

**Randolph-Sheppard Financial Relief and Restoration Payments
(FRRP) Appropriation
Declaration of Losses due to COVID-19 Pandemic / Certification of
Compensation Received**

As part of the Randolph-Sheppard Financial Relief and Restoration Payments (FRRP) Appropriation, the New York State Commission for the Blind (NYSCB) is required by the Rehabilitation Services Administration (RSA) to:

1. Cooperate with the Secretary in applying the requirements of the Randolph-Sheppard Act in a uniform manner when administering the FRRP, pursuant to 34 C.F.R. § 395.3(a)(11)(i), and will comply with all applicable Federal statutory and regulatory requirements for Federal recipients, as well as the terms and conditions of the grant award; and

2. Use all funds received under the FRRP in accordance with the terms of the Consolidated Appropriations Act of 2021, PL 116-260, Division H, Title III, section 318, specifically for the purposes of:
 - a. offsetting losses of blind vendors that occurred during calendar year 2020, to the extent that such losses were not otherwise compensated; and
 - b. other purposes authorized under 34 C.F.R. § 395.9 for set-aside funds, but only to the extent any funds remain available after offsetting losses that were incurred by blind vendors during calendar year 2020.

This form documents Licensed Blind Managers COVID-19 related pandemic losses for calendar year 2020 in comparison to 2019 and any other compensation received.

BEP Manager Name: _____

Calculation of income/loss

2019 Net Earnings/loss: _____

2020 Net Earnings/loss: _____

A. 2019 Net minus 2020 Net = _____

Other Compensation:

Fair Minimum Return payments for 2020: _____

Unemployment payments for 2020: _____

Stock grant for inventory losses for 2020: _____

B. Total other compensation: _____

Total (A - B): _____ **qualified losses / surplus, no qualified losses**

I hereby certify that the above statements are true and correct to the best of my knowledge.

Signature:

Date: