1	Date	e)
١.	$\boldsymbol{\nu}$ uu	- 1

TO:

The Honorable David Y. Ige

Governor, State of Hawaiii

FROM:

(Name, Title)

(Department OR State Agency)

SUBJECT: Request for Use of Coronavirus Relief Funds

Consistent with the requirements of the Coronavirus Aid, Relief, and Economic Security Act (CARES Act), (DEPARTMENT OR AGENCY NAME) requests a \$(AMOUNT) sub-award from the Coronavirus Relief Fund (CRF).

This request qualifies as an allowable use of the CRF because the funds will be used for allowable Coronavirus Disease 2019 (COVID-19) related expenditures, as indicated on the attached "Attestation of Qualifying Coronavirus Relief Fund Expenditures" (Form CRF-2). The (DEPARTMENT OR AGENCY NAME) understands that these funds must be expended by December 30, 2020, and that any funds that are not expected to be expended by that date shall be returned by December 11, 2020.

## This request is for:

(Provide request details. Indicate purpose, intended outcome, and cost breakdown of the request. If applicable, indicate if special project authorization and approval to establish and fill exempt temporary special project positions is requested.)

We will comply with the Cogovernment.	ARES Act reporting require	ements as issued by the federal
RECOMMENDATION:	•	
□ APPROVAL	☐ DISAPPROVAL	
AUTHORIZED REPRESE	NTATIVE	DATE

(Department OR State A (Date) Page 2			
□ APPROVED	□ DISAPPROVED		
DAVID Y. IGE Governor, State of Hawa	aiʻi	DATE	
Attachment (Form CRF-	2)		
c: Craig K. Hirai, Direct Curt T. Otaguro, Cor			