

Eligible Expenses Worksheet, please list your cost for any of the following allowable reimbursable expenses beginning March 1st, 2020. Provide documentation such as invoices, statements, canceled checks etc. and attach to your application for expenses over \$500.

- The cost of constructing either temporary (i.e. tents) or permanent outdoor facilities to allow service to customers with proper social distancing. \$ _____
- The conversion of an area, sidewalk, parking lot or open area, adjacent to a dining facility to accommodate additional outdoor seating including tables and fencing. \$ _____
- Signage – Acquisition of signage relating to the operation of the business or customer safety in accordance with the Covid-19 guidelines. \$ _____
- Checkout counter modifications such as screens and buffers to allow for proper social distancing practices. \$ _____
- Indoor modifications – Costs associated with the reduction of seating or cordoning customer space in public spaces to comply with social distancing guidelines including the costs of storage facilities to store excess seating or other materials. \$ _____
- Computer Hardware necessary to support remote work by employees or upgrades to existing hardware to support e-commerce. \$ _____
- Software support remote work by employees or upgrades to existing Internet presence to support expanded e-commerce. \$ _____
- Personal Protection Equipment, Sanitation Stations – The cost to purchase masks, gloves, face shields or protective garments to protect against the spread of the virus. \$ _____
- Sanitation Supplies to clean equipment or furnishings as well as supplies necessary for proper hygiene of employees and customers. \$ _____
- Disinfection Equipment or Contracts needed to dispense the disinfection agents for safe operation of the business. \$ _____
- Rent or Mortgage Payments during the period of, March, April, May, June, July, 2020. \$ _____
- Utility payments during the period of March, April, May, June, July, 2020. \$ _____
- Payroll costs incurred for employees for the months of March, April, May, June, and July 2020. \$ _____ (request cannot exceed \$3,500.00)(Cannot have received PPP for these costs).

Total Expenses, \$ _____, maximum grant is \$20,000.00

Signature of person providing this information; _____

I hereby agree that by signing this expense worksheet I claim all information is accurate and that I am subject to audit by Wright County for the expenses listed. I further agree to abide by all State and Federal Guidelines.