monitoring, secure identity management, and secure system access for the increased telework employees, and to provide fraud prevention capabilities to minimize the high number of fraudulent application due to increased citizen applications for DHS benefit programs caused by the pandemic and high unemployment. For '40129010' only.		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	003 - DHS - DHS IT Infrastructure Systems	\$00	\$215,968.75	\$00	\$215,968.75
<b>Total</b>		\$00	\$215,968.75	\$00	\$215,968.75

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	003 - DHS - DHS IT Infrastructure Systems	10/15/2020	12/31/2020	\$247,879.59	Improve Telework Capabilities of Public Employees	
Line 2	003 - DHS - DHS IT Infrastructure Systems	10/15/2020	12/31/2020	\$-31,910.84	Improve Telework Capabilities of Public Employees	
<b>Total:</b>						\$215,968.75

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 40128948**

34	Sub-Recipient Organization (Contractor)*	Century Computers Inc. dba Pacxa-99-035642		
35	Contract Number*	40128948		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$88,251.04
38	Contract Date *	06/26/2020		
39	Period of Performance Start Date *	06/26/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	To implement cybersecurity related to security monitoring, secure identity management, and secure system access for the increased telework employees, and to provide fraud prevention capabilities to minimize the high number of fraudulent application due to increased citizen applications for DHS benefit programs caused by the pandemic and high unemployment.		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	003 - DHS - DHS IT Infrastructure Systems	\$00	\$88,251.04	\$00	\$88,251.04
<b>Total</b>		\$00	\$88,251.04	\$00	\$88,251.04

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	003 - DHS - DHS IT Infrastructure Systems	10/01/2020	12/31/2020	\$88,251.04	Housing Support	
<b>Total:</b>						\$88,251.04

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 40128997**

34	Sub-Recipient Organization (Contractor)*	Dell Marketing, L.P.-74-261680		
35	Contract Number*	40128997		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$34,937.95
38	Contract Date *	10/13/2020		
39	Period of Performance Start Date *	10/13/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	To implement cybersecurity related to security monitoring, secure identity management, and secure system access for the increased telework employees, and to provide fraud prevention capabilities to minimize the high number of fraudulent application due to increased citizen applications for DHS benefit programs caused by the pandemic and high unemployment.		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	003 - DHS - DHS IT Infrastructure Systems	\$00	\$34,937.95	\$00	\$34,937.95
<b>Total</b>		\$00	\$34,937.95	\$00	\$34,937.95

**Previous Expenditures (All previous quarters)**

	52 A	52 B	52 C	52 D	52 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	003 - DHS - DHS IT Infrastructure Systems	10/13/2020	12/31/2020	\$34,937.95	Improve Telework Capabilities of Public Employees	
<b>Total:</b>						\$34,937.95

**Current Quarter Expenditures**

	53 A	53 B	53 C	53 D	53 E		
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 40129014**

34	Sub-Recipient Organization (Contractor)*	MAINLINE INFORMATION SYSTEMS, INC.-626916779		
35	Contract Number*	40129014		
36	Contract Type*	Definitive Contract		
37	Contract Amount*			\$316,272.13
38	Contract Date *	10/22/2020		
39	Period of Performance Start Date *	10/22/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Existing contract 5/1/2017 (P-EBT updated on 4/30/20 & 9/16/20)		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	003 - DHS - DHS IT Infrastructure Systems	\$00	\$316,272.13	\$00	\$316,272.13
<b>Total</b>		\$00	\$316,272.13	\$00	\$316,272.13

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	003 - DHS - DHS IT Infrastructure Systems	10/22/2020	12/31/2020	\$316,272.13	Improve Telework Capabilities of Public Employees	
<b>Total:</b>						\$316,272.13

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: DHS-13-FMO-705 - A**

34	Sub-Recipient Organization (Contractor)*	CARDINAL PRESORT SERVICES LTD.-787090232		
35	Contract Number*	DHS-13-FMO-705 - A		
36	Contract Type*	Definitive Contract		
37	Contract Amount*			\$0.00
38	Contract Date *	05/01/2020		
39	Period of Performance Start Date *	05/01/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Existing contract 7/1/2012 (last revision 7/1/20)		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	003 - DHS - DHS IT Infrastructure Systems	\$00	\$0.00	\$00	\$0.00
<b>Total</b>		\$00	\$0.00	\$00	\$0.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	003 - DHS - DHS IT Infrastructure Systems	10/01/2020	12/31/2020	\$54,408.97	Improve Telework Capabilities of Public Employees	
Line 2	003 - DHS - DHS IT Infrastructure Systems	12/01/2020	12/31/2020	\$-54,408.97	Improve Telework Capabilities of Public Employees	
<b>Total:</b>						\$0.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

### Sub Screen: Contract: DHS-21-CCPO-0055

34	Sub-Recipient Organization (Contractor)*	Hawai'i Community Foundation-609632534		
35	Contract Number*	DHS-21-CCPO-0055		
36	Contract Type*	Definitive Contract		
37	Contract Amount*	\$11,692,896.90		
38	Contract Date *	09/29/2020		
39	Period of Performance Start Date *	09/29/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Support child care facilities and homes during the COVID-19 pandemic to ensure the continued availability and capacity for child care services statewide.		

### Obligations

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - DHS - SCRF Childcare Facility Subsidy	\$00	\$11,692,896.90	\$00	\$11,692,896.90
<b>Total</b>		\$00	\$11,692,896.90	\$00	\$11,692,896.90

### Previous Expenditures (All previous quarters)

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	002 - DHS - SCRF Childcare Facility Subsidy	09/29/2020	12/12/2020	\$11,692,896.90	Economic Support (Other than Small Business, Housing, and Food Assistance)	
<b>Total:</b>						\$11,692,896.90

### Current Quarter Expenditures

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00



**Sub Screen: Contract: PO F04787 A**

34	Sub-Recipient Organization (Contractor)*	ZR SYSTEMS GROUP LLC-809511590		
35	Contract Number*	PO F04787 A		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$75,587.17		
38	Contract Date *	10/28/2020		
39	Period of Performance Start Date *	10/28/2020		
40	Period of Performance End Date *	12/30/2020		
41	Primary Place of Performance Address Line 1 *	417 S King St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2943		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Laptops and software for probation officers. Place of performance: statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - JUD - Hawaii State Judiciary COVID-19 Financial Assistance	\$00	\$75,587.17	\$00	\$75,587.17
<b>Total</b>		\$00	\$75,587.17	\$00	\$75,587.17

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - JUD - Hawaii State Judiciary COVID-19 Financial Assistance	10/28/2020	12/30/2020	\$75,587.17	Improve Telework Capabilities of Public Employees	
<b>Total:</b>						\$75,587.17

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: PQ08790**

34	Sub-Recipient Organization (Contractor)*	HAWAII SHEETMETAL AND MECHANICAL, INC.-790648849		
35	Contract Number*	PQ08790		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$1,866,753.18		
38	Contract Date *	10/21/2020		
39	Period of Performance Start Date *	10/21/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Air purifiers to clean air of COVID-19. Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - EDU - DOE Air Purifiers	\$00	\$1,866,753.18	\$00	\$1,866,753.18
<b>Total</b>		\$00	\$1,866,753.18	\$00	\$1,866,753.18

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	002 - EDU - DOE Air Purifiers	12/22/2020	12/22/2020	\$1,866,753.18	Items Not Listed Above	School Safety Measure
<b>Total:</b>						\$1,866,753.18

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

### Sub Screen: Contract: PQ09015

34	Sub-Recipient Organization (Contractor)*	HAWAII SHEETMETAL AND MECHANICAL, INC.-790648849		
35	Contract Number*	PQ09015		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$133,246.82		
38	Contract Date *	10/30/2020		
39	Period of Performance Start Date *	10/30/2020		
40	Period of Performance End Date *	01/31/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Air purifiers to clean air of COVID-19. Place of Performance: Statewide		

### Obligations

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - EDU - DOE Air Purifiers	\$00	\$133,246.82	\$00	\$133,246.82
<b>Total</b>		\$00	\$133,246.82	\$00	\$133,246.82

### Previous Expenditures (All previous quarters)

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	002 - EDU - DOE Air Purifiers	01/26/2021	01/26/2021	\$133,246.82	Items Not Listed Above	School Safety Measure
<b>Total:</b>						\$133,246.82

### Current Quarter Expenditures

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: Z10227119 a**

34	Sub-Recipient Organization (Contractor)*	ZR SYSTEMS GROUP LLC-809511590		
35	Contract Number*	Z10227119 a		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$86,581.64
38	Contract Date *	06/25/2020		
39	Period of Performance Start Date *	06/25/2020		
40	Period of Performance End Date *	08/07/2020		
41	Primary Place of Performance Address Line 1 *	91-1001 Farrington Hwy		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Kapolei		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96707-4507		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	PC Laptops and docking stations		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - UH - UH COVID-19 Mitigation Program	\$00	\$86,581.64	\$00	\$86,581.64
<b>Total</b>		\$00	\$86,581.64	\$00	\$86,581.64

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - UH - UH COVID-19 Mitigation Program	06/25/2020	08/07/2020	\$86,581.64	Facilitating Distance Learning	
<b>Total:</b>						\$86,581.64

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: Z10231503**

34	Sub-Recipient Organization (Contractor)*	ZR SYSTEMS GROUP LLC-809511590		
35	Contract Number*	Z10231503		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$102,903.31		
38	Contract Date *	11/10/2020		
39	Period of Performance Start Date *	11/10/2020		
40	Period of Performance End Date *	01/31/2021		
41	Primary Place of Performance Address Line 1 *	91-1001 Farrington Hwy		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Kapolei		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96707-4507		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Computer Servers		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - UH - UH COVID-19 Mitigation Program	\$00	\$102,903.31	\$00	\$102,903.31
<b>Total</b>		\$00	\$102,903.31	\$00	\$102,903.31

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - UH - UH COVID-19 Mitigation Program	11/10/2020	01/08/2021	\$102,903.31	Facilitating Distance Learning	
<b>Total:</b>						\$102,903.31

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: Z10231324**

34	Sub-Recipient Organization (Contractor)*	CDW GOVERNMENT LLC-026157235		
35	Contract Number*	Z10231324		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$132,717.23		
38	Contract Date *	11/16/2020		
39	Period of Performance Start Date *	11/16/2020		
40	Period of Performance End Date *	02/08/2021		
41	Primary Place of Performance Address Line 1 *	91-1001 Farrington Hwy		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Kapolei		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96707-4507		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Apple Laptops and accessories		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - UH - UH COVID-19 Mitigation Program	\$00	\$132,717.23	\$00	\$132,717.23
<b>Total</b>		\$00	\$132,717.23	\$00	\$132,717.23

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - UH - UH COVID-19 Mitigation Program	11/16/2020	02/08/2021	\$132,717.23	Facilitating Distance Learning	
<b>Total:</b>						\$132,717.23

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 40129004**

34	Sub-Recipient Organization (Contractor)*	WORLD WIDE TECHNOLOGY, LLC-614948396		
35	Contract Number*	40129004		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$2,566,875.03		
38	Contract Date *	10/19/2020		
39	Period of Performance Start Date *	10/19/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	To acquire and implement CISCO hardware and software technology that enables DHS to (1) increase server and network infrastructure capacity to respond to the increased demand for DHS support and benefit programs. (2) provide secure remote telework capabilities, and (3) stand up a central contact center/call center to respond to the increased number of calls from citizens impacted by the pandemic.		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	003 - DHS - DHS IT Infrastructure Systems	\$00	\$2,566,875.03	\$00	\$2,566,875.03
<b>Total</b>		\$00	\$2,566,875.03	\$00	\$2,566,875.03

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	003 - DHS - DHS IT Infrastructure Systems	10/19/2020	03/31/2021	\$2,566,875.03	Improve Telework Capabilities of Public Employees	
<b>Total:</b>						\$2,566,875.03

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 314053**

34	Sub-Recipient Organization (Contractor)*	PACIFIC TECHNOLOGY SOLUTIONS, LLC-036412110		
35	Contract Number*	314053		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$50,050.16
38	Contract Date *	08/17/2020		
39	Period of Performance Start Date *	08/17/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	IT equipment		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - DHS - DHS IT Infrastructure Systems II	\$00	\$50,050.16	\$00	\$50,050.16
<b>Total</b>		\$00	\$50,050.16	\$00	\$50,050.16

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - DHS - DHS IT Infrastructure Systems II	11/20/2020	11/27/2020	\$50,050.16	Improve Telework Capabilities of Public Employees	
<b>Total:</b>						\$50,050.16

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00



**Sub Screen: Contract: 40129030**

34	Sub-Recipient Organization (Contractor)*	WORLD WIDE TECHNOLOGY, LLC-614948396		
35	Contract Number*	40129030		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$96,856.05
38	Contract Date *	10/19/2020		
39	Period of Performance Start Date *	10/19/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Increase number of calls from citizens impacted by pandemic		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - DHS - DHS IT Infrastructure Systems II	\$00	\$96,856.05	\$00	\$96,856.05
<b>Total</b>		\$00	\$96,856.05	\$00	\$96,856.05

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - DHS - DHS IT Infrastructure Systems II	01/01/2021	03/31/2021	\$96,856.05	Improve Telework Capabilities of Public Employees	
<b>Total:</b>						\$96,856.05

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 40128922 - A**

34	Sub-Recipient Organization (Contractor)*	PACIFIC TECHNOLOGY SOLUTIONS, LLC-036412110		
35	Contract Number*	40128922 - A		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$99,886.96
38	Contract Date *	05/01/2020		
39	Period of Performance Start Date *	05/01/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	IT Equipment		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	003 - DHS - DHS IT Infrastructure Systems	\$00	\$99,886.96	\$00	\$99,886.96
<b>Total</b>		\$00	\$99,886.96	\$00	\$99,886.96

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	003 - DHS - DHS IT Infrastructure Systems	08/17/2020	03/31/2021	\$99,886.96	Improve Telework Capabilities of Public Employees	
<b>Total:</b>						\$99,886.96

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 40129007**

34	Sub-Recipient Organization (Contractor)*	CHERRYROAD TECHNOLOGIES INC.-021874650		
35	Contract Number*	40129007		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$76,389.38
38	Contract Date *	10/14/2020		
39	Period of Performance Start Date *	10/14/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	To increase the capacity, reliability, and reach of DHS services to citizens by implementing datacenter colo-racks, scalable server, and information and communication technology infrastructure systems to support all online benefits application systems for all DHS safety net programs. To deploy Secure Wifi APs at all DHS facilities and software registration system to capture employee and visitor information for use in contact tracing if/when positive COVID test results are reported.		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	003 - DHS - DHS IT Infrastructure Systems	\$00	\$76,389.38	\$00	\$76,389.38
<b>Total</b>		\$00	\$76,389.38	\$00	\$76,389.38

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	003 - DHS - DHS IT Infrastructure Systems	10/14/2020	03/31/2021	\$76,389.38	Improve Telework Capabilities of Public Employees	
<b>Total:</b>						\$76,389.38

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

## Sub Screen: Contract: CON 17031

34	Sub-Recipient Organization (Contractor)*	Visitor Aloha Society of Hawaii-345241		
35	Contract Number*	CON 17031		
36	Contract Type*	Definitive Contract		
37	Contract Amount*			\$70,000.00
38	Contract Date *	07/03/2020		
39	Period of Performance Start Date *	07/03/2020		
40	Period of Performance End Date *	06/30/2021		
41	Primary Place of Performance Address Line 1 *	2250 Kalakaua Ave		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96815-2542		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	To assist COVID-19-impact visitors to Hawaii. Place of Performance: Statewide		

### Obligations

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	008 - BED - COVID-19 Flight Assistance Program	\$00	\$70,000.00	\$00	\$70,000.00
<b>Total</b>		\$00	\$70,000.00	\$00	\$70,000.00

### Previous Expenditures (All previous quarters)

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	008 - BED - COVID-19 Flight Assistance Program	07/03/2020	03/31/2021	\$96,462.86	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Line 2	008 - BED - COVID-19 Flight Assistance Program	07/03/2020	06/30/2021	\$-26,462.86	Economic Support (Other than Small Business, Housing, and Food Assistance)	
<b>Total:</b>						\$70,000.00

### Current Quarter Expenditures

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 112478**

34	Sub-Recipient Organization (Contractor)*	IQ 360-333503		
35	Contract Number*	112478		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$77,310.18		
38	Contract Date *	11/01/2020		
39	Period of Performance Start Date *	11/01/2020		
40	Period of Performance End Date *	06/30/2021		
41	Primary Place of Performance Address Line 1 *	1000 Bishop St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-4202		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	To develop communications for reopening of state economy in face of ongoing public health and safety concerns.		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	No Project Assigned	\$-689.82	\$77,310.18	\$0.00	\$77,310.18
<b>Total</b>		\$-689.82	\$77,310.18	\$0.00	\$77,310.18

**Previous Expenditures (All previous quarters)**

	52 A	52 B	52 C	52 D	52 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	No Project Assigned	11/01/2020	03/31/2021	\$77,310.18	Items Not Listed Above	Communication
<b>Total:</b>						\$77,310.18

**Current Quarter Expenditures**

	53 A	53 B	53 C	53 D	53 E		
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$0.00			
<b>Total:</b>							\$0.00

**Sub Screen: Contract: 21004247**

34	Sub-Recipient Organization (Contractor)*	HAWAII CORRECTIONAL INDUSTRIES-965699994		
35	Contract Number*	21004247		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$105,833.24		
38	Contract Date *	02/11/2021		
39	Period of Performance Start Date *	02/11/2021		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Public Health Expenses		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$105,833.24	\$00	\$105,833.24
<b>Total</b>		\$00	\$105,833.24	\$00	\$105,833.24

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	02/11/2021	03/31/2021	\$105,833.24	Public Health Expenses	
<b>Total:</b>						\$105,833.24

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: KV2164**

34	Sub-Recipient Organization (Contractor)*	Nihon Kodon America-95-343150		
35	Contract Number*	KV2164		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$138,692.40		
38	Contract Date *	07/31/2020		
39	Period of Performance Start Date *	07/31/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	3675 Kilauea Ave		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-2333		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Ventilators Place of Performance: Kauai Veterans Memorial Hospital		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HHSC - Hawaii Health Systems Corporation COVID-19 Response	\$00	\$138,692.40	\$00	\$138,692.40
<b>Total</b>		\$00	\$138,692.40	\$00	\$138,692.40

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - HHSC - Hawaii Health Systems Corporation COVID-19 Response	07/31/2020	03/31/2021	\$138,692.40	Medical Expenses	
<b>Total:</b>						\$138,692.40

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: KV2606/SM869**

34	Sub-Recipient Organization (Contractor)*	Xenex Disinfectant Services, Inc.-27-151230		
35	Contract Number*	KV2606/SM869		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$328,192.74		
38	Contract Date *	09/10/2020		
39	Period of Performance Start Date *	09/10/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	3675 Kilauea Ave		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-2333		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Disinfecting Robots Place of Performance: Kauai Veterans Memorial Hospital		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HHSC - Hawaii Health Systems Corporation COVID-19 Response	\$00	\$328,192.74	\$00	\$328,192.74
<b>Total</b>		\$00	\$328,192.74	\$00	\$328,192.74

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - HHSC - Hawaii Health Systems Corporation COVID-19 Response	10/01/2020	12/31/2020	\$328,192.74	Medical Expenses	
<b>Total:</b>						\$328,192.74

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00



**Sub Screen: Contract: 00JM2578**

34	Sub-Recipient Organization (Contractor)*	ALTRES MEDICAL-99-033844		
35	Contract Number*	00JM2578		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$350,410.25		
38	Contract Date *	11/01/2020		
39	Period of Performance Start Date *	11/01/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Inmate care Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$350,410.25	\$00	\$350,410.25
<b>Total</b>		\$00	\$350,410.25	\$00	\$350,410.25

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	11/01/2020	03/31/2021	\$350,410.25	Medical Expenses	
<b>Total:</b>						\$350,410.25

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21003506**

34	Sub-Recipient Organization (Contractor)*	HAWAII CORRECTIONAL INDUSTRIES-965699994		
35	Contract Number*	21003506		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$67,550.34
38	Contract Date *	11/16/2020		
39	Period of Performance Start Date *	11/16/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Inmate care Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$67,550.34	\$00	\$67,550.34
<b>Total</b>		\$00	\$67,550.34	\$00	\$67,550.34

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	11/16/2020	03/31/2021	\$67,550.34	Public Health Expenses	
<b>Total:</b>						\$67,550.34

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21003513**

34	Sub-Recipient Organization (Contractor)*	HAWAII CORRECTIONAL INDUSTRIES-965699994		
35	Contract Number*	21003513		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$77,989.85
38	Contract Date *	11/01/2020		
39	Period of Performance Start Date *	11/01/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *			
50	Contract Description *	Inmate care Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$77,989.85	\$00	\$77,989.85
<b>Total</b>		\$00	\$77,989.85	\$00	\$77,989.85

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	11/01/2020	03/31/2021	\$77,989.85	Public Health Expenses	
<b>Total:</b>						\$77,989.85

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21006433**

34	Sub-Recipient Organization (Contractor)*	HAWAII CORRECTIONAL INDUSTRIES-965699994		
35	Contract Number*	21006433		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$103,479.11		
38	Contract Date *	11/01/2020		
39	Period of Performance Start Date *	11/01/2020		
40	Period of Performance End Date *	05/31/2021		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Inmate care Place of performance: statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$103,479.11	\$00	\$103,479.11
<b>Total</b>		\$00	\$103,479.11	\$00	\$103,479.11

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	11/01/2020	03/31/2021	\$103,479.11	Public Health Expenses	
<b>Total:</b>						\$103,479.11

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21003577**

34	Sub-Recipient Organization (Contractor)*	Be Well Hawaii Ohana, LLC-85 060 66		
35	Contract Number*	21003577		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$67,015.68		
38	Contract Date *	11/30/2020		
39	Period of Performance Start Date *	11/30/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Personal Protective Equipment Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$67,015.68	\$00	\$67,015.68
<b>Total</b>		\$00	\$67,015.68	\$00	\$67,015.68

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	11/30/2020	03/31/2021	\$67,015.68	Personal Protective Equipment	
<b>Total:</b>						\$67,015.68

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 00JM2579**

34	Sub-Recipient Organization (Contractor)*	HAWAII NURSING INC.-46-148358		
35	Contract Number*	00JM2579		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$61,366.66
38	Contract Date *	11/01/2020		
39	Period of Performance Start Date *	11/01/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	919 Ala Moana Blvd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96814-4920		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Inmate care Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	\$00	\$61,366.66	\$00	\$61,366.66
<b>Total</b>		\$00	\$61,366.66	\$00	\$61,366.66

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - PSD - Public Safety Response to COVID- 19 01	11/01/2020	03/31/2021	\$61,366.66	Public Health Expenses	
<b>Total:</b>						\$61,366.66

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 69132**

34	Sub-Recipient Organization (Contractor)*	IQ 360-333503		
35	Contract Number*	69132		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$395,000.00		
38	Contract Date *	10/02/2020		
39	Period of Performance Start Date *	10/02/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	3949 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4413		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	PR CONSULTING - COVID PROFESSIONAL SERVICES Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - DEF - COVID19 Response	\$00	\$395,000.00	\$00	\$395,000.00
<b>Total</b>		\$00	\$395,000.00	\$00	\$395,000.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	002 - DEF - COVID19 Response	10/02/2020	12/31/2020	\$395,000.00	Items Not Listed Above	PR Consultation
<b>Total:</b>						\$395,000.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21350004**

34	Sub-Recipient Organization (Contractor)*	FASTENAL CO.-027811721		
35	Contract Number*	21350004		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$102,511.00		
38	Contract Date *	12/22/2020		
39	Period of Performance Start Date *	12/22/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	3949 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4413		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	9 EA S-FST MICROCLOUD SYSTEM; DISF SPRAYER Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - DEF - SCRF Personal Protection Equipment	\$00	\$102,511.00	\$00	\$102,511.00
<b>Total</b>		\$00	\$102,511.00	\$00	\$102,511.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - DEF - SCRF Personal Protection Equipment	12/22/2020	03/31/2021	\$102,511.00	Personal Protective Equipment	
<b>Total:</b>						\$102,511.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00



**Sub Screen: Contract: 21350035**

34	Sub-Recipient Organization (Contractor)*	DIREST SUPPORT RESOURCES, INC-078455767		
35	Contract Number*	21350035		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$539,000.00		
38	Contract Date *	12/22/2020		
39	Period of Performance Start Date *	12/22/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	3949 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4413		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	WAREHOUSE DISTRIBUTION SERVICES		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - DEF - SCRF Personal Protection Equipment	\$00	\$539,000.00	\$00	\$539,000.00
<b>Total</b>		\$00	\$539,000.00	\$00	\$539,000.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - DEF - SCRF Personal Protection Equipment	12/22/2020	03/31/2021	\$539,000.00	Personal Protective Equipment	
<b>Total:</b>						\$539,000.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21524055**

34	Sub-Recipient Organization (Contractor)*	AQUA O3 LLC-080537216		
35	Contract Number*	21524055		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$72,907.76
38	Contract Date *	11/02/2020		
39	Period of Performance Start Date *	11/02/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	3949 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4413		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	LIQUID O3 3GPM AQUENOUS OZONE UNITS Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - DEF - SCRF Personal Protection Equipment	\$00	\$72,907.76	\$00	\$72,907.75
<b>Total</b>		\$00	\$72,907.76	\$00	\$72,907.75

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - DEF - SCRF Personal Protection Equipment	11/02/2020	03/31/2021	\$72,907.75	Personal Protective Equipment	
<b>Total:</b>						\$72,907.75

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21527023**

34	Sub-Recipient Organization (Contractor)*	AIRGAS USA, LLC-56-073264		
35	Contract Number*	21527023		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$165,388.00		
38	Contract Date *	10/12/2020		
39	Period of Performance Start Date *	10/12/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	3949 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4413		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	SAFETY GOGGLES AND PROTECTIVE COVERALLS Place of Performance: Statewide		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - DEF - SCRF Personal Protection Equipment	\$00	\$165,388.00	\$00	\$165,388.00
<b>Total</b>		\$00	\$165,388.00	\$00	\$165,388.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - DEF - SCRF Personal Protection Equipment	10/12/2020	03/31/2021	\$165,388.00	Personal Protective Equipment	
<b>Total:</b>						\$165,388.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21527024**

34	Sub-Recipient Organization (Contractor)*	WW GRAINGER, INC.-606154490		
35	Contract Number*	21527024		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$133,520.37
38	Contract Date *	11/12/2020		
39	Period of Performance Start Date *	11/12/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	3949 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4413		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	PROTECTIVE COVERALLS		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - DEF - SCRF Personal Protection Equipment	\$00	\$133,520.37	\$00	\$133,318.04
<b>Total</b>		\$00	\$133,520.37	\$00	\$133,318.04

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - DEF - SCRF Personal Protection Equipment	11/12/2020	03/31/2021	\$133,318.04	Personal Protective Equipment	
<b>Total:</b>						\$133,318.04

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: PQ55027**

34	Sub-Recipient Organization (Contractor)*	Apple Inc.-60704780		
35	Contract Number*	PQ55027		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$81,134.43
38	Contract Date *	08/13/2020		
39	Period of Performance Start Date *	08/13/2020		
40	Period of Performance End Date *	06/30/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Distance learning devices and services		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - EDU - Distance Learning Equipment	\$00	\$81,134.43	\$00	\$81,134.43
<b>Total</b>		\$00	\$81,134.43	\$00	\$81,134.43

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - EDU - Distance Learning Equipment	10/01/2020	12/31/2020	\$87,355.89	Facilitating Distance Learning	
Line 2	001 - EDU - Distance Learning Equipment	08/13/2020	06/30/2021	\$-6,221.46	Facilitating Distance Learning	
<b>Total:</b>						\$81,134.43

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

### Sub Screen: Contract: PQ55023

34	Sub-Recipient Organization (Contractor)*	INSIGHT PUBLIC SECTOR, INC.-555569529		
35	Contract Number*	PQ55023		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$94,999.64		
38	Contract Date *	08/13/2020		
39	Period of Performance Start Date *	08/13/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Distance learning devices and services		

### Obligations

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - EDU - Distance Learning Equipment	\$00	\$94,999.64	\$00	\$94,999.64
<b>Total</b>		\$00	\$94,999.64	\$00	\$94,999.64

### Previous Expenditures (All previous quarters)

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - EDU - Distance Learning Equipment	08/13/2020	09/30/2020	\$94,999.64	Facilitating Distance Learning	
<b>Total:</b>						\$94,999.64

### Current Quarter Expenditures

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: PQ55028**

34	Sub-Recipient Organization (Contractor)*	INSIGHT PUBLIC SECTOR, INC.-555569529		
35	Contract Number*	PQ55028		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$80,284.87
38	Contract Date *	08/19/2020		
39	Period of Performance Start Date *	08/19/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Distance learning devices and services		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - EDU - Distance Learning Equipment	\$00	\$80,284.87	\$00	\$80,284.87
<b>Total</b>		\$00	\$80,284.87	\$00	\$80,284.87

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - EDU - Distance Learning Equipment	08/19/2020	09/30/2020	\$80,284.87	Facilitating Distance Learning	
<b>Total:</b>						\$80,284.87

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: PI55880**

34	Sub-Recipient Organization (Contractor)*	PC Specialist Inc. dba Technology Integration Group-95-382559		
35	Contract Number*	PI55880		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$53,150.59		
38	Contract Date *	06/30/2020		
39	Period of Performance Start Date *	06/30/2020		
40	Period of Performance End Date *	06/30/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Distance learning devices and services		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - EDU - Distance Learning Equipment	\$00	\$53,150.59	\$00	\$53,150.59
<b>Total</b>		\$00	\$53,150.59	\$00	\$53,150.59

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - EDU - Distance Learning Equipment	07/01/2020	03/31/2021	\$936,770.83	Facilitating Distance Learning	
Line 2	001 - EDU - Distance Learning Equipment	07/01/2020	06/30/2021	\$-883,620.24	Facilitating Distance Learning	
<b>Total:</b>						\$53,150.59

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00



**Sub Screen: Contract: PI55728**

34	Sub-Recipient Organization (Contractor)*	CDW GOVERNMENT LLC-026157235		
35	Contract Number*	PI55728		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$2,068,385.54		
38	Contract Date *	05/19/2020		
39	Period of Performance Start Date *	05/19/2020		
40	Period of Performance End Date *	06/30/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Distance learning devices and services		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - EDU - Distance Learning Equipment	\$00	\$2,068,385.54	\$00	\$2,068,385.54
<b>Total</b>		\$00	\$2,068,385.54	\$00	\$2,068,385.54

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - EDU - Distance Learning Equipment	07/01/2020	03/31/2021	\$2,523,552.40	Improve Telework Capabilities of Public Employees	
Line 2	001 - EDU - Distance Learning Equipment	07/01/2020	06/30/2021	\$-455,166.86	Facilitating Distance Learning	
<b>Total:</b>						\$2,068,385.54

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: PI55765**

34	Sub-Recipient Organization (Contractor)*	CDW GOVERNMENT LLC-026157235		
35	Contract Number*	PI55765		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$211,849.84		
38	Contract Date *	06/30/2020		
39	Period of Performance Start Date *	06/30/2020		
40	Period of Performance End Date *	06/30/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Distance learning devices and services		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - EDU - Distance Learning Equipment	\$00	\$211,849.84	\$00	\$211,849.84
<b>Total</b>		\$00	\$211,849.84	\$00	\$211,849.84

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - EDU - Distance Learning Equipment	07/01/2020	12/31/2020	\$243,368.23	Facilitating Distance Learning	
Line 2	001 - EDU - Distance Learning Equipment	06/30/2020	06/30/2021	\$-31,518.39	Facilitating Distance Learning	
<b>Total:</b>						\$211,849.84

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

## Sub Screen: Contract: PQ55016

34	Sub-Recipient Organization (Contractor)*	CDW GOVERNMENT LLC-026157235		
35	Contract Number*	PQ55016		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$194,048.76		
38	Contract Date *	08/07/2020		
39	Period of Performance Start Date *	08/07/2020		
40	Period of Performance End Date *	06/30/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Distance learning devices and services		

### Obligations

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - EDU - Distance Learning Equipment	\$00	\$194,048.76	\$00	\$194,048.76
<b>Total</b>		\$00	\$194,048.76	\$00	\$194,048.76

### Previous Expenditures (All previous quarters)

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - EDU - Distance Learning Equipment	01/01/2021	03/31/2021	\$223,157.03	Facilitating Distance Learning	
Line 2	001 - EDU - Distance Learning Equipment	08/07/2020	06/30/2021	\$-29,108.27	Facilitating Distance Learning	
<b>Total:</b>						\$194,048.76

### Current Quarter Expenditures

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

### Sub Screen: Contract: PQ55018

34	Sub-Recipient Organization (Contractor)*	CDW GOVERNMENT LLC-026157235		
35	Contract Number*	PQ55018		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$2,121,767.52		
38	Contract Date *	08/07/2020		
39	Period of Performance Start Date *	08/07/2020		
40	Period of Performance End Date *	06/30/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Distance learning devices and services		

### Obligations

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - EDU - Distance Learning Equipment	\$00	\$2,121,767.52	\$00	\$2,121,767.52
<b>Total</b>		\$00	\$2,121,767.52	\$00	\$2,121,767.52

### Previous Expenditures (All previous quarters)

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - EDU - Distance Learning Equipment	10/01/2020	03/31/2021	\$781,327.01	Facilitating Distance Learning	
Line 2	001 - EDU - Distance Learning Equipment	08/07/2020	06/30/2021	\$1,340,440.51	Facilitating Distance Learning	
<b>Total:</b>						\$2,121,767.52

### Current Quarter Expenditures

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: PI55771**

34	Sub-Recipient Organization (Contractor)*	AT&T MOBILITY LLC-003548489		
35	Contract Number*	PI55771		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$338,382.45
38	Contract Date *	06/05/2020		
39	Period of Performance Start Date *	06/05/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Distance learning devices and services		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - EDU - Distance Learning Equipment	\$00	\$338,382.45	\$00	\$338,382.45
<b>Total</b>		\$00	\$338,382.45	\$00	\$338,382.45

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - EDU - Distance Learning Equipment	07/01/2020	09/30/2020	\$338,382.45	Facilitating Distance Learning	
<b>Total:</b>						\$338,382.45

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: PI55727**

34	Sub-Recipient Organization (Contractor)*	Apple Inc.-60704780		
35	Contract Number*	PI55727		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$1,388,626.91		
38	Contract Date *	05/19/2020		
39	Period of Performance Start Date *	05/19/2020		
40	Period of Performance End Date *	06/30/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Distance learning devices and services		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - EDU - Distance Learning Equipment	\$00	\$1,388,626.91	\$00	\$1,388,626.91
<b>Total</b>		\$00	\$1,388,626.91	\$00	\$1,388,626.91

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - EDU - Distance Learning Equipment	07/01/2020	03/31/2021	\$1,390,324.64	Facilitating Distance Learning	
Line 2	001 - EDU - Distance Learning Equipment	05/19/2020	06/30/2021	\$-1,697.73	Facilitating Distance Learning	
<b>Total:</b>						\$1,388,626.91

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: PI55877**

34	Sub-Recipient Organization (Contractor)*	Apple Inc.-60704780		
35	Contract Number*	PI55877		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$4,338,268.89		
38	Contract Date *	06/30/2020		
39	Period of Performance Start Date *	06/30/2020		
40	Period of Performance End Date *	06/30/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Distance learning devices and services		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - EDU - Distance Learning Equipment	\$00	\$4,338,268.89	\$00	\$4,338,268.89
<b>Total</b>		\$00	\$4,338,268.89	\$00	\$4,338,268.89

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - EDU - Distance Learning Equipment	07/01/2020	12/31/2020	\$4,356,811.82	Facilitating Distance Learning	
Line 2	001 - EDU - Distance Learning Equipment	07/01/2020	06/30/2021	\$-18,542.93	Facilitating Distance Learning	
<b>Total:</b>						\$4,338,268.89

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

### Sub Screen: Contract: PQ55001

34	Sub-Recipient Organization (Contractor)*	Apple Inc.-60704780		
35	Contract Number*	PQ55001		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$518,278.33		
38	Contract Date *	07/06/2020		
39	Period of Performance Start Date *	07/06/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Distance learning devices and services		

### Obligations

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - EDU - Distance Learning Equipment	\$00	\$518,278.33	\$00	\$518,149.04
<b>Total</b>		\$00	\$518,278.33	\$00	\$518,149.04

### Previous Expenditures (All previous quarters)

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - EDU - Distance Learning Equipment	10/01/2020	12/31/2020	\$518,149.04	Facilitating Distance Learning	
<b>Total:</b>						\$518,149.04

### Current Quarter Expenditures

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00



### Sub Screen: Contract: PQ55015

34	Sub-Recipient Organization (Contractor)*	Apple Inc.-60704780		
35	Contract Number*	PQ55015		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$2,318,327.09		
38	Contract Date *	08/07/2020		
39	Period of Performance Start Date *	08/07/2020		
40	Period of Performance End Date *	06/30/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Distance learning devices and services		

### Obligations

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - EDU - Distance Learning Equipment	\$00	\$2,318,327.09	\$00	\$2,318,327.09
<b>Total</b>		\$00	\$2,318,327.09	\$00	\$2,318,327.09

### Previous Expenditures (All previous quarters)

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - EDU - Distance Learning Equipment	08/07/2020	12/31/2020	\$2,433,067.97	Facilitating Distance Learning	
Line 2	001 - EDU - Distance Learning Equipment	08/07/2020	06/30/2021	\$-114,740.88	Facilitating Distance Learning	
<b>Total:</b>						\$2,318,327.09

### Current Quarter Expenditures

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

### Sub Screen: Contract: PQ55017

34	Sub-Recipient Organization (Contractor)*	Apple Inc.-60704780		
35	Contract Number*	PQ55017		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$75,166.62
38	Contract Date *	08/07/2020		
39	Period of Performance Start Date *	08/07/2020		
40	Period of Performance End Date *	06/30/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Distance learning devices and services		

### Obligations

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - EDU - Distance Learning Equipment	\$00	\$75,166.62	\$00	\$75,166.62
<b>Total</b>		\$00	\$75,166.62	\$00	\$75,166.62

### Previous Expenditures (All previous quarters)

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - EDU - Distance Learning Equipment	10/01/2020	12/31/2020	\$89,145.78	Facilitating Distance Learning	
Line 2	001 - EDU - Distance Learning Equipment	08/07/2020	06/30/2021	\$-13,979.16	Facilitating Distance Learning	
<b>Total:</b>						\$75,166.62

### Current Quarter Expenditures

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: PI55756**

34	Sub-Recipient Organization (Contractor)*	AT&T MOBILITY LLC-003548489		
35	Contract Number*	PI55756		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$234,462.66		
38	Contract Date *	06/01/2020		
39	Period of Performance Start Date *	06/01/2020		
40	Period of Performance End Date *	06/30/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Distance learning devices and services		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - EDU - Distance Learning Equipment	\$00	\$234,462.66	\$00	\$234,462.66
<b>Total</b>		\$00	\$234,462.66	\$00	\$234,462.66

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - EDU - Distance Learning Equipment	07/01/2020	03/31/2021	\$244,692.26	Facilitating Distance Learning	
Line 2	001 - EDU - Distance Learning Equipment	06/30/2020	06/30/2021	\$-10,229.60	Facilitating Distance Learning	
<b>Total:</b>						\$234,462.66

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

### Sub Screen: Contract: PQ55036

34	Sub-Recipient Organization (Contractor)*	AT&T MOBILITY LLC-003548489		
35	Contract Number*	PQ55036		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$4,420,042.31		
38	Contract Date *	08/24/2020		
39	Period of Performance Start Date *	08/24/2020		
40	Period of Performance End Date *	06/30/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Distance learning devices and services		

### Obligations

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - EDU - Distance Learning Equipment	\$00	\$4,420,042.31	\$00	\$4,420,042.31
<b>Total</b>		\$00	\$4,420,042.31	\$00	\$4,420,042.31

### Previous Expenditures (All previous quarters)

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - EDU - Distance Learning Equipment	10/01/2020	03/31/2021	\$1,321,945.12	Facilitating Distance Learning	
Line 2	001 - EDU - Distance Learning Equipment	08/24/2020	06/30/2021	\$3,098,097.19	Facilitating Distance Learning	
<b>Total:</b>						\$4,420,042.31

### Current Quarter Expenditures

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: PQ55059**

34	Sub-Recipient Organization (Contractor)*	AT&T MOBILITY LLC-003548489		
35	Contract Number*	PQ55059		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$126,917.88		
38	Contract Date *	09/08/2020		
39	Period of Performance Start Date *	09/08/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Distance learning devices and services		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - EDU - Distance Learning Equipment	\$00	\$126,917.88	\$00	\$126,917.88
<b>Total</b>		\$00	\$126,917.88	\$00	\$126,917.88

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - EDU - Distance Learning Equipment	10/01/2020	12/31/2020	\$126,917.88	Facilitating Distance Learning	
<b>Total:</b>						\$126,917.88

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

## Sub Screen: Contract: PQ55118

34	Sub-Recipient Organization (Contractor)*	AT&T MOBILITY LLC-003548489		
35	Contract Number*	PQ55118		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$104,194.36		
38	Contract Date *	10/07/2020		
39	Period of Performance Start Date *	10/07/2020		
40	Period of Performance End Date *	06/30/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Distance learning devices and services		

### Obligations

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - EDU - Distance Learning Equipment	\$00	\$104,194.36	\$00	\$104,194.36
<b>Total</b>		\$00	\$104,194.36	\$00	\$104,194.36

### Previous Expenditures (All previous quarters)

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	001 - EDU - Distance Learning Equipment	10/07/2020	06/30/2021	\$104,194.36	Facilitating Distance Learning	
<b>Total:</b>						\$104,194.36

### Current Quarter Expenditures

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

### Sub Screen: Contract: PQ55160

34	Sub-Recipient Organization (Contractor)*	AT&T MOBILITY LLC-003548489		
35	Contract Number*	PQ55160		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$729,378.54		
38	Contract Date *	11/06/2020		
39	Period of Performance Start Date *	11/06/2020		
40	Period of Performance End Date *	07/01/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Distance learning devices and services		

### Obligations

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - EDU - Distance Learning Equipment	\$00	\$729,378.54	\$00	\$729,378.54
<b>Total</b>		\$00	\$729,378.54	\$00	\$729,378.54

### Previous Expenditures (All previous quarters)

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - EDU - Distance Learning Equipment	01/01/2021	03/31/2021	\$520,869.19	Facilitating Distance Learning	
Line 2	001 - EDU - Distance Learning Equipment	11/06/2020	06/30/2021	\$208,509.35	Facilitating Distance Learning	
<b>Total:</b>						\$729,378.54

### Current Quarter Expenditures

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: PI55754**

34	Sub-Recipient Organization (Contractor)*	AT&T MOBILITY LLC-003548489		
35	Contract Number*	PI55754		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$935,251.86		
38	Contract Date *	06/01/2020		
39	Period of Performance Start Date *	06/01/2020		
40	Period of Performance End Date *	07/01/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Distance learning devices and services		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - EDU - Distance Learning Equipment	\$00	\$935,251.86	\$00	\$935,251.86
<b>Total</b>		\$00	\$935,251.86	\$00	\$935,251.86

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - EDU - Distance Learning Equipment	07/01/2020	03/31/2021	\$1,772,700.05	Facilitating Distance Learning	
Line 2	001 - EDU - Distance Learning Equipment	06/01/2020	06/30/2021	\$-837,448.19	Facilitating Distance Learning	
<b>Total:</b>						\$935,251.86

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00



### Sub Screen: Contract: PQ55095

34	Sub-Recipient Organization (Contractor)*	AT&T MOBILITY LLC-003548489		
35	Contract Number*	PQ55095		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$0.00
38	Contract Date *	09/24/2020		
39	Period of Performance Start Date *	09/24/2020		
40	Period of Performance End Date *	06/30/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Distance learning devices and services		

### Obligations

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - EDU - Distance Learning Equipment	\$00	\$0.00	\$00	\$0.00
<b>Total</b>		\$00	\$0.00	\$00	\$0.00

### Previous Expenditures (All previous quarters)

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - EDU - Distance Learning Equipment	10/01/2020	03/31/2021	\$169,256.13	Facilitating Distance Learning	
Line 2	001 - EDU - Distance Learning Equipment	10/01/2020	06/30/2021	\$-169,256.13	Facilitating Distance Learning	
<b>Total:</b>						\$0.00

### Current Quarter Expenditures

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: PI55769**

34	Sub-Recipient Organization (Contractor)*	Carahsoft Technology Corp-88365767		
35	Contract Number*	PI55769		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$226,755.93		
38	Contract Date *	06/04/2020		
39	Period of Performance Start Date *	06/04/2020		
40	Period of Performance End Date *	12/31/2020		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Distance learning devices and services		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - EDU - Distance Learning Equipment	\$00	\$226,755.93	\$00	\$226,755.93
<b>Total</b>		\$00	\$226,755.93	\$00	\$226,755.93

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - EDU - Distance Learning Equipment	07/01/2020	09/30/2020	\$226,755.93	Facilitating Distance Learning	
<b>Total:</b>						\$226,755.93

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

### Sub Screen: Contract: PQ55098

34	Sub-Recipient Organization (Contractor)*	Carahsoft Technology Corp-88365767		
35	Contract Number*	PQ55098		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$305,968.46		
38	Contract Date *	09/25/2020		
39	Period of Performance Start Date *	09/25/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Distance learning devices and services		

### Obligations

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - EDU - Distance Learning Equipment	\$00	\$305,968.46	\$00	\$305,968.46
<b>Total</b>		\$00	\$305,968.46	\$00	\$305,968.46

### Previous Expenditures (All previous quarters)

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - EDU - Distance Learning Equipment	10/01/2020	12/31/2020	\$305,968.46	Facilitating Distance Learning	
<b>Total:</b>						\$305,968.46

### Current Quarter Expenditures

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

### Sub Screen: Contract: PQ55093

34	Sub-Recipient Organization (Contractor)*	PC Specialist Inc. dba Technology Integration Group-95-382559		
35	Contract Number*	PQ55093		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$4,950,130.85		
38	Contract Date *	09/23/2020		
39	Period of Performance Start Date *	09/23/2020		
40	Period of Performance End Date *	07/01/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Distance learning devices and services		

### Obligations

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - EDU - Distance Learning Equipment	\$00	\$4,950,130.85	\$00	\$4,950,130.85
<b>Total</b>		\$00	\$4,950,130.85	\$00	\$4,950,130.85

### Previous Expenditures (All previous quarters)

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - EDU - Distance Learning Equipment	10/01/2020	03/31/2021	\$4,902,486.14	Facilitating Distance Learning	
Line 2	001 - EDU - Distance Learning Equipment	09/23/2020	07/01/2021	\$47,644.71	Facilitating Distance Learning	
<b>Total:</b>						\$4,950,130.85

### Current Quarter Expenditures

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

### Sub Screen: Contract: PQ55101

34	Sub-Recipient Organization (Contractor)*	PC Specialist Inc. dba Technology Integration Group-95-382559		
35	Contract Number*	PQ55101		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$1,482,986.24		
38	Contract Date *	09/23/2020		
39	Period of Performance Start Date *	09/23/2020		
40	Period of Performance End Date *	06/30/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Distance learning devices and services		

### Obligations

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - EDU - Distance Learning Equipment	\$00	\$1,482,986.24	\$00	\$1,482,986.24
<b>Total</b>		\$00	\$1,482,986.24	\$00	\$1,482,986.24

### Previous Expenditures (All previous quarters)

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - EDU - Distance Learning Equipment	10/01/2020	03/31/2021	\$1,482,986.24	Facilitating Distance Learning	
Line 2	0			\$0.00	Select	
<b>Total:</b>						\$1,482,986.24

### Current Quarter Expenditures

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

### Sub Screen: Contract: PQ55111

34	Sub-Recipient Organization (Contractor)*	PC Specialist Inc. dba Technology Integration Group-95-382559		
35	Contract Number*	PQ55111		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$598,818.07		
38	Contract Date *	10/02/2020		
39	Period of Performance Start Date *	10/02/2020		
40	Period of Performance End Date *	06/30/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Distance learning devices and services		

### Obligations

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - EDU - Distance Learning Equipment	\$00	\$598,818.07	\$00	\$598,818.07
<b>Total</b>		\$00	\$598,818.07	\$00	\$598,818.07

### Previous Expenditures (All previous quarters)

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - EDU - Distance Learning Equipment	10/02/2020	12/31/2020	\$598,818.07	Facilitating Distance Learning	
Line 2	0			\$0.00	Select	
<b>Total:</b>						\$598,818.07

### Current Quarter Expenditures

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

### Sub Screen: Contract: PQ55116

34	Sub-Recipient Organization (Contractor)*	Apple Inc.-60704780		
35	Contract Number*	PQ55116		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$962,947.37		
38	Contract Date *	10/07/2020		
39	Period of Performance Start Date *	10/07/2020		
40	Period of Performance End Date *	07/01/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Distance learning devices and services		

### Obligations

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - EDU - Distance Learning Equipment	\$00	\$962,947.37	\$00	\$962,947.37
<b>Total</b>		\$00	\$962,947.37	\$00	\$962,947.37

### Previous Expenditures (All previous quarters)

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - EDU - Distance Learning Equipment	10/07/2020	12/31/2020	\$962,947.37	Facilitating Distance Learning	
Line 2	0			\$0.00	Select	
<b>Total:</b>						\$962,947.37

### Current Quarter Expenditures

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

### Sub Screen: Contract: PQ55123

34	Sub-Recipient Organization (Contractor)*	INSIGHT PUBLIC SECTOR, INC.-555569529		
35	Contract Number*	PQ55123		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$58,929.69
38	Contract Date *	10/12/2020		
39	Period of Performance Start Date *	10/12/2020		
40	Period of Performance End Date *	07/01/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Distance learning devices and services		

### Obligations

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - EDU - Distance Learning Equipment	\$00	\$58,929.69	\$00	\$58,929.69
<b>Total</b>		\$00	\$58,929.69	\$00	\$58,929.69

### Previous Expenditures (All previous quarters)

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - EDU - Distance Learning Equipment	10/12/2020	12/31/2020	\$58,929.69	Facilitating Distance Learning	
<b>Total:</b>						\$58,929.69

### Current Quarter Expenditures

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00



### Sub Screen: Contract: PQ55133

34	Sub-Recipient Organization (Contractor)*	PC Specialist Inc. dba Technology Integration Group-95-382559		
35	Contract Number*	PQ55133		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$1,484,660.94		
38	Contract Date *	10/22/2020		
39	Period of Performance Start Date *	10/22/2020		
40	Period of Performance End Date *	06/30/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Distance learning devices and services		

### Obligations

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - EDU - Distance Learning Equipment	\$00	\$1,484,660.94	\$00	\$1,484,660.94
<b>Total</b>		\$00	\$1,484,660.94	\$00	\$1,484,660.94

### Previous Expenditures (All previous quarters)

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - EDU - Distance Learning Equipment	10/22/2020	03/31/2021	\$1,484,660.94	Facilitating Distance Learning	
Line 2	0			\$0.00	Select	
<b>Total:</b>						\$1,484,660.94

### Current Quarter Expenditures

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: PI41343**

34	Sub-Recipient Organization (Contractor)*	Apple Inc.-60704780		
35	Contract Number*	PI41343		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$178,885.57		
38	Contract Date *	06/01/2020		
39	Period of Performance Start Date *	06/01/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Distance learning devices and services		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - EDU - Distance Learning Equipment	\$00	\$178,885.57	\$00	\$178,885.57
<b>Total</b>		\$00	\$178,885.57	\$00	\$178,885.57

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - EDU - Distance Learning Equipment	07/31/2020	08/04/2020	\$178,885.57	Facilitating Distance Learning	
<b>Total:</b>						\$178,885.57

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

### Sub Screen: Contract: PQ40261

34	Sub-Recipient Organization (Contractor)*	Apple Inc.-60704780		
35	Contract Number*	PQ40261		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$402,476.29		
38	Contract Date *	10/06/2020		
39	Period of Performance Start Date *	10/06/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Distance learning devices and services		

### Obligations

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - EDU - Distance Learning Equipment	\$00	\$402,476.29	\$00	\$402,476.29
<b>Total</b>		\$00	\$402,476.29	\$00	\$402,476.29

### Previous Expenditures (All previous quarters)

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - EDU - Distance Learning Equipment	11/19/2020	12/05/2020	\$402,476.29	Facilitating Distance Learning	
<b>Total:</b>						\$402,476.29

### Current Quarter Expenditures

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21350048**

34	Sub-Recipient Organization (Contractor)*	AEON NEXUS CORPORATION-109396627		
35	Contract Number*	21350048		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$128,833.35		
38	Contract Date *	12/01/2020		
39	Period of Performance Start Date *	12/01/2020		
40	Period of Performance End Date *	04/30/2021		
41	Primary Place of Performance Address Line 1 *	3949 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4413		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	IT Services		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - DEF - SCRF Personal Protection Equipment	\$00	\$128,833.35	\$00	\$128,833.35
<b>Total</b>		\$00	\$128,833.35	\$00	\$128,833.35

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - DEF - SCRF Personal Protection Equipment	12/02/2020	01/25/2021	\$128,833.35	Personal Protective Equipment	
<b>Total:</b>						\$128,833.35

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: PO 239628**

34	Sub-Recipient Organization (Contractor)*	MAXIMUS, INC.-082347477		
35	Contract Number*	PO 239628		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$1,850,336.04		
38	Contract Date *	09/30/2020		
39	Period of Performance Start Date *	09/30/2020		
40	Period of Performance End Date *	12/31/2021		
41	Primary Place of Performance Address Line 1 *	1801 Kalakaua Ave		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96815-1513		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Call center, adjudicator center		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	\$00	\$1,850,336.04	\$00	\$1,850,336.04
<b>Total</b>		\$00	\$1,850,336.04	\$00	\$1,850,336.04

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	09/30/2020	06/30/2021	\$1,850,336.04	Unemployment Benefits	
<b>Total:</b>						\$1,850,336.04

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: PO 240145**

34	Sub-Recipient Organization (Contractor)*	MAXIMUS, INC.-082347477		
35	Contract Number*	PO 240145		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$3,925,051.60		
38	Contract Date *	09/30/2020		
39	Period of Performance Start Date *	09/30/2020		
40	Period of Performance End Date *	06/30/2021		
41	Primary Place of Performance Address Line 1 *	1801 Kalakaua Ave		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96815-1513		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Call center, adjudicator center		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	\$00	\$3,925,051.60	\$00	\$3,925,051.60
<b>Total</b>		\$00	\$3,925,051.60	\$00	\$3,925,051.60

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	09/30/2020	06/23/2021	\$3,925,051.60	Unemployment Benefits	
<b>Total:</b>						\$3,925,051.60

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: PO 239557**

34	Sub-Recipient Organization (Contractor)*	Hawaii Convention Center-66364		
35	Contract Number*	PO 239557		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$3,139,928.36		
38	Contract Date *	11/04/2020		
39	Period of Performance Start Date *	11/04/2020		
40	Period of Performance End Date *	06/30/2021		
41	Primary Place of Performance Address Line 1 *	1801 Kalakaua Ave		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96815-1513		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Facility costs		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	\$00	\$3,139,928.36	\$00	\$3,139,928.36
<b>Total</b>		\$00	\$3,139,928.36	\$00	\$3,139,928.36

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	11/04/2020	06/30/2021	\$3,139,928.36	Unemployment Benefits	
<b>Total:</b>						\$3,139,928.36

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: PO 240026**

34	Sub-Recipient Organization (Contractor)*	Hawaii Convention Center-66364		
35	Contract Number*	PO 240026		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$357,644.65		
38	Contract Date *	01/01/2021		
39	Period of Performance Start Date *	01/01/2021		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	1801 Kalakaua Ave		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96815-1513		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Facility Cost		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	\$00	\$357,644.65	\$00	\$357,644.65
<b>Total</b>		\$00	\$357,644.65	\$00	\$357,644.65

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	01/01/2021	03/31/2021	\$357,644.65	Unemployment Benefits	
<b>Total:</b>						\$357,644.65

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00



**Sub Screen: Contract: PO 239660**

34	Sub-Recipient Organization (Contractor)*	Hawaii Convention Center-66364		
35	Contract Number*	PO 239660		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$111,101.73		
38	Contract Date *	01/01/2021		
39	Period of Performance Start Date *	01/01/2021		
40	Period of Performance End Date *	06/30/2021		
41	Primary Place of Performance Address Line 1 *	1801 Kalakaua Ave		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96815-1513		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Facility Cost		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	\$00	\$111,101.73	\$00	\$111,101.73
<b>Total</b>		\$00	\$111,101.73	\$00	\$111,101.73

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	01/01/2021	06/30/2021	\$111,101.73	Unemployment Benefits	
<b>Total:</b>						\$111,101.73

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: JS 2080**

34	Sub-Recipient Organization (Contractor)*	Hawaiian Telcom-006926943		
35	Contract Number*	JS 2080		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$105,580.01		
38	Contract Date *	02/01/2021		
39	Period of Performance Start Date *	02/01/2021		
40	Period of Performance End Date *	06/30/2021		
41	Primary Place of Performance Address Line 1 *	1801 Kalakaua Ave		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96815-1513		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Phones at Convention Center, DLIR Add'l UI Offices		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	\$00	\$105,580.01	\$00	\$105,580.01
<b>Total</b>		\$00	\$105,580.01	\$00	\$105,580.01

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	02/01/2021	06/30/2021	\$105,580.01	Unemployment Benefits	
<b>Total:</b>						\$105,580.01

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: PO 239614**

34	Sub-Recipient Organization (Contractor)*	Hawaiian Telcom-006926943		
35	Contract Number*	PO 239614		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$50,261.76		
38	Contract Date *	01/01/2021		
39	Period of Performance Start Date *	01/01/2021		
40	Period of Performance End Date *	06/30/2021		
41	Primary Place of Performance Address Line 1 *	1801 Kalakaua Ave		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96815-1513		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Phones at Convention Center, DLIR Add'l UI Offices		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	\$00	\$50,261.76	\$00	\$50,261.76
<b>Total</b>		\$00	\$50,261.76	\$00	\$50,261.76

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	01/01/2021	06/30/2021	\$50,261.76	Unemployment Benefits	
<b>Total:</b>						\$50,261.76

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: PO 239702**

34	Sub-Recipient Organization (Contractor)*	DATAHOUSE CONSULTING, INC.-079019282		
35	Contract Number*	PO 239702		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$1,168,801.49		
38	Contract Date *	12/07/2020		
39	Period of Performance Start Date *	12/07/2020		
40	Period of Performance End Date *	03/31/2021		
41	Primary Place of Performance Address Line 1 *	1801 Kalakaua Ave		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96815-1513		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	UI Claims System Support		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	\$00	\$1,168,801.49	\$00	\$1,168,801.49
<b>Total</b>		\$00	\$1,168,801.49	\$00	\$1,168,801.49

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	12/07/2020	03/31/2021	\$1,168,801.49	Unemployment Benefits	
<b>Total:</b>						\$1,168,801.49

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: PO 239754**

34	Sub-Recipient Organization (Contractor)*	DATAHOUSE CONSULTING, INC.-079019282		
35	Contract Number*	PO 239754		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$50,000.00		
38	Contract Date *	12/02/2020		
39	Period of Performance Start Date *	12/02/2020		
40	Period of Performance End Date *	06/30/2021		
41	Primary Place of Performance Address Line 1 *	1801 Kalakaua Ave		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96815-1513		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	UI Claims System Support		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	\$00	\$50,000.00	\$00	\$50,000.00
<b>Total</b>		\$00	\$50,000.00	\$00	\$50,000.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	12/02/2020	06/30/2021	\$50,000.00	Unemployment Benefits	
<b>Total:</b>						\$50,000.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: JS 2078**

34	Sub-Recipient Organization (Contractor)*	Carahsoft Technology Corp-88365767		
35	Contract Number*	JS 2078		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$84,014.68		
38	Contract Date *	08/03/2020		
39	Period of Performance Start Date *	08/03/2020		
40	Period of Performance End Date *	06/30/2021		
41	Primary Place of Performance Address Line 1 *	1801 Kalakaua Ave # 5		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96815-1513		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Cloud Services for PUA		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	\$00	\$84,014.68	\$00	\$84,014.68
<b>Total</b>		\$00	\$84,014.68	\$00	\$84,014.68

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	08/03/2020	06/30/2021	\$84,014.68	Unemployment Benefits	
<b>Total:</b>						\$84,014.68

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: JS 2827**

34	Sub-Recipient Organization (Contractor)*	Carahsoft Technology Corp-88365767		
35	Contract Number*	JS 2827		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$84,870.09		
38	Contract Date *	06/30/2020		
39	Period of Performance Start Date *	06/30/2020		
40	Period of Performance End Date *	06/30/2021		
41	Primary Place of Performance Address Line 1 *	1801 Kalakaua Ave		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96815-1513		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Cloud Services for PUA		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	\$00	\$84,870.09	\$00	\$84,870.09
<b>Total</b>		\$00	\$84,870.09	\$00	\$84,870.09

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	06/30/2020	06/30/2021	\$84,870.09	Unemployment Benefits	
<b>Total:</b>						\$84,870.09

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: PO 33115695**

34	Sub-Recipient Organization (Contractor)*	NEC CORPORATION OF AMERICA-147255405		
35	Contract Number*	PO 33115695		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$416,958.00		
38	Contract Date *	05/04/2021		
39	Period of Performance Start Date *	05/04/2021		
40	Period of Performance End Date *	06/30/2021		
41	Primary Place of Performance Address Line 1 *	400 Rodgers Blvd Ste 700		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96819-1880		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Annual Maintenance Service for Thermal Scanners and Facial Recognition		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - DOT - SCRF Airport Sreening and Health Assurance Security	\$00	\$416,958.00	\$00	\$416,958.00
<b>Total</b>		\$00	\$416,958.00	\$00	\$416,958.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$0.00	Select	
Line 2	001 - DOT - SCRF Airport Sreening and Health Assurance Security	05/04/2021	06/30/2021	\$416,958.00	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$416,958.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00



**Sub Screen: Contract: 21350054**

34	Sub-Recipient Organization (Contractor)*	DIREST SUPPORT RESOURCES, INC-078455767		
35	Contract Number*	21350054		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$230,478.91		
38	Contract Date *	05/21/2021		
39	Period of Performance Start Date *	05/21/2021		
40	Period of Performance End Date *	12/31/2021		
41	Primary Place of Performance Address Line 1 *	3949 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4413		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	WAREHOUSE SERVICES JAN 2021-MAR 2021		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - DEF - SCRF Personal Protection Equipment	\$00	\$230,478.91	\$00	\$0.00
<b>Total</b>		\$00	\$230,478.91	\$00	\$0.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B	52 C	52 D	52 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0		\$0.00	Select	
<b>Total:</b>					\$0.00

**Current Quarter Expenditures**

	53 A	53 B	53 C	53 D	53 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
<b>Total:</b>						\$00

**Sub Screen: Contract: 21350056**

34	Sub-Recipient Organization (Contractor)*	DIREST SUPPORT RESOURCES, INC-078455767		
35	Contract Number*	21350056		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$2,183,786.50		
38	Contract Date *	05/21/2021		
39	Period of Performance Start Date *	05/21/2021		
40	Period of Performance End Date *	12/31/2021		
41	Primary Place of Performance Address Line 1 *	3949 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4413		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	WAREHOUSE SERVICES APR 2021-JUN 2021		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - DEF - SCRF Personal Protection Equipment	\$00	\$2,183,786.50	\$00	\$0.00
<b>Total</b>		\$00	\$2,183,786.50	\$00	\$0.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B	52 C	52 D	52 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0		\$0.00	Select	
<b>Total:</b>					\$0.00

**Current Quarter Expenditures**

	53 A	53 B	53 C	53 D	53 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
<b>Total:</b>						\$00

**Sub Screen: Contract: JM6605**

34	Sub-Recipient Organization (Contractor)*	DIREST SUPPORT RESOURCES, INC-078455767		
35	Contract Number*	JM6605		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$2,495,958.59		
38	Contract Date *	05/26/2021		
39	Period of Performance Start Date *	05/26/2021		
40	Period of Performance End Date *	12/31/2021		
41	Primary Place of Performance Address Line 1 *	3949 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4413		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	WAREHOUSE SERVICES FOR PPE		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - DEF - SCRF Personal Protection Equipment	\$00	\$2,495,958.59	\$00	\$2,495,958.59
<b>Total</b>		\$00	\$2,495,958.59	\$00	\$2,495,958.59

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - DEF - SCRF Personal Protection Equipment	05/26/2021	06/30/2021	\$2,495,958.59	Personal Protective Equipment	
<b>Total:</b>						\$2,495,958.59

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21524001 - A**

34	Sub-Recipient Organization (Contractor)*	Anthology Marketing Group, Inc.-011542893		
35	Contract Number*	21524001 - A		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$249,425.00
38	Contract Date *	07/31/2020		
39	Period of Performance Start Date *	07/31/2020		
40	Period of Performance End Date *	12/31/2021		
41	Primary Place of Performance Address Line 1 *	3949 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4413		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	RESEARCH AND MESSAGING AND MEDIA CONSULTATION FOR DOH		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - DEF - COVID19 Response	\$00	\$249,425.00	\$00	\$249,425.00
<b>Total</b>		\$00	\$249,425.00	\$00	\$249,425.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	002 - DEF - COVID19 Response	07/31/2020	06/30/2021	\$249,425.00	Public Health Expenses	
<b>Total:</b>						\$249,425.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

## Sub Screen: Contract: 21524002 - A

34	Sub-Recipient Organization (Contractor)*	Carahsoft Technology Corp-88365767		
35	Contract Number*	21524002 - A		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$637,708.64		
38	Contract Date *	07/31/2020		
39	Period of Performance Start Date *	07/31/2020		
40	Period of Performance End Date *	12/31/2021		
41	Primary Place of Performance Address Line 1 *	3949 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4413		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	CLOUD DEPLOY/DEVELOP SAFE TRAVELS APP. TRACKING ARRIVING PAX		

### Obligations

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - DEF - COVID19 Response	\$00	\$637,708.64	\$00	\$637,708.64
<b>Total</b>		\$00	\$637,708.64	\$00	\$637,708.64

### Previous Expenditures (All previous quarters)

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	002 - DEF - COVID19 Response	07/31/2020	06/30/2021	\$637,708.64	Public Health Expenses	
<b>Total:</b>						\$637,708.64

### Current Quarter Expenditures

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21524087**

34	Sub-Recipient Organization (Contractor)*	Carahsoft Technology Corp-88365767		
35	Contract Number*	21524087		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$513,456.00		
38	Contract Date *	04/23/2021		
39	Period of Performance Start Date *	04/23/2021		
40	Period of Performance End Date *	06/30/2021		
41	Primary Place of Performance Address Line 1 *	3949 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4413		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	PART II SAFE TRAVELS HAWAII SYSTEM MAINTENANCE, GO-HAWAII CHAT BOT SUPPORT		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - DEF - COVID19 Response	\$00	\$513,456.00	\$00	\$0.00
<b>Total</b>		\$00	\$513,456.00	\$00	\$0.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B	52 C	52 D	52 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0		\$0.00	Select	
<b>Total:</b>					\$0.00

**Current Quarter Expenditures**

	53 A	53 B	53 C	53 D	53 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
<b>Total:</b>						\$00

**Sub Screen: Contract: 21524088**

34	Sub-Recipient Organization (Contractor)*	HAWAII CORRECTIONAL INDUSTRIES-965699994		
35	Contract Number*	21524088		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$247,100.00		
38	Contract Date *	04/28/2021		
39	Period of Performance Start Date *	04/28/2021		
40	Period of Performance End Date *	12/31/2021		
41	Primary Place of Performance Address Line 1 *	3949 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4413		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	HALO FOGGERS FOR DOD/DAGS		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - DEF - COVID19 Response	\$00	\$247,100.00	\$00	\$119,725.00
<b>Total</b>		\$00	\$247,100.00	\$00	\$119,725.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	002 - DEF - COVID19 Response	04/28/2021	06/30/2021	\$119,725.00	Personal Protective Equipment	
<b>Total:</b>						\$119,725.00

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21527018**

34	Sub-Recipient Organization (Contractor)*	STATEWIDE SAFETY SYSTEMS HAWAII, INC.-066265265		
35	Contract Number*	21527018		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$507,266.81		
38	Contract Date *	10/06/2020		
39	Period of Performance Start Date *	10/06/2020		
40	Period of Performance End Date *	12/31/2021		
41	Primary Place of Performance Address Line 1 *	3949 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4413		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	MAJESTIC DISPOSABLE MICRO-PORUS COVERALL W/HOOD		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - DEF - COVID19 Response	\$00	\$507,266.81	\$00	\$506,861.04
<b>Total</b>		\$00	\$507,266.81	\$00	\$506,861.04

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	002 - DEF - COVID19 Response	10/06/2020	06/30/2021	\$506,861.04	Personal Protective Equipment	
<b>Total:</b>						\$506,861.04

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00



**Sub Screen: Contract: 69287-02**

34	Sub-Recipient Organization (Contractor)*	Roberts Hawaii Tours, Inc-094646841		
35	Contract Number*	69287-02		
36	Contract Type*	Definitive Contract		
37	Contract Amount*	\$6,624,250.20		
38	Contract Date *	12/31/2020		
39	Period of Performance Start Date *	12/31/2020		
40	Period of Performance End Date *	06/30/2021		
41	Primary Place of Performance Address Line 1 *	3949 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4413		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	AIRPORT SCREENING		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - DEF - COVID19 Response	\$00	\$6,624,250.20	\$00	\$3,463,352.80
<b>Total</b>		\$00	\$6,624,250.20	\$00	\$3,463,352.80

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	002 - DEF - COVID19 Response	12/31/2020	06/30/2021	\$3,463,352.80	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$3,463,352.80

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21527074**

34	Sub-Recipient Organization (Contractor)*	eWorld Enterprise Solutions, Inc-162168186		
35	Contract Number*	21527074		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$1,133,280.00		
38	Contract Date *	04/13/2021		
39	Period of Performance Start Date *	04/13/2021		
40	Period of Performance End Date *	12/31/2021		
41	Primary Place of Performance Address Line 1 *	3949 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4413		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	MOA BETWEEN ETS/DOD SAFE TRAVELS HELP DESK SERVICES SUPPORT TEAM		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - DEF - COVID19 Response	\$00	\$1,133,280.00	\$00	\$377,760.00
<b>Total</b>		\$00	\$1,133,280.00	\$00	\$377,760.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B	52 C	52 D	52 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	002 - DEF - COVID19 Response	04/13/2021	06/30/2021	\$377,760.00	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$377,760.00

**Current Quarter Expenditures**

	53 A	53 B	53 C	53 D	53 E		
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21527075**

34	Sub-Recipient Organization (Contractor)*	INTERNATIONAL LIFE SUPPORT, INC.-045026044		
35	Contract Number*	21527075		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$1,200,000.00		
38	Contract Date *	04/12/2021		
39	Period of Performance Start Date *	04/12/2021		
40	Period of Performance End Date *	12/31/2021		
41	Primary Place of Performance Address Line 1 *	3949 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4413		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	DOH JAN 2021-JUN 2021 COVID TESTING		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - DEF - COVID19 Response	\$00	\$1,200,000.00	\$00	\$461,154.69
<b>Total</b>		\$00	\$1,200,000.00	\$00	\$461,154.69

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	002 - DEF - COVID19 Response	04/13/2021	06/30/2021	\$461,154.69	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$461,154.69

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21527076**

34	Sub-Recipient Organization (Contractor)*	HAWAII VISITORS AND CONVENTION BUREAU-003196271		
35	Contract Number*	21527076		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$600,000.00		
38	Contract Date *	04/13/2021		
39	Period of Performance Start Date *	04/13/2021		
40	Period of Performance End Date *	12/31/2021		
41	Primary Place of Performance Address Line 1 *	3949 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4413		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	MOA BETWEEN HTA/DOD CALL CENTER		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - DEF - COVID19 Response	\$00	\$600,000.00	\$00	\$461,154.69
<b>Total</b>		\$00	\$600,000.00	\$00	\$461,154.69

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	002 - DEF - COVID19 Response	04/13/2021	06/30/2021	\$461,154.69	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$461,154.69

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21527077**

34	Sub-Recipient Organization (Contractor)*	Carahsoft Technology Corp-88365767		
35	Contract Number*	21527077		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$225,050.00		
38	Contract Date *	04/15/2021		
39	Period of Performance Start Date *	04/15/2021		
40	Period of Performance End Date *	12/31/2021		
41	Primary Place of Performance Address Line 1 *	3949 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4413		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	SAFE TRAVELS HAWAII PROGRAM AND OTHER COVID-19 COSTS		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - DEF - COVID19 Response	\$00	\$225,050.00	\$00	\$0.00
<b>Total</b>		\$00	\$225,050.00	\$00	\$0.00

**Previous Expenditures (All previous quarters)**

	52 A	52 B	52 C	52 D	52 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0		\$0.00	Select	
<b>Total:</b>					\$0.00

**Current Quarter Expenditures**

	53 A	53 B	53 C	53 D	53 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
<b>Total:</b>						\$00

**Sub Screen: Contract: 21527078**

34	Sub-Recipient Organization (Contractor)*	Verizon-956049563		
35	Contract Number*	21527078		
36	Contract Type*	Purchase Order		
37	Contract Amount*			\$58,000.00
38	Contract Date *	04/22/2021		
39	Period of Performance Start Date *	04/22/2021		
40	Period of Performance End Date *	12/31/2021		
41	Primary Place of Performance Address Line 1 *	3949 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4413		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *			
50	Contract Description *	SAFE TRAVELS-CELLULAR SERVICE		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - DEF - COVID19 Response	\$00	\$58,000.00	\$00	\$25,478.97
<b>Total</b>		\$00	\$58,000.00	\$00	\$25,478.97

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	002 - DEF - COVID19 Response	04/22/2021	06/30/2021	\$25,478.97	COVID-19 Testing and Contact Tracing	
<b>Total:</b>						\$25,478.97

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: 21350058**

34	Sub-Recipient Organization (Contractor)*	HAWAII DEPARTMENT OF TRANSPORTATION HARBORS DIVISION-034231369		
35	Contract Number*	21350058		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$188,475.50		
38	Contract Date *	05/21/2021		
39	Period of Performance Start Date *	05/21/2021		
40	Period of Performance End Date *	12/31/2021		
41	Primary Place of Performance Address Line 1 *	3949 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4413		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	MOA USE OF SOH DOT HARBORS FACILITIES		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - DEF - SCRF Personal Protection Equipment	\$00	\$188,475.50	\$00	\$46,206.25
<b>Total</b>		\$00	\$188,475.50	\$00	\$46,206.25

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - DEF - SCRF Personal Protection Equipment	05/21/2021	06/30/2021	\$46,206.25	Personal Protective Equipment	
<b>Total:</b>						\$46,206.25

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: JM6605 - A**

34	Sub-Recipient Organization (Contractor)*	HAWAII DEPARTMENT OF TRANSPORTATION HARBORS DIVISION-034231369		
35	Contract Number*	JM6605 - A		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$134,481.27		
38	Contract Date *	05/26/2021		
39	Period of Performance Start Date *	05/26/2021		
40	Period of Performance End Date *	12/31/2021		
41	Primary Place of Performance Address Line 1 *	3949 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4413		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	MOA WAREHOUSE UTILITIES AND RENTAL		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - DEF - SCRF Personal Protection Equipment	\$00	\$134,481.27	\$00	\$134,481.27
<b>Total</b>		\$00	\$134,481.27	\$00	\$134,481.27

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - DEF - SCRF Personal Protection Equipment	05/26/2021	06/30/2021	\$134,481.27	Personal Protective Equipment	
<b>Total:</b>						\$134,481.27

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00



## Sub Screen: Contract: JS5466

34	Sub-Recipient Organization (Contractor)*	HAWAII DEPARTMENT OF TRANSPORTATION HARBORS DIVISION-034231369		
35	Contract Number*	JS5466		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$91,666.00		
38	Contract Date *	05/26/2021		
39	Period of Performance Start Date *	05/26/2021		
40	Period of Performance End Date *	12/31/2021		
41	Primary Place of Performance Address Line 1 *	3949 Diamond Head Rd		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96816-4413		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	MOA USE OF SOH DOT HARBORS FACILITIES APR 2021 TO MAY 2021		

### Obligations

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - DEF - SCRF Personal Protection Equipment	\$00	\$91,666.00	\$00	\$91,666.00
<b>Total</b>		\$00	\$91,666.00	\$00	\$91,666.00

### Previous Expenditures (All previous quarters)

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - DEF - SCRF Personal Protection Equipment	06/26/2021	06/30/2021	\$91,666.00	Personal Protective Equipment	
<b>Total:</b>						\$91,666.00

### Current Quarter Expenditures

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Contract: PQ55095 (corrected)**

34	Sub-Recipient Organization (Contractor)*	Verizon-956049563		
35	Contract Number*	PQ55095 (corrected)		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$219,878.40		
38	Contract Date *	09/24/2020		
39	Period of Performance Start Date *	09/24/2020		
40	Period of Performance End Date *	06/30/2021		
41	Primary Place of Performance Address Line 1 *	1390 Miller St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2493		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Distance learning devices and services		

**Obligations**

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - EDU - Distance Learning Equipment	\$00	\$219,878.40	\$00	\$219,878.40
<b>Total</b>		\$00	\$219,878.40	\$00	\$219,878.40

**Previous Expenditures (All previous quarters)**

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - EDU - Distance Learning Equipment	09/24/2020	06/30/2021	\$219,878.40	Facilitating Distance Learning	
<b>Total:</b>						\$219,878.40

**Current Quarter Expenditures**

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

### Sub Screen: Contract: 100-1016-01

34	Sub-Recipient Organization (Contractor)*	KMH LLP-42-153962		
35	Contract Number*	100-1016-01		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$186,541.05		
38	Contract Date *	12/31/2020		
39	Period of Performance Start Date *	12/31/2020		
40	Period of Performance End Date *	12/31/2021		
41	Primary Place of Performance Address Line 1 *	250 S Hotel St		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96813-2831		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Review of CARE Act expenditures		

### Obligations

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	007 - BED - Hawaii Business Pivot Grant Program	\$50,566.45	\$186,541.05	\$50,566.45	\$186,541.05
<b>Total</b>		\$50,566.45	\$186,541.05	\$50,566.45	\$186,541.05

### Previous Expenditures (All previous quarters)

	52 A	52 B		52 C	52 D	52 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	007 - BED - Hawaii Business Pivot Grant Program	12/31/2020	09/30/2021	\$135,974.60	Administrative Expenses	
<b>Total:</b>						\$135,974.60

### Current Quarter Expenditures

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	007 - BED - Hawaii Business Pivot Grant Program	10/01/2021	12/31/2021	\$50,566.45	Administrative Expenses		
<b>Total:</b>							\$50,566.45

### Sub Screen: Contract: JV11011

34	Sub-Recipient Organization (Contractor)*	Securitas Security Services USA, Inc.-710912217		
35	Contract Number*	JV11011		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$1,499,785.82		
38	Contract Date *	06/01/2020		
39	Period of Performance Start Date *	06/01/2020		
40	Period of Performance End Date *	12/31/2021		
41	Primary Place of Performance Address Line 1 *	400 Rodgers Blvd Ste 700		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96819-1880		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Provide security service for safety checking		

### Obligations

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - DOT - SCRF Airport Sreening and Health Assurance Security	\$1,499,785.82	\$1,499,785.82	\$1,499,785.82	\$1,499,785.82
<b>Total</b>		\$1,499,785.82	\$1,499,785.82	\$1,499,785.82	\$1,499,785.82

### Previous Expenditures (All previous quarters)

	52 A	52 B	52 C	52 D	52 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1			\$0.00		
<b>Total:</b>					\$00

### Current Quarter Expenditures

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	001 - DOT - SCRF Airport Sreening and Health Assurance Security	06/01/2020	06/30/2021	\$1,499,785.82	COVID-19 Testing and Contact Tracing		
<b>Total:</b>						\$1,499,785.82	

### Sub Screen: Contract: JV11011(B)

34	Sub-Recipient Organization (Contractor)*	Allied Universal Security Services-DOTAIR01		
35	Contract Number*	JV11011(B)		
36	Contract Type*	Purchase Order		
37	Contract Amount*	\$137,410.67		
38	Contract Date *	07/01/2021		
39	Period of Performance Start Date *	07/01/2021		
40	Period of Performance End Date *	12/31/2021		
41	Primary Place of Performance Address Line 1 *	400 Rodgers Blvd Ste 700		
42	Primary Place of Performance Address Line 2			
43	Primary Place of Performance Address Line 3			
44	Primary Place of Performance City Name *	Honolulu		
45	Primary Place of Performance State Code *	HI		
46	Primary Place of Performance Zip+4 *	96819-1880		Verified
47	Primary Place of Performance Country Name *	United States		
48	Primary Place of Performance Country Code *	USA		
49	Primary Place of Performance Congressional District *	1		
50	Contract Description *	Provide security service for safety checking		

### Obligations

	51 A	51 B	51 C	51 D	51 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - DOT - SCRF Airport Sreening and Health Assurance Security	\$137,410.67	\$137,410.67	\$137,410.67	\$137,410.67
<b>Total</b>		\$137,410.67	\$137,410.67	\$137,410.67	\$137,410.67

### Previous Expenditures (All previous quarters)

	52 A	52 B	52 C	52 D	52 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1			\$0.00		
<b>Total:</b>					\$00

### Current Quarter Expenditures

	53 A	53 B		53 C	53 D	53 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	001 - DOT - SCRF Airport Sreening and Health Assurance Security	09/01/2021	12/31/2021	\$137,410.67	COVID-19 Testing and Contact Tracing		
<b>Total:</b>							\$137,410.67

### Sub Screen: Award: 143-1021

54	Sub-Recipient Organization (Awardee)*	KAMANU COMPOSITES LLC-013241433		
55	Award Number*	143-1021		
56	Award Payment Method*	Lump Sum Payment(s)		
57	Amount of Award *			\$500,000.00
58	Award Date *	09/14/2020		
59	Period of Performance Start Date *	09/14/2020		
60	Period of Performance End Date *	12/30/2020		
61	Primary Place of Performance Address Line 1 *	905 Kalaniana'ole Hwy Spc 601		
62	Primary Place of Performance Address Line 2			
63	Primary Place of Performance Address Line 3			
64	Primary Place of Performance City Name *	Kailua		
65	Primary Place of Performance State Code *	HI		
66	Primary Place of Performance Zip+4 *	96734-4664		
67	Primary Place of Performance Country Name *	United States		
68	Primary Place of Performance Country Code *	USA		
69	Primary Place of Performance Congressional District *	2		
70	Award Description *	Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE.		

### Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	\$00	\$500,000.00	\$00	\$500,000.00
<b>Total</b>		\$00	\$500,000.00	\$00	\$500,000.00

### Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	09/14/2020	09/30/2020	\$350,000.00	Personal Protective Equipment	
Line 2	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	09/14/2020	12/30/2020	\$150,000.00	Personal Protective Equipment	
Line 3	0			\$0.00	Select	
<b>Total:</b>						\$500,000.00

### Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
<b>Total:</b>						\$00

### Sub Screen: Award: 143-1022

54	Sub-Recipient Organization (Awardee)*	Lanikai Brewing Company LLC-064594973		
55	Award Number*	143-1022		
56	Award Payment Method*	Lump Sum Payment(s)		
57	Amount of Award *			\$236,797.00
58	Award Date *	09/14/2020		
59	Period of Performance Start Date *	09/14/2020		
60	Period of Performance End Date *	12/30/2020		
61	Primary Place of Performance Address Line 1 *	175 Hamakua Dr		
62	Primary Place of Performance Address Line 2			
63	Primary Place of Performance Address Line 3			
64	Primary Place of Performance City Name *	Kailua		
65	Primary Place of Performance State Code *	HI		
66	Primary Place of Performance Zip+4 *	96734-2808		
67	Primary Place of Performance Country Name *	United States		
68	Primary Place of Performance Country Code *	USA		
69	Primary Place of Performance Congressional District *	2		
70	Award Description *	Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE.		

### Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	\$00	\$236,797.00	\$00	\$236,797.00
<b>Total</b>		\$00	\$236,797.00	\$00	\$236,797.00

### Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	09/14/2020	09/30/2020	\$177,598.00	Personal Protective Equipment	
Line 2	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	12/11/2020	12/11/2020	\$59,199.00	Personal Protective Equipment	
Line 3	0			\$0.00	Select	
<b>Total:</b>						\$236,797.00

### Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
<b>Total:</b>						\$00

### Sub Screen: Award: 143-1023

54	Sub-Recipient Organization (Awardee)*	MIN PLASTICS & SUPPLY INC-009199035		
55	Award Number*	143-1023		
56	Award Payment Method*	Lump Sum Payment(s)		
57	Amount of Award *			\$500,000.00
58	Award Date *	09/14/2020		
59	Period of Performance Start Date *	09/14/2020		
60	Period of Performance End Date *	12/30/2020		
61	Primary Place of Performance Address Line 1 *	921 Kaamahu Pl		
62	Primary Place of Performance Address Line 2			
63	Primary Place of Performance Address Line 3			
64	Primary Place of Performance City Name *	Honolulu		
65	Primary Place of Performance State Code *	HI		
66	Primary Place of Performance Zip+4 *	96817-4621		
67	Primary Place of Performance Country Name *	United States		
68	Primary Place of Performance Country Code *	USA		
69	Primary Place of Performance Congressional District *	1		
70	Award Description *	Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE.		

### Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	\$00	\$500,000.00	\$00	\$500,000.00
<b>Total</b>		\$00	\$500,000.00	\$00	\$500,000.00

### Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	09/14/2020	09/30/2020	\$250,000.00	Personal Protective Equipment	
Line 2	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	10/23/2020	12/30/2020	\$250,000.00	Personal Protective Equipment	
Line 3	0			\$0.00	Select	
<b>Total:</b>						\$500,000.00

### Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
<b>Total:</b>						\$00



### Sub Screen: Award: 143-1037

54	Sub-Recipient Organization (Awardee)*	Hawaiian Kine Trading Co LLC-081239292		
55	Award Number*	143-1037		
56	Award Payment Method*	Lump Sum Payment(s)		
57	Amount of Award *			\$500,000.00
58	Award Date *	10/19/2020		
59	Period of Performance Start Date *	10/19/2020		
60	Period of Performance End Date *	12/30/2020		
61	Primary Place of Performance Address Line 1 *	120 Sand Island Access Rd Ste 4		
62	Primary Place of Performance Address Line 2			
63	Primary Place of Performance Address Line 3			
64	Primary Place of Performance City Name *	Honolulu		
65	Primary Place of Performance State Code *	HI		
66	Primary Place of Performance Zip+4 *	96819-4920		
67	Primary Place of Performance Country Name *	United States		
68	Primary Place of Performance Country Code *	USA		
69	Primary Place of Performance Congressional District *	1		
70	Award Description *	"Masks (surgical) face coverings (non-surgical) Respirators (PAPR, CAPR, N95)"		

### Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	\$00	\$500,000.00	\$00	\$500,000.00
<b>Total</b>		\$00	\$500,000.00	\$00	\$500,000.00

### Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	10/19/2020	12/30/2020	\$500,000.00	Personal Protective Equipment	
<b>Total:</b>						\$500,000.00

### Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes					
74	Non-Compliance Explanation						
	75 A	75 B	75 C	75 D	75 E		
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

### Sub Screen: Award: 143-1038

54	Sub-Recipient Organization (Awardee)*	Aloha Medical Supply of the Pacific-012759888		
55	Award Number*	143-1038		
56	Award Payment Method*	Lump Sum Payment(s)		
57	Amount of Award *			\$500,000.00
58	Award Date *	10/19/2020		
59	Period of Performance Start Date *	10/19/2020		
60	Period of Performance End Date *	12/30/2020		
61	Primary Place of Performance Address Line 1 *	333 Keahole St Ste 2B9		
62	Primary Place of Performance Address Line 2			
63	Primary Place of Performance Address Line 3			
64	Primary Place of Performance City Name *	Honolulu		
65	Primary Place of Performance State Code *	HI		
66	Primary Place of Performance Zip+4 *	96825-3426		
67	Primary Place of Performance Country Name *	United States		
68	Primary Place of Performance Country Code *	USA		
69	Primary Place of Performance Congressional District *	1		
70	Award Description *	Gowns, Masks/Face Coverings, Coveralls		

### Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	\$00	\$500,000.00	\$00	\$500,000.00
<b>Total</b>		\$00	\$500,000.00	\$00	\$500,000.00

### Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	10/19/2020	12/30/2020	\$500,000.00	Personal Protective Equipment	
Line 2	0			\$0.00	Select	
<b>Total:</b>						\$500,000.00

### Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes				
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

### Sub Screen: Award: 143-1074

54	Sub-Recipient Organization (Awardee)*	Anne Namba Designs-607810397		
55	Award Number*	143-1074		
56	Award Payment Method*	Lump Sum Payment(s)		
57	Amount of Award *			\$104,530.00
58	Award Date *	11/20/2020		
59	Period of Performance Start Date *	11/20/2020		
60	Period of Performance End Date *	12/30/2020		
61	Primary Place of Performance Address Line 1 *	324 Kamani St		
62	Primary Place of Performance Address Line 2			
63	Primary Place of Performance Address Line 3			
64	Primary Place of Performance City Name *	Honolulu		
65	Primary Place of Performance State Code *	HI		
66	Primary Place of Performance Zip+4 *	96813-5313		
67	Primary Place of Performance Country Name *	United States		
68	Primary Place of Performance Country Code *	USA		
69	Primary Place of Performance Congressional District *	1		
70	Award Description *	Masks (surgical), face coverings (non-surgical)		

### Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	\$00	\$104,530.00	\$00	\$104,530.00
<b>Total</b>		\$00	\$104,530.00	\$00	\$104,530.00

### Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	11/20/2020	12/30/2020	\$104,530.00	Personal Protective Equipment	
Line 2	0			\$0.00	Select	
<b>Total:</b>						\$104,530.00

### Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes					
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

### Sub Screen: Award: 143-1028

54	Sub-Recipient Organization (Awardee)*	AUMAKUA HOLDINGS INC.-839507840		
55	Award Number*	143-1028		
56	Award Payment Method*	Lump Sum Payment(s)		
57	Amount of Award *			\$498,760.59
58	Award Date *	10/08/2020		
59	Period of Performance Start Date *	10/08/2020		
60	Period of Performance End Date *	12/30/2020		
61	Primary Place of Performance Address Line 1 *	605 Lipoa Pkwy		
62	Primary Place of Performance Address Line 2			
63	Primary Place of Performance Address Line 3			
64	Primary Place of Performance City Name *	Kihei		
65	Primary Place of Performance State Code *	HI		
66	Primary Place of Performance Zip+4 *	96753-6947		
67	Primary Place of Performance Country Name *	United States		
68	Primary Place of Performance Country Code *	USA		
69	Primary Place of Performance Congressional District *	2		
70	Award Description *	"Alcohol-based hand rub Disinfectants Cleaning & Sanitizing Products"		

### Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	\$00	\$498,760.59	\$00	\$498,760.59
<b>Total</b>		\$00	\$498,760.59	\$00	\$498,760.59

### Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	10/08/2020	12/30/2020	\$498,760.59	Personal Protective Equipment	
<b>Total:</b>						\$498,760.59

### Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes				
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
<b>Total:</b>						\$00

### Sub Screen: Award: 143-1070

54	Sub-Recipient Organization (Awardee)*	CLOSET SYSTEMS SUPPLY, LLC-117709223	
55	Award Number*	143-1070	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$212,500.00
58	Award Date *	11/19/2020	
59	Period of Performance Start Date *	11/19/2020	
60	Period of Performance End Date *	12/30/2020	
61	Primary Place of Performance Address Line 1 *	1707 Mahani Loop	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Honolulu	
65	Primary Place of Performance State Code *	HI	
66	Primary Place of Performance Zip+4 *	96819-2833	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	1	
70	Award Description *	Gowns,Masks/Face Coverings, Coveralls	

### Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	\$00	\$212,500.00	\$00	\$212,500.00
<b>Total</b>		\$00	\$212,500.00	\$00	\$212,500.00

### Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	11/19/2020	12/30/2020	\$212,500.00	Personal Protective Equipment	
Line 2	0			\$0.00	Select	
<b>Total:</b>						\$212,500.00

### Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes				
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Award: 143-1045**

54	Sub-Recipient Organization (Awardee)*	CORADORABLES LLC-079861141		
55	Award Number*	143-1045		
56	Award Payment Method*	Lump Sum Payment(s)		
57	Amount of Award *			\$60,220.00
58	Award Date *	10/26/2020		
59	Period of Performance Start Date *	10/26/2020		
60	Period of Performance End Date *	12/30/2020		
61	Primary Place of Performance Address Line 1 *	1707 Mahani Loop		
62	Primary Place of Performance Address Line 2			
63	Primary Place of Performance Address Line 3			
64	Primary Place of Performance City Name *	Honolulu		
65	Primary Place of Performance State Code *	HI		
66	Primary Place of Performance Zip+4 *	96819-2833		
67	Primary Place of Performance Country Name *	United States		
68	Primary Place of Performance Country Code *	USA		
69	Primary Place of Performance Congressional District *	1		
70	Award Description *	"Gowns Masks/Face Coverings Coveralls"		

**Obligations**

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	\$00	\$60,220.00	\$00	\$60,220.00
<b>Total</b>		\$00	\$60,220.00	\$00	\$60,220.00

**Previous Expenditures (All previous quarters)**

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	10/26/2020	12/30/2020	\$60,220.00	Personal Protective Equipment	
<b>Total:</b>						\$60,220.00

**Current Quarter Expenditures**

73	Is awardee complying with terms and conditions of the grant?*		Yes				
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

### Sub Screen: Award: 143-1052

54	Sub-Recipient Organization (Awardee)*	D&L Fashions Inc-602325649		
55	Award Number*	143-1052		
56	Award Payment Method*	Lump Sum Payment(s)		
57	Amount of Award *			\$272,087.00
58	Award Date *	11/10/2020		
59	Period of Performance Start Date *	11/10/2020		
60	Period of Performance End Date *	12/30/2020		
61	Primary Place of Performance Address Line 1 *	2002 Kahai St		
62	Primary Place of Performance Address Line 2			
63	Primary Place of Performance Address Line 3			
64	Primary Place of Performance City Name *	Honolulu		
65	Primary Place of Performance State Code *	HI		
66	Primary Place of Performance Zip+4 *	96819-2272		
67	Primary Place of Performance Country Name *	United States		
68	Primary Place of Performance Country Code *	USA		
69	Primary Place of Performance Congressional District *	1		
70	Award Description *	"Masks (surgical) face coverings (non-surgical)"		

### Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	\$00	\$272,087.00	\$00	\$272,087.00
<b>Total</b>		\$00	\$272,087.00	\$00	\$272,087.00

### Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	11/20/2020	12/30/2020	\$272,087.00	Personal Protective Equipment	
<b>Total:</b>						\$272,087.00

### Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes				
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

### Sub Screen: Award: 143-1072

54	Sub-Recipient Organization (Awardee)*	Fab Works LLC-087132964		
55	Award Number*	143-1072		
56	Award Payment Method*	Lump Sum Payment(s)		
57	Amount of Award *			\$213,656.00
58	Award Date *	11/19/2020		
59	Period of Performance Start Date *	11/19/2020		
60	Period of Performance End Date *	12/30/2020		
61	Primary Place of Performance Address Line 1 *	2131 S Beretania St		
62	Primary Place of Performance Address Line 2	Ground Floor		
63	Primary Place of Performance Address Line 3			
64	Primary Place of Performance City Name *	Honolulu		
65	Primary Place of Performance State Code *	HI		
66	Primary Place of Performance Zip+4 *	96826-1418		
67	Primary Place of Performance Country Name *	United States		
68	Primary Place of Performance Country Code *	USA		
69	Primary Place of Performance Congressional District *	1		
70	Award Description *	"Eye/Face Shields Goggles"		

### Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	\$00	\$213,656.00	\$00	\$213,656.00
<b>Total</b>		\$00	\$213,656.00	\$00	\$213,656.00

### Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	11/19/2020	12/30/2020	\$213,656.00	Personal Protective Equipment	
<b>Total:</b>						\$213,656.00

### Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes					
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00



### Sub Screen: Award: 143-1068

54	Sub-Recipient Organization (Awardee)*	Friends of Waialua Robotics-094347298	
55	Award Number*	143-1068	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$100,000.00
58	Award Date *	11/19/2020	
59	Period of Performance Start Date *	11/19/2020	
60	Period of Performance End Date *	12/30/2020	
61	Primary Place of Performance Address Line 1 *	94-200 Meki Pl	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Waipahu	
65	Primary Place of Performance State Code *	HI	
66	Primary Place of Performance Zip+4 *	96797-5815	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	2	
70	Award Description *	"Eye/Face Shields Goggles Face Masks/Coverings (surgical/non)"	

### Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	\$00	\$100,000.00	\$00	\$100,000.00
<b>Total</b>		\$00	\$100,000.00	\$00	\$100,000.00

### Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	11/19/2020	12/30/2020	\$100,000.00	Personal Protective Equipment	
<b>Total:</b>						\$100,000.00

### Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes					
74	Non-Compliance Explanation						
	75 A	75 B	75 C	75 D	75 E		
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

### Sub Screen: Award: 143-1029

54	Sub-Recipient Organization (Awardee)*	H NU PHOTONICS LLC-788623473	
55	Award Number*	143-1029	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$357,202.68
58	Award Date *	10/08/2020	
59	Period of Performance Start Date *	10/08/2020	
60	Period of Performance End Date *	12/30/2020	
61	Primary Place of Performance Address Line 1 *	350 Hoohana St	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Kahului	
65	Primary Place of Performance State Code *	HI	
66	Primary Place of Performance Zip+4 *	96732-2931	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *		2
70	Award Description *	Tracking & Authenticating Tag for PPE	

### Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	\$00	\$357,202.68	\$00	\$357,202.68
<b>Total</b>		\$00	\$357,202.68	\$00	\$357,202.68

### Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	10/08/2020	12/30/2020	\$357,202.68	Personal Protective Equipment	
<b>Total:</b>						\$357,202.68

### Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes				
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

### Sub Screen: Award: 143-1036

54	Sub-Recipient Organization (Awardee)*	Hanalei Spirits-081330667	
55	Award Number*	143-1036	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$407,358.00
58	Award Date *	10/19/2020	
59	Period of Performance Start Date *	10/19/2020	
60	Period of Performance End Date *	12/30/2020	
61	Primary Place of Performance Address Line 1 *	4241 Kahili Makai St	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Kilauea	
65	Primary Place of Performance State Code *	HI	
66	Primary Place of Performance Zip+4 *	96754-5412	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *		2
70	Award Description *	PPE	

### Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	\$00	\$407,358.00	\$00	\$407,358.00
<b>Total</b>		\$00	\$407,358.00	\$00	\$407,358.00

### Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	10/19/2020	12/30/2020	\$407,358.00	Personal Protective Equipment	
Line 2	0			\$0.00	Select	
<b>Total:</b>						\$407,358.00

### Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes				
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Award: 143-1053**

54	Sub-Recipient Organization (Awardee)*	HNLMED LLC-117680746		
55	Award Number*	143-1053		
56	Award Payment Method*	Lump Sum Payment(s)		
57	Amount of Award *			\$500,000.00
58	Award Date *	11/10/2020		
59	Period of Performance Start Date *	11/10/2020		
60	Period of Performance End Date *	12/30/2020		
61	Primary Place of Performance Address Line 1 *	942 Punahale Pl		
62	Primary Place of Performance Address Line 2			
63	Primary Place of Performance Address Line 3			
64	Primary Place of Performance City Name *	Honolulu		
65	Primary Place of Performance State Code *	HI		
66	Primary Place of Performance Zip+4 *	96821-1822		
67	Primary Place of Performance Country Name *	United States		
68	Primary Place of Performance Country Code *	USA		
69	Primary Place of Performance Congressional District *	1		
70	Award Description *	"Masks (surgical) face coverings (non-surgical)"		

**Obligations**

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	\$00	\$500,000.00	\$00	\$500,000.00
<b>Total</b>		\$00	\$500,000.00	\$00	\$500,000.00

**Previous Expenditures (All previous quarters)**

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	11/10/2020	12/30/2020	\$500,000.00	Personal Protective Equipment	
<b>Total:</b>						\$500,000.00

**Current Quarter Expenditures**

73	Is awardee complying with terms and conditions of the grant?*	Yes					
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

### Sub Screen: Award: 143-1030

54	Sub-Recipient Organization (Awardee)*	INSIGHTPPE LLC-059944344		
55	Award Number*	143-1030		
56	Award Payment Method*	Lump Sum Payment(s)		
57	Amount of Award *			\$215,250.00
58	Award Date *	10/12/2020		
59	Period of Performance Start Date *	10/12/2020		
60	Period of Performance End Date *	12/30/2020		
61	Primary Place of Performance Address Line 1 *	2800 Woodlawn Dr Ste 288		
62	Primary Place of Performance Address Line 2			
63	Primary Place of Performance Address Line 3			
64	Primary Place of Performance City Name *	Honolulu		
65	Primary Place of Performance State Code *	HI		
66	Primary Place of Performance Zip+4 *	96822-1862		
67	Primary Place of Performance Country Name *	United States		
68	Primary Place of Performance Country Code *	USA		
69	Primary Place of Performance Congressional District *	1		
70	Award Description *	"Eye/Face Shields Goggles"		

### Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	\$00	\$215,250.00	\$00	\$215,250.00
<b>Total</b>		\$00	\$215,250.00	\$00	\$215,250.00

### Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	10/13/2020	12/30/2020	\$215,250.00	Personal Protective Equipment	
<b>Total:</b>						\$215,250.00

### Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes				
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Award: 143-1056**

54	Sub-Recipient Organization (Awardee)*	Intellectual AG LLC-084442238
55	Award Number*	143-1056
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$115,000.00
58	Award Date *	11/19/2020
59	Period of Performance Start Date *	11/19/2020
60	Period of Performance End Date *	12/30/2020
61	Primary Place of Performance Address Line 1 *	1350 S King St Ste 230
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Honolulu
65	Primary Place of Performance State Code *	HI
66	Primary Place of Performance Zip+4 *	96814-2008
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	"Alcohol-based hand rub Disinfectants Cleaning & Sanitizing Products"

**Obligations**

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	\$00	\$115,000.00	\$00	\$115,000.00
<b>Total</b>		\$00	\$115,000.00	\$00	\$115,000.00

**Previous Expenditures (All previous quarters)**

	72 A	72 B	72 C	72 D	72 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	11/19/2020	12/30/2020	\$115,000.00	Personal Protective Equipment	
<b>Total:</b>						\$115,000.00

**Current Quarter Expenditures**

73	Is awardee complying with terms and conditions of the grant?*	Yes				
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
<b>Total:</b>						\$00

### Sub Screen: Award: 143-1073

54	Sub-Recipient Organization (Awardee)*	ISLAND SLIPPER FACTORY, LIMITED-009198987		
55	Award Number*	143-1073		
56	Award Payment Method*	Lump Sum Payment(s)		
57	Amount of Award *			\$245,015.00
58	Award Date *	11/24/2020		
59	Period of Performance Start Date *	11/24/2020		
60	Period of Performance End Date *	12/30/2020		
61	Primary Place of Performance Address Line 1 *	98-711 Kuahao Pl		
62	Primary Place of Performance Address Line 2			
63	Primary Place of Performance Address Line 3			
64	Primary Place of Performance City Name *	Pearl City		
65	Primary Place of Performance State Code *	HI		
66	Primary Place of Performance Zip+4 *	96782-3155		
67	Primary Place of Performance Country Name *	United States		
68	Primary Place of Performance Country Code *	USA		
69	Primary Place of Performance Congressional District *	1		
70	Award Description *	"Face Coverings Gowns/Scrubs Caps/Shoe Coverings"		

### Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	\$00	\$245,015.00	\$00	\$245,015.00
<b>Total</b>		\$00	\$245,015.00	\$00	\$245,015.00

### Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	11/24/2020	12/30/2020	\$245,015.00	Personal Protective Equipment	
<b>Total:</b>						\$245,015.00

### Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes				
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
<b>Total:</b>						\$00

**Sub Screen: Award: 143-1054**

54	Sub-Recipient Organization (Awardee)*	JALENEKANANI, INC.-078402454
55	Award Number*	143-1054
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$444,300.00
58	Award Date *	11/10/2020
59	Period of Performance Start Date *	11/10/2020
60	Period of Performance End Date *	12/30/2020
61	Primary Place of Performance Address Line 1 *	91-222 Namahoe Pl
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Kapolei
65	Primary Place of Performance State Code *	HI
66	Primary Place of Performance Zip+4 *	96707-3024
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	"Gowns Masks/Face Coverings Coveralls"

**Obligations**

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	\$00	\$444,300.00	\$00	\$444,300.00
<b>Total</b>		\$00	\$444,300.00	\$00	\$444,300.00

**Previous Expenditures (All previous quarters)**

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	11/10/2020	12/30/2020	\$444,300.00	Personal Protective Equipment	
<b>Total:</b>						\$444,300.00

**Current Quarter Expenditures**

73	Is awardee complying with terms and conditions of the grant?*	Yes					
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00



### Sub Screen: Award: 143-1055

54	Sub-Recipient Organization (Awardee)*	Kookaburra LLC-363606612		
55	Award Number*	143-1055		
56	Award Payment Method*	Lump Sum Payment(s)		
57	Amount of Award *			\$224,640.00
58	Award Date *	11/19/2020		
59	Period of Performance Start Date *	11/19/2020		
60	Period of Performance End Date *	12/30/2020		
61	Primary Place of Performance Address Line 1 *	820 W Hind Dr Unit 240040		
62	Primary Place of Performance Address Line 2			
63	Primary Place of Performance Address Line 3			
64	Primary Place of Performance City Name *	Honolulu		
65	Primary Place of Performance State Code *	HI		
66	Primary Place of Performance Zip+4 *	96824-1801		
67	Primary Place of Performance Country Name *	United States		
68	Primary Place of Performance Country Code *	USA		
69	Primary Place of Performance Congressional District *	1		
70	Award Description *	"Gowns Masks/Face Coverings Coveralls"		

### Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	\$00	\$224,640.00	\$00	\$224,640.00
<b>Total</b>		\$00	\$224,640.00	\$00	\$224,640.00

### Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	11/19/2020	12/30/2020	\$224,640.00	Personal Protective Equipment	
<b>Total:</b>						\$224,640.00

### Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes				
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Award: 143-1040**

54	Sub-Recipient Organization (Awardee)*	Koolau Spirits LLC-081321666		
55	Award Number*	143-1040		
56	Award Payment Method*	Lump Sum Payment(s)		
57	Amount of Award *			\$161,145.00
58	Award Date *	10/20/2020		
59	Period of Performance Start Date *	10/20/2020		
60	Period of Performance End Date *	12/30/2020		
61	Primary Place of Performance Address Line 1 *	905 Kalaniana'ole Hwy Spc 5014		
62	Primary Place of Performance Address Line 2			
63	Primary Place of Performance Address Line 3			
64	Primary Place of Performance City Name *	Kailua		
65	Primary Place of Performance State Code *	HI		
66	Primary Place of Performance Zip+4 *	96734-4669		
67	Primary Place of Performance Country Name *	United States		
68	Primary Place of Performance Country Code *	USA		
69	Primary Place of Performance Congressional District *	2		
70	Award Description *	Alcohol-based hand rub		

**Obligations**

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	\$00	\$161,145.00	\$00	\$161,145.00
<b>Total</b>		\$00	\$161,145.00	\$00	\$161,145.00

**Previous Expenditures (All previous quarters)**

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	10/20/2020	12/30/2020	\$161,145.00	Personal Protective Equipment	
<b>Total:</b>						\$161,145.00

**Current Quarter Expenditures**

73	Is awardee complying with terms and conditions of the grant?*		Yes				
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

### Sub Screen: Award: 143-1080

54	Sub-Recipient Organization (Awardee)*	KREATIVE KAMAAINA ENTERPRISES, LLC-118327779		
55	Award Number*	143-1080		
56	Award Payment Method*	Lump Sum Payment(s)		
57	Amount of Award *			\$260,946.00
58	Award Date *	11/24/2020		
59	Period of Performance Start Date *	11/24/2020		
60	Period of Performance End Date *	12/30/2020		
61	Primary Place of Performance Address Line 1 *	1330 S Beretania St Ste 303		
62	Primary Place of Performance Address Line 2			
63	Primary Place of Performance Address Line 3			
64	Primary Place of Performance City Name *	Honolulu		
65	Primary Place of Performance State Code *	HI		
66	Primary Place of Performance Zip+4 *	96814-1500		
67	Primary Place of Performance Country Name *	United States		
68	Primary Place of Performance Country Code *	USA		
69	Primary Place of Performance Congressional District *	1		
70	Award Description *	"Masks (surgical) face coverings (non-surgical)"		

### Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	\$00	\$260,946.00	\$00	\$260,946.00
<b>Total</b>		\$00	\$260,946.00	\$00	\$260,946.00

### Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	11/24/2020	12/30/2020	\$260,946.00	Personal Protective Equipment	
<b>Total:</b>						\$260,946.00

### Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes				
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

### Sub Screen: Award: 143-1031

54	Sub-Recipient Organization (Awardee)*	Kuleana Rum Works-080996182		
55	Award Number*	143-1031		
56	Award Payment Method*	Lump Sum Payment(s)		
57	Amount of Award *			\$499,797.00
58	Award Date *	10/08/2020		
59	Period of Performance Start Date *	10/08/2020		
60	Period of Performance End Date *	12/30/2020		
61	Primary Place of Performance Address Line 1 *	65-1235A Opelo Rd # 2		
62	Primary Place of Performance Address Line 2			
63	Primary Place of Performance Address Line 3			
64	Primary Place of Performance City Name *	Kamuela		
65	Primary Place of Performance State Code *	HI		
66	Primary Place of Performance Zip+4 *	96743-8401		
67	Primary Place of Performance Country Name *	United States		
68	Primary Place of Performance Country Code *	USA		
69	Primary Place of Performance Congressional District *	2		
70	Award Description *	"Alcohol-based hand rub Disinfectants Cleaning & Sanitizing Products"		

### Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	\$00	\$499,797.00	\$00	\$499,797.00
<b>Total</b>		\$00	\$499,797.00	\$00	\$499,797.00

### Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	10/08/2020	12/30/2020	\$499,797.00	Personal Protective Equipment	
<b>Total:</b>						\$499,797.00

### Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes				
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
<b>Total:</b>						\$00

### Sub Screen: Award: 143-1032

54	Sub-Recipient Organization (Awardee)*	Lanikai Bath and Body LLC-196973866		
55	Award Number*	143-1032		
56	Award Payment Method*	Lump Sum Payment(s)		
57	Amount of Award *			\$285,150.00
58	Award Date *	10/08/2020		
59	Period of Performance Start Date *	10/08/2020		
60	Period of Performance End Date *	12/30/2020		
61	Primary Place of Performance Address Line 1 *	600 Kailua Rd Ste 119		
62	Primary Place of Performance Address Line 2			
63	Primary Place of Performance Address Line 3			
64	Primary Place of Performance City Name *	Kailua		
65	Primary Place of Performance State Code *	HI		
66	Primary Place of Performance Zip+4 *	96734-2845		
67	Primary Place of Performance Country Name *	United States		
68	Primary Place of Performance Country Code *	USA		
69	Primary Place of Performance Congressional District *	2		
70	Award Description *	"Alcohol-based hand rub Disinfectants Cleaning & Sanitizing Products"		

### Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	\$00	\$285,150.00	\$00	\$285,150.00
<b>Total</b>		\$00	\$285,150.00	\$00	\$285,150.00

### Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	10/08/2020	12/30/2020	\$285,150.00	Personal Protective Equipment	
<b>Total:</b>						\$285,150.00

### Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes				
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
<b>Total:</b>						\$00

### Sub Screen: Award: 143-1075

54	Sub-Recipient Organization (Awardee)*	LUBRCO LLC-080929612		
55	Award Number*	143-1075		
56	Award Payment Method*	Lump Sum Payment(s)		
57	Amount of Award *			\$454,457.00
58	Award Date *	11/20/2020		
59	Period of Performance Start Date *	11/20/2020		
60	Period of Performance End Date *	12/30/2020		
61	Primary Place of Performance Address Line 1 *	1860 Ala Moana Blvd Apt 903		
62	Primary Place of Performance Address Line 2			
63	Primary Place of Performance Address Line 3			
64	Primary Place of Performance City Name *	Honolulu		
65	Primary Place of Performance State Code *	HI		
66	Primary Place of Performance Zip+4 *	96815-1637		
67	Primary Place of Performance Country Name *	United States		
68	Primary Place of Performance Country Code *	USA		
69	Primary Place of Performance Congressional District *	1		
70	Award Description *	"Disinfectants Cleaning & Sanitizing Products"		

### Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	\$00	\$454,457.00	\$00	\$454,457.00
<b>Total</b>		\$00	\$454,457.00	\$00	\$454,457.00

### Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	11/20/2020	12/30/2020	\$454,457.00	Personal Protective Equipment	
<b>Total:</b>						\$454,457.00

### Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes				
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

### Sub Screen: Award: 143-1041

54	Sub-Recipient Organization (Awardee)*	Ma`ema`e Hawaii LLC-055594699		
55	Award Number*	143-1041		
56	Award Payment Method*	Lump Sum Payment(s)		
57	Amount of Award *			\$409,200.00
58	Award Date *	10/20/2020		
59	Period of Performance Start Date *	10/20/2020		
60	Period of Performance End Date *	12/30/2020		
61	Primary Place of Performance Address Line 1 *	384 Puiwa Rd		
62	Primary Place of Performance Address Line 2			
63	Primary Place of Performance Address Line 3			
64	Primary Place of Performance City Name *	Honolulu		
65	Primary Place of Performance State Code *	HI		
66	Primary Place of Performance Zip+4 *	96817-1176		
67	Primary Place of Performance Country Name *	United States		
68	Primary Place of Performance Country Code *	USA		
69	Primary Place of Performance Congressional District *	1		
70	Award Description *	"Disinfectants Cleaning & Sanitizing Products"		

### Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	\$00	\$409,200.00	\$00	\$409,200.00
<b>Total</b>		\$00	\$409,200.00	\$00	\$409,200.00

### Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	10/20/2020	12/30/2020	\$409,200.00	Personal Protective Equipment	
<b>Total:</b>						\$409,200.00

### Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes				
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

### Sub Screen: Award: 143-1026

54	Sub-Recipient Organization (Awardee)*	MANULELE DISTILLERS, LLC-044450399		
55	Award Number*	143-1026		
56	Award Payment Method*	Lump Sum Payment(s)		
57	Amount of Award *			\$500,000.00
58	Award Date *	10/01/2020		
59	Period of Performance Start Date *	10/01/2020		
60	Period of Performance End Date *	12/30/2020		
61	Primary Place of Performance Address Line 1 *	92-1770 Kunia Rd # 227		
62	Primary Place of Performance Address Line 2			
63	Primary Place of Performance Address Line 3			
64	Primary Place of Performance City Name *	Kunia		
65	Primary Place of Performance State Code *	HI		
66	Primary Place of Performance Zip+4 *	96759-9997		
67	Primary Place of Performance Country Name *	United States		
68	Primary Place of Performance Country Code *	USA		
69	Primary Place of Performance Congressional District *	2		
70	Award Description *	"Alcohol-based hand rub Disinfectants Cleaning & Sanitizing Products"		

### Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	\$00	\$500,000.00	\$00	\$500,000.00
<b>Total</b>		\$00	\$500,000.00	\$00	\$500,000.00

### Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	10/01/2020	12/30/2020	\$500,000.00	Personal Protective Equipment	
<b>Total:</b>						\$500,000.00

### Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes				
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
<b>Total:</b>						\$00



### Sub Screen: Award: 143-1076

54	Sub-Recipient Organization (Awardee)*	PROTECTION FOR HUMANITY, LLC-117538812		
55	Award Number*	143-1076		
56	Award Payment Method*	Lump Sum Payment(s)		
57	Amount of Award *			\$92,050.00
58	Award Date *	11/20/2020		
59	Period of Performance Start Date *	11/20/2020		
60	Period of Performance End Date *	12/30/2020		
61	Primary Place of Performance Address Line 1 *	75-5915 Walua Rd		
62	Primary Place of Performance Address Line 2			
63	Primary Place of Performance Address Line 3			
64	Primary Place of Performance City Name *	Kailua Kona		
65	Primary Place of Performance State Code *	HI		
66	Primary Place of Performance Zip+4 *	96740-1375		
67	Primary Place of Performance Country Name *	United States		
68	Primary Place of Performance Country Code *	USA		
69	Primary Place of Performance Congressional District *	2		
70	Award Description *	"Alcohol-based hand rub Disinfectants Cleaning & Sanitizing Products"		

### Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	\$00	\$92,050.00	\$00	\$92,050.00
<b>Total</b>		\$00	\$92,050.00	\$00	\$92,050.00

### Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	11/20/2020	12/30/2020	\$92,050.00	Personal Protective Equipment	
<b>Total:</b>						\$92,050.00

### Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes				
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
<b>Total:</b>						\$00

**Sub Screen: Award: 143-1033**

54	Sub-Recipient Organization (Awardee)*	R&M Reyes Enterprise LLC-632469009		
55	Award Number*	143-1033		
56	Award Payment Method*	Lump Sum Payment(s)		
57	Amount of Award *			\$386,000.00
58	Award Date *	10/08/2020		
59	Period of Performance Start Date *	10/08/2020		
60	Period of Performance End Date *	12/30/2020		
61	Primary Place of Performance Address Line 1 *	99-899 Iwaena St Ste 111		
62	Primary Place of Performance Address Line 2			
63	Primary Place of Performance Address Line 3			
64	Primary Place of Performance City Name *	Aiea		
65	Primary Place of Performance State Code *	HI		
66	Primary Place of Performance Zip+4 *	96701-5606		
67	Primary Place of Performance Country Name *	United States		
68	Primary Place of Performance Country Code *	USA		
69	Primary Place of Performance Congressional District *	1		
70	Award Description *	"Disinfectants Cleaning & Sanitizing Products"		

**Obligations**

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	\$00	\$386,000.00	\$00	\$386,000.00
<b>Total</b>		\$00	\$386,000.00	\$00	\$386,000.00

**Previous Expenditures (All previous quarters)**

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	10/08/2020	12/30/2020	\$386,000.00	Personal Protective Equipment	
<b>Total:</b>						\$386,000.00

**Current Quarter Expenditures**

73	Is awardee complying with terms and conditions of the grant?*	Yes					
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

### Sub Screen: Award: 143-1069

54	Sub-Recipient Organization (Awardee)*	Roberto's Group Inc-832869072		
55	Award Number*	143-1069		
56	Award Payment Method*	Lump Sum Payment(s)		
57	Amount of Award *			\$471,718.00
58	Award Date *	11/19/2020		
59	Period of Performance Start Date *	11/19/2020		
60	Period of Performance End Date *	12/30/2020		
61	Primary Place of Performance Address Line 1 *	819 Moowaa St Ste 114		
62	Primary Place of Performance Address Line 2			
63	Primary Place of Performance Address Line 3			
64	Primary Place of Performance City Name *	Honolulu		
65	Primary Place of Performance State Code *	HI		
66	Primary Place of Performance Zip+4 *	96817-4432		
67	Primary Place of Performance Country Name *	United States		
68	Primary Place of Performance Country Code *	USA		
69	Primary Place of Performance Congressional District *	1		
70	Award Description *	"Masks (surgical) face coverings (non-surgical)"		

### Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	\$00	\$471,718.00	\$00	\$471,718.00
<b>Total</b>		\$00	\$471,718.00	\$00	\$471,718.00

### Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	004 - BED - Innovation Grants to Create a Supply Chain of Cleaning Supplies and PPE	11/19/2020	12/30/2020	\$471,718.00	Personal Protective Equipment	
<b>Total:</b>						\$471,718.00

### Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes				
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Transfer: 001**

94	Sub-Recipient Organization (Transferee/Government Unit)*	HAWAII, COUNTY OF-094636073
95	Transfer Number *	001
96	Transfer Amount *	\$80,009,671.00
97	Transfer Date *	06/18/2020
98	Transfer Type *	Lump Sum Payment(s)
99	Purpose Description *	To provide the County of Hawaii with direct access to funds to address necessary costs due to the public health emergency caused by the Coronavirus Disease 2019 (COVID19).

**Obligations**

	100 A	100 B	100 C	100 D	100 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001-County of Hawaii - COVID-19 Response County of Hawaii	\$00	\$80,009,671.00	\$00	\$80,009,671.00
<b>Total</b>		\$00	\$80,009,671.00	\$00	\$80,009,671.00

**Previous Expenditures (All previous quarters)**

	101 A	101 B		101 C	101 D	101 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001-County of Hawaii - COVID-19 Response County of Hawaii	03/01/2020	06/30/2020	\$3,063,276.00	Items Not Listed Above	County COVID-19 Response
Line 2	001-County of Hawaii - COVID-19 Response County of Hawaii	07/31/2020	09/30/2020	\$29,906,049.00	Items Not Listed Above	County COVID-19 Response
Line 3	001-County of Hawaii - COVID-19 Response County of Hawaii	10/01/2020	12/31/2020	\$39,957,132.00	Items Not Listed Above	County COVID-19 Response
Line 4	001-County of Hawaii - COVID-19 Response County of Hawaii	01/01/2021	03/31/2021	\$6,678,684.00	Items Not Listed Above	County COVID-19 Response
Line 5	001-County of Hawaii - COVID-19 Response County of Hawaii	04/01/2021	06/30/2021	\$404,530.00	Items Not Listed Above	County COVID-19 Response
<b>Total:</b>						\$80,009,671.00

**Current Quarter Expenditures**

0	102 A0	102 B0		102 C0	102 D0	102 E0	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Transfer: 002**

94	Sub-Recipient Organization (Transferee/Government Unit)*	MAUI, COUNTY OF-077680155
95	Transfer Number *	002
96	Transfer Amount *	\$66,598,757.00
97	Transfer Date *	06/18/2020
98	Transfer Type *	Lump Sum Payment(s)
99	Purpose Description *	To provide the County of Maui with direct access to funds to address necessary costs due to the public health emergency caused by the Coronavirus Disease 2019 (COVID19).

**Obligations**

	100 A	100 B	100 C	100 D	100 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001-County of Maui - COVID-19 Response County of Maui	\$00	\$66,598,757.00	\$00	\$66,598,757.00
<b>Total</b>		\$00	\$66,598,757.00	\$00	\$66,598,757.00

**Previous Expenditures (All previous quarters)**

	101 A	101 B		101 C	101 D	101 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001-County of Maui - COVID-19 Response County of Maui	03/01/2020	06/30/2020	\$30,000.00	Items Not Listed Above	County COVID-19 Response
Line 2	001-County of Maui - COVID-19 Response County of Maui	07/01/2020	09/30/2020	\$15,107,753.69	Items Not Listed Above	County COVID-19 Response
Line 3	001-County of Maui - COVID-19 Response County of Maui	10/01/2020	12/30/2020	\$43,158,947.99	Items Not Listed Above	County COVID-19 Response
Line 4	001-County of Maui - COVID-19 Response County of Maui	01/01/2021	03/31/2021	\$6,393,073.14	Items Not Listed Above	County COVID-19 Response
Line 5	001-County of Maui - COVID-19 Response County of Maui	04/01/2021	06/30/2021	\$1,908,982.18	Items Not Listed Above	County COVID-19 Response
<b>Total:</b>						\$66,598,757.00

**Current Quarter Expenditures**

0	102 A0	102 B0		102 C0	102 D0	102 E0	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Transfer: 003**

94	Sub-Recipient Organization (Transferee/Government Unit)*	KAUAI, COUNTY OF-113218945
95	Transfer Number *	003
96	Transfer Amount *	\$28,715,551.00
97	Transfer Date *	06/18/2020
98	Transfer Type *	Lump Sum Payment(s)
99	Purpose Description *	To provide the County of Kauai with direct access to funds to address necessary costs due to the public health emergency caused by the Coronavirus Disease 2019 (COVID19).

**Obligations**

	100 A	100 B	100 C	100 D	100 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001-County of Kauai - COVID-19 Response County of Kauai	\$00	\$28,715,551.00	\$00	\$26,635,103.00
<b>Total</b>		\$00	\$28,715,551.00	\$00	\$26,635,103.00

**Previous Expenditures (All previous quarters)**

	101 A	101 B		101 C	101 D	101 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001-County of Kauai - COVID-19 Response County of Kauai	03/01/2020	06/30/2020	\$57,416.51	Items Not Listed Above	County COVID-19 Response
Line 2	001-County of Kauai - COVID-19 Response County of Kauai	07/01/2020	09/30/2020	\$13,982,533.22	Items Not Listed Above	County COVID-19 Response
Line 3	001-County of Kauai - COVID-19 Response County of Kauai	10/01/2020	12/31/2020	\$10,532,510.50	Items Not Listed Above	County COVID-19 Response
Line 4	001-County of Kauai - COVID-19 Response County of Kauai	01/01/2021	03/31/2021	\$1,980,588.77	Items Not Listed Above	County COVID-19 Response
Line 5	001-County of Kauai - COVID-19 Response County of Kauai	04/01/2021	06/30/2021	\$82,054.00	Items Not Listed Above	County COVID-19 Response
<b>Total:</b>						\$26,635,103.00

**Current Quarter Expenditures**

0	102 A0	102 B0		102 C0	102 D0	102 E0	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Transfer: 24419**

94	Sub-Recipient Organization (Transferee/Government Unit)*	HAWAII, COUNTY OF-094636073
95	Transfer Number *	24419
96	Transfer Amount *	\$376,963.20
97	Transfer Date *	11/01/2020
98	Transfer Type *	Reimbursable
99	Purpose Description *	Emergency shelter for quarantine

**Obligations**

	100 A	100 B	100 C	100 D	100 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$376,963.20	\$00	\$376,963.20
<b>Total</b>		\$00	\$376,963.20	\$00	\$376,963.20

**Previous Expenditures (All previous quarters)**

	101 A	101 B		101 C	101 D	101 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	11/01/2020	11/30/2020	\$376,963.20	Public Health Expenses	
<b>Total:</b>						\$376,963.20

**Current Quarter Expenditures**

0	102 A0	102 B0		102 C0	102 D0	102 E0	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Transfer: 00262711-01**

94	Sub-Recipient Organization (Transferee/Government Unit)*	HAWAII, COUNTY OF-094636073
95	Transfer Number *	00262711-01
96	Transfer Amount *	\$376,963.20
97	Transfer Date *	12/01/2020
98	Transfer Type *	Reimbursable
99	Purpose Description *	Emergency shelter for quarantine

**Obligations**

	100 A	100 B	100 C	100 D	100 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	\$00	\$376,963.20	\$00	\$376,963.20
<b>Total</b>		\$00	\$376,963.20	\$00	\$376,963.20

**Previous Expenditures (All previous quarters)**

	101 A	101 B		101 C	101 D	101 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	001 - HTH - DOH COVID-19 Statewide Response Effort	12/01/2020	12/30/2020	\$376,963.20	Public Health Expenses	
<b>Total:</b>						\$376,963.20

**Current Quarter Expenditures**

0	102 A0	102 B0		102 C0	102 D0	102 E0	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00



### Sub Screen: Transfer: 004

94	Sub-Recipient Organization (Transferee/Government Unit)*	City and County of Honolulu-996001257
95	Transfer Number *	004
96	Transfer Amount *	\$600,000.00
97	Transfer Date *	08/30/2021
98	Transfer Type *	Lump Sum Payment(s)
99	Purpose Description *	To provide to the City and County of Honolulu with CARES Act CRF funds to be used in respond to the Coronavirus Disease 2019 (COVID19) public health emergency for expenditures that: 1. Are necessary expenditures incurred due to the COVID 19 public health emergency; 2. Were not accounted for in the budget most recently approved as of March 27, 2020 (the date of enactment of the CARES Act) for the State or government; and 3. Are incurred during the period beginning on March 1, 2020 and ending on December 31, 2021. These funds may be used for the following priority areas related to COVID-19: 1. Payroll and other current expenses for public safety (police, fire, and emergency medical services), public health, and similar employees whose services are substantially dedicated to mitigating or responding to the COVID-19 public health emergency; 2. Expenses to address community needs and priorities in response to the economic impact of the COVID 19 pandemic such as foodbanks, homelessness, childcare, etc.; 3. Expenditures to facilitate compliance with COVID-19-related public health measures; and 4. Economic support for individuals, non-profits, families, and small businesses to alleviate financial adversities as a result of the COVID-19 public health emergency.

### Obligations

	100 A	100 B	100 C	100 D	100 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	001 - CC of Honolulu - COVID-19 Response City and County of Honolulu	\$600,000.00	\$600,000.00	\$216,378.10	\$216,378.10
<b>Total</b>		\$600,000.00	\$600,000.00	\$216,378.10	\$216,378.10

### Previous Expenditures (All previous quarters)

	101 A	101 B	101 C	101 D	101 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1			\$0.00		
<b>Total:</b>					\$00

### Current Quarter Expenditures

0	102 A0	102 B0		102 C0	102 D0	102 E0	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	001 - CC of Honolulu - COVID-19 Response City and County of Honolulu	10/01/2021	12/31/2021	\$216,378.10	Housing Support		
<b>Total:</b>						\$216,378.10	

**Sub Screen: Direct Sub-Recipient: 88365767**

<b>103</b>	<b>Sub-Recipient Organization (Payee)*</b>	Carahsoft Technology Corp-88365767
<b>104</b>	<b>Obligation Amount*</b>	\$0.00
<b>105</b>	<b>Obligation Date *</b>	08/03/2020

**Obligations**

	<b>106 A</b>	<b>106 B</b>	<b>106 C</b>	<b>106 D</b>	<b>106 E</b>
	<b>Project*</b>	<b>Current Quarter Obligation*</b>	<b>Cumulative Obligation*</b>	<b>Current Quarter Expenditure</b>	<b>Cumulative Expenditure</b>
<b>Line 1</b>	002 - LBR - LBR Information Technology, Systems and Staffing	\$00	\$0.00	\$00	\$0.00
<b>Total</b>		\$00	\$0.00	\$00	\$0.00

**Previous Expenditures (All previous quarters)**

	<b>107 A</b>	<b>107 B</b>		<b>107 C</b>	<b>107 D</b>	<b>107 E</b>
	<b>Project*</b>	<b>Expenditure Date Range*</b>		<b>Cost or Expenditure Amount*</b>	<b>Cost or Expenditure Category*</b>	<b>Category Description</b>
<b>Line 1</b>	002 - LBR - LBR Information Technology, Systems and Staffing	08/03/2020	09/30/2020	\$84,014.68	Unemployment Benefits	
<b>Line 2</b>	002 - LBR - LBR Information Technology, Systems and Staffing	08/30/2020	09/30/2020	-\$84,014.68	Unemployment Benefits	
<b>Total:</b>						\$0.00

**Current Quarter Expenditures**

	<b>108 A</b>	<b>108 B</b>		<b>108 C</b>	<b>108 D</b>	<b>108 E</b>	
	<b>Project*</b>	<b>Expenditure Date Range*</b>		<b>Cost or Expenditure Amount*</b>	<b>Cost or Expenditure Category*</b>	<b>Category Description</b>	<b>Delete</b>
<b>Line 1</b>	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Direct Sub-Recipient: 153345173**

<b>103</b>	<b>Sub-Recipient Organization (Payee)*</b>	LENOVO (UNITED STATES) INC.-153345173
<b>104</b>	<b>Obligation Amount*</b>	\$113,888.95
<b>105</b>	<b>Obligation Date *</b>	08/20/2020

**Obligations**

	<b>106 A</b>	<b>106 B</b>	<b>106 C</b>	<b>106 D</b>	<b>106 E</b>
	<b>Project*</b>	<b>Current Quarter Obligation*</b>	<b>Cumulative Obligation*</b>	<b>Current Quarter Expenditure</b>	<b>Cumulative Expenditure</b>
<b>Line 1</b>	002 - LBR - LBR Information Technology, Systems and Staffing	\$00	\$113,888.95	\$00	\$113,888.95
<b>Total</b>		\$00	\$113,888.95	\$00	\$113,888.95

**Previous Expenditures (All previous quarters)**

	<b>107 A</b>	<b>107 B</b>		<b>107 C</b>	<b>107 D</b>	<b>107 E</b>
	<b>Project*</b>	<b>Expenditure Date Range*</b>		<b>Cost or Expenditure Amount*</b>	<b>Cost or Expenditure Category*</b>	<b>Category Description</b>
<b>Line 1</b>	002 - LBR - LBR Information Technology, Systems and Staffing	08/20/2020	09/30/2020	\$56,544.48	Administrative Expenses	
<b>Line 2</b>	002 - LBR - LBR Information Technology, Systems and Staffing	09/01/2020	12/31/2020	\$57,344.47	Unemployment Benefits	
<b>Total:</b>						\$113,888.95

**Current Quarter Expenditures**

	<b>108 A</b>	<b>108 B</b>		<b>108 C</b>	<b>108 D</b>	<b>108 E</b>	
	<b>Project*</b>	<b>Expenditure Date Range*</b>		<b>Cost or Expenditure Amount*</b>	<b>Cost or Expenditure Category*</b>	<b>Category Description</b>	<b>Delete</b>
<b>Line 1</b>	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Direct Sub-Recipient: 079019282**

103	Sub-Recipient Organization (Payee)*	DATAHOUSE CONSULTING, INC.-079019282
104	Obligation Amount*	\$3,515,200.00
105	Obligation Date *	12/11/2020

**Obligations**

	106 A	106 B	106 C	106 D	106 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	002 - LBR - LBR Information Technology, Systems and Staffing	\$00	\$3,515,200.00	\$00	\$3,515,200.00
<b>Total</b>		\$00	\$3,515,200.00	\$00	\$3,515,200.00

**Previous Expenditures (All previous quarters)**

	107 A	107 B		107 C	107 D	107 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	002 - LBR - LBR Information Technology, Systems and Staffing	12/11/2020	12/31/2020	\$3,515,200.00	Administrative Expenses	
<b>Total:</b>						\$3,515,200.00

**Current Quarter Expenditures**

	108 A	108 B		108 C	108 D	108 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Direct Sub-Recipient: 319284**

<b>103</b>	<b>Sub-Recipient Organization (Payee)*</b>	SHI International Corporation-319284
<b>104</b>	<b>Obligation Amount*</b>	\$123,461.27
<b>105</b>	<b>Obligation Date *</b>	11/17/2020

**Obligations**

	<b>106 A</b>	<b>106 B</b>	<b>106 C</b>	<b>106 D</b>	<b>106 E</b>
	<b>Project*</b>	<b>Current Quarter Obligation*</b>	<b>Cumulative Obligation*</b>	<b>Current Quarter Expenditure</b>	<b>Cumulative Expenditure</b>
<b>Line 1</b>	002 - LBR - LBR Information Technology, Systems and Staffing	\$00	\$123,461.27	\$00	\$123,461.27
<b>Total</b>		\$00	\$123,461.27	\$00	\$123,461.27

**Previous Expenditures (All previous quarters)**

	<b>107 A</b>	<b>107 B</b>		<b>107 C</b>	<b>107 D</b>	<b>107 E</b>
	<b>Project*</b>	<b>Expenditure Date Range*</b>		<b>Cost or Expenditure Amount*</b>	<b>Cost or Expenditure Category*</b>	<b>Category Description</b>
<b>Line 1</b>	002 - LBR - LBR Information Technology, Systems and Staffing	11/18/2020	12/31/2020	\$123,461.27	Administrative Expenses	
<b>Total:</b>						\$123,461.27

**Current Quarter Expenditures**

	<b>108 A</b>	<b>108 B</b>		<b>108 C</b>	<b>108 D</b>	<b>108 E</b>	
	<b>Project*</b>	<b>Expenditure Date Range*</b>		<b>Cost or Expenditure Amount*</b>	<b>Cost or Expenditure Category*</b>	<b>Category Description</b>	<b>Delete</b>
<b>Line 1</b>	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Direct Sub-Recipient: 66364**

<b>103</b>	<b>Sub-Recipient Organization (Payee)*</b>	Hawaii Convention Center-66364
<b>104</b>	<b>Obligation Amount*</b>	\$0.00
<b>105</b>	<b>Obligation Date *</b>	11/04/2020

**Obligations**

	<b>106 A</b>	<b>106 B</b>	<b>106 C</b>	<b>106 D</b>	<b>106 E</b>
	<b>Project*</b>	<b>Current Quarter Obligation*</b>	<b>Cumulative Obligation*</b>	<b>Current Quarter Expenditure</b>	<b>Cumulative Expenditure</b>
<b>Line 1</b>	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	\$00	\$0.00	\$00	\$0.00
<b>Total</b>		\$00	\$0.00	\$00	\$0.00

**Previous Expenditures (All previous quarters)**

	<b>107 A</b>	<b>107 B</b>		<b>107 C</b>	<b>107 D</b>	<b>107 E</b>
	<b>Project*</b>	<b>Expenditure Date Range*</b>		<b>Cost or Expenditure Amount*</b>	<b>Cost or Expenditure Category*</b>	<b>Category Description</b>
<b>Line 1</b>	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	11/04/2020	12/31/2020	\$3,251,030.00	Administrative Expenses	
<b>Line 2</b>	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	11/04/2020	12/31/2020	\$-3,251,030.00	Administrative Expenses	
<b>Total:</b>						\$0.00

**Current Quarter Expenditures**

	<b>108 A</b>	<b>108 B</b>		<b>108 C</b>	<b>108 D</b>	<b>108 E</b>	
	<b>Project*</b>	<b>Expenditure Date Range*</b>		<b>Cost or Expenditure Amount*</b>	<b>Cost or Expenditure Category*</b>	<b>Category Description</b>	<b>Delete</b>
<b>Line 1</b>	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Direct Sub-Recipient: 079019282**

<b>103</b>	<b>Sub-Recipient Organization (Payee)*</b>	DATAHOUSE CONSULTING, INC.-079019282
<b>104</b>	<b>Obligation Amount*</b>	\$0.00
<b>105</b>	<b>Obligation Date *</b>	12/07/2020

**Obligations**

	<b>106 A</b>	<b>106 B</b>	<b>106 C</b>	<b>106 D</b>	<b>106 E</b>
	<b>Project*</b>	<b>Current Quarter Obligation*</b>	<b>Cumulative Obligation*</b>	<b>Current Quarter Expenditure</b>	<b>Cumulative Expenditure</b>
<b>Line 1</b>	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	\$00	\$0.00	\$00	\$0.00
<b>Total</b>		\$00	\$0.00	\$00	\$0.00

**Previous Expenditures (All previous quarters)**

	<b>107 A</b>	<b>107 B</b>		<b>107 C</b>	<b>107 D</b>	<b>107 E</b>
	<b>Project*</b>	<b>Expenditure Date Range*</b>		<b>Cost or Expenditure Amount*</b>	<b>Cost or Expenditure Category*</b>	<b>Category Description</b>
<b>Line 1</b>	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	12/07/2020	12/31/2020	\$56,544.48	Administrative Expenses	
<b>Line 2</b>	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	01/01/2021	03/31/2021	\$280,800.00	Unemployment Benefits	
<b>Line 3</b>	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	12/07/2020	03/31/2021	\$-337,344.48	Unemployment Benefits	
<b>Line 4</b>	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	12/07/2020	03/31/2021	\$337,344.48	Unemployment Benefits	
<b>Line 5</b>	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	01/01/2021	03/31/2021	\$-280,800.00	Unemployment Benefits	
<b>Line 6</b>	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	01/01/2021	03/31/2021	\$-56,544.48	Administrative Expenses	
<b>Total:</b>						\$0.00

**Current Quarter Expenditures**

	<b>108 A</b>	<b>108 B</b>		<b>108 C</b>	<b>108 D</b>	<b>108 E</b>	
	<b>Project*</b>	<b>Expenditure Date Range*</b>		<b>Cost or Expenditure Amount*</b>	<b>Cost or Expenditure Category*</b>	<b>Category Description</b>	<b>Delete</b>
<b>Line 1</b>	0			\$00			
<b>Total:</b>							\$00

**Sub Screen: Direct Sub-Recipient: 66364**

<b>103</b>	<b>Sub-Recipient Organization (Payee)*</b>	Hawaii Convention Center-66364
<b>104</b>	<b>Obligation Amount*</b>	\$0.00
<b>105</b>	<b>Obligation Date *</b>	02/22/2021

**Obligations**

	<b>106 A</b>	<b>106 B</b>	<b>106 C</b>	<b>106 D</b>	<b>106 E</b>
	<b>Project*</b>	<b>Current Quarter Obligation*</b>	<b>Cumulative Obligation*</b>	<b>Current Quarter Expenditure</b>	<b>Cumulative Expenditure</b>
<b>Line 1</b>	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	\$00	\$0.00	\$00	\$0.00
<b>Total</b>		\$00	\$0.00	\$00	\$0.00

**Previous Expenditures (All previous quarters)**

	<b>107 A</b>	<b>107 B</b>		<b>107 C</b>	<b>107 D</b>	<b>107 E</b>
	<b>Project*</b>	<b>Expenditure Date Range*</b>		<b>Cost or Expenditure Amount*</b>	<b>Cost or Expenditure Category*</b>	<b>Category Description</b>
<b>Line 1</b>	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	02/22/2021	03/31/2021	\$357,644.65	Unemployment Benefits	
<b>Line 2</b>	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	02/22/2021	03/31/2021	\$-357,644.65	Unemployment Benefits	
<b>Total:</b>						\$0.00

**Current Quarter Expenditures**

	<b>108 A</b>	<b>108 B</b>		<b>108 C</b>	<b>108 D</b>	<b>108 E</b>	
	<b>Project*</b>	<b>Expenditure Date Range*</b>		<b>Cost or Expenditure Amount*</b>	<b>Cost or Expenditure Category*</b>	<b>Category Description</b>	<b>Delete</b>
<b>Line 1</b>	0			\$00			
<b>Total:</b>							\$00



**Sub Screen: Direct Sub-Recipient: 082347477**

<b>103</b>	<b>Sub-Recipient Organization (Payee)*</b>	MAXIMUS, INC.-082347477
<b>104</b>	<b>Obligation Amount*</b>	\$4,000,000.00
<b>105</b>	<b>Obligation Date *</b>	03/18/2021

**Obligations**

	<b>106 A</b>	<b>106 B</b>	<b>106 C</b>	<b>106 D</b>	<b>106 E</b>
	<b>Project*</b>	<b>Current Quarter Obligation*</b>	<b>Cumulative Obligation*</b>	<b>Current Quarter Expenditure</b>	<b>Cumulative Expenditure</b>
<b>Line 1</b>	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	\$00	\$4,000,000.00	\$00	\$3,925,051.60
<b>Total</b>		\$00	\$4,000,000.00	\$00	\$3,925,051.60

**Previous Expenditures (All previous quarters)**

	<b>107 A</b>	<b>107 B</b>		<b>107 C</b>	<b>107 D</b>	<b>107 E</b>
	<b>Project*</b>	<b>Expenditure Date Range*</b>		<b>Cost or Expenditure Amount*</b>	<b>Cost or Expenditure Category*</b>	<b>Category Description</b>
<b>Line 1</b>	004 - LBR - COVID-19 Unemployment Claims Processing Improvements	03/18/2021	03/31/2021	\$3,925,051.60	Unemployment Benefits	
<b>Total:</b>						\$3,925,051.60

**Current Quarter Expenditures**

	<b>108 A</b>	<b>108 B</b>		<b>108 C</b>	<b>108 D</b>	<b>108 E</b>	
	<b>Project*</b>	<b>Expenditure Date Range*</b>		<b>Cost or Expenditure Amount*</b>	<b>Cost or Expenditure Category*</b>	<b>Category Description</b>	<b>Delete</b>
<b>Line 1</b>	0			\$00			
<b>Total:</b>							\$00