



COVID-19 MINNESOTA FUND EXPENDITURE REPORT

April 30, 2020

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Executive Summary

- The COVID-19 Minnesota fund was created to pay expenditures associated with the peacetime emergency declared by the Governor in executive order 20-01 related to COVID-19. The fund was established on March 28, 2020 with a starting balance of \$200 million.
- Money in the fund is appropriated to the Commissioner of Management and Budget to be disbursed or transferred to state agencies, as necessary, to:
 1. Protect Minnesota citizens from the COVID-19 outbreak, and;
 2. Maintain state government operations throughout the duration of the peacetime emergency.
- The Commissioner of Management and Budget may authorize expenditures of \$1 million or less. An expenditure request in excess of \$1 million must be submitted to the Legislative COVID-19 Response Commission for review and recommendation before it can be authorized.
- Two expenditure requests totaling \$37,840,000 were submitted to the Legislative COVID-19 Response Commission for review and recommendation between April 15, 2020 and April 29, 2020. Both requests received the requisite number of positive recommendations to authorize the expenditure. These authorizations will provide rapid and widespread testing for COVID-19 and preparation of a Community Alternative Care Site.
- One new expenditure of \$1 million or less, totaling \$198,000, was authorized between April 15, 2020 and April 29, 2020 to provide investigation and planning services for an alternate care facility.
- Critical care supplies and equipment that have been procured through expenditures authorized from LCRC Request #8 between April 15, 2020 and April 29, 2020, include:
 - Gloves – 5,750,600
 - Gowns – 2,126,752
 - Surgical Masks – 1,000,000
 - N95 Respirators – 200,000
 - Cloth Masks – 150,000
 - Face Shields – 100,000
 - Half Mask Respirators – 4,000
 - Half Mask Respirator Filters – 8,000
 - Infrared Thermometers – 1,500
 - Pulse Oximeters – 680

Additional expenditures are listed in Appendix A, the COVID-19 Minnesota Fund Detail. The remaining unobligated balance of this authority is \$15.6 million.

Background

The COVID-19 pandemic presented an unprecedented challenge to our State. On March 19, 2020, in a letter to the leaders of the Minnesota Senate and House of Representatives, Governor Walz and Lt. Governor Flanagan asked the Legislature to create a fund that would give the Administration the flexibility to deploy resources necessary to respond to the needs of Minnesotans in real time.

On March 28, 2020, the Legislature passed legislation creating the COVID-19 Minnesota fund, transferring to it \$200 million from the general fund, and appropriating all money to the Commissioner of Management and Budget to be disbursed or transferred to state agencies, as necessary, to:

1. Protect Minnesota citizens from the COVID-19 outbreak, and;
2. Maintain state government operations throughout the duration of the peacetime emergency.

The legislation also established the Legislative COVID-19 Response Commission to review expenditures. Members of the Commission are: Senate President Jeremy Miller, Senate Majority Leader Paul Gazelka, Senate Minority Leader Susan Kent, Senator Julie Rosen, Senator Dick Cohen, Speaker of the House Melissa Hortman, House Majority Leader Ryan Winkler, House Minority Leader Kurt Daudt, Representative Lyndon Carlson, and Representative Pat Garofalo.

The Commissioner of Management and Budget may authorize expenditures of \$1 million or less. However, the process for approving these requests adopted by the Administration requires additional approval from the Commissioner of Health and the Governor's Chief of Staff.

An expenditure request in excess of \$1 million must be submitted to the Legislative COVID-19 Response Commission for review and recommendation before it can be authorized. Upon submission, the Commission has 24 hours to review a request and provide a positive recommendation, a negative recommendation, or no recommendation. If a majority of commission members from the Senate and a majority of commission members from the House of Representatives provide a negative recommendation on a proposed expenditure, the commissioner is prohibited from expending the money. If a majority of the commission members from the senate or a majority of the commission members from the house of representatives do not make a negative recommendation, or if the commission makes no recommendation, the commissioner may expend the money.

The Commissioner of Management and Budget must provide reports on the spending from the COVID-19 Minnesota fund to the Legislative COVID-19 Response Commission on the 15th and last day of each month. The report must include the total amount of each expenditure, the purpose of each expenditure, and any additional information the commissioner of management and budget determines is necessary to properly document each expenditure.

The COVID-19 Minnesota fund will expire on May 11, 2020, unless the Legislature acts to change the expiration date. Upon expiration, any money in the fund that remains unobligated will transfer back to the general fund.

Authorized Expenditures

Below is a summary of total authorized expenditures from the COVID-19 Minnesota fund. The first chart highlights authorized expenditures in excess of \$1 million. The second chart highlights authorized expenditures of \$1 million or less.

Authorized Expenditures in Excess of \$1 Million

(\$ in thousands)

Request #	Date	Agency	Description	Requested	Approved
LCRC-1	03/30/20	MDH	Ventilators	\$31,500	\$31,500
LCRC-2	03/30/20	MDH	N95 Respirators	\$16,000	\$16,000
LCRC-3	04/02/20	MDH	Amend LCRC Request #2 from \$4 million to \$16 million	~	~
LCRC-4	04/02/20	MDH	PPE – Gowns	\$8,000	\$8,000
LCRC-5	04/02/20	MDH	PPE – Gloves	\$7,000	\$7,000
LCRC-6	04/03/20	MDH	PPE – Surgical Masks	\$5,400	\$5,400
LCRC-7	04/09/20	DOC	Manage COVID-19 Related Demands for March/April	\$2,255	\$2,255
LCRC-8	04/14/20	MDH	Amend LCRC Requests #1-6 for Critical Supply Needs	~	~
LCRC-9	4/22/20	MDH	Rapid and Widespread Testing for COVID-19	\$36,000	\$36,000
LCRC-10	4/28/20	MDH	Preparation of a Community Alternative Care Site	\$1,840	\$1,840
SUBTOTAL Requests in Excess of \$1 Million				\$107,995	\$107,995

Authorized Expenditures of \$1 Million or Less

(\$ in thousands)

Request #	Date	Agency	Description	Requested	Approved
MMB-1	03/30/20	MDH	N95 Respirators	\$402	\$402
MMB-2	03/31/20	MDH	Cloth Masks	\$250	\$250
MMB-3	03/31/20	MDH	Face Shields	\$59	\$59
MMB-4	04/01/20	MDH	Cloth Masks	\$250	\$250
MMB-5	04/01/20	MDH	Gloves	\$600	\$600
MMB-6	04/01/20	MDH	Nasal Cannula	\$84	\$84
MMB-7	04/06/20	MDH	Face Shields	\$277	\$277
MMB-8	04/07/20	MDH	Reusable Respirators	\$78	\$78
MMB-9	04/07/20	MDH	Infrared Thermometers	\$8	\$8
MMB-10	04/07/20	MDH	Reusable, Washable Gowns	\$85	\$85
MMB-11	04/07/20	MDH	Safety Glasses	\$8	\$8
MMB-12	04/08/20	MDH	Gloves	\$77	\$77
MMB-13	04/08/20	MDH	Patient and Equipment Tracking System Software	\$64	\$64
MMB-14	04/08/20	MDH	Water Resistant, Washable Gowns	\$35	\$35
MMB-15	04/09/20	MDH	Simple Surgical Masks	\$150	\$150
MMB-16	04/09/20	MDH	Hand Sanitizer	\$455	\$455
MMB-17	04/09/20	MDH	Simple Surgical Masks	\$266	\$266

Request #	Date	Agency	Description	Requested	Approved
MMB-18	04/09/20	MDH	Alternate Care Sites Medical Supplies	\$180	\$180
MMB-19	04/10/20	MDH	Simple Surgical Masks	\$850	\$850
MMB-20	04/10/20	MDH	Shoe Covers	\$17	\$17
MMB-21	04/13/20	MDH	Surgical Masks	\$470	\$470
MMB-22	04/13/20	MDH	BiPAP Machines and Equipment	\$415	\$415
MMB-23	04/13/20	MDH	Surgical Masks	\$961	\$961
MMB-24	04/13/20	MDH	Gloves	\$2	\$2
MMB-25	04/20/20	MDH	Alternative Care Sites - Professional/Technical Contract	\$198	\$198
			SUBTOTAL Requests of \$1 Million or Less	\$6,241	\$6,241

Commentary on Authorized Expenditures

Two new LCRC requests were authorized for expenditures in excess of \$1 million between April 15, 2020 and April 29, 2020.

First, LCRC Request #9 provides \$36 million for a collaboration between the Minnesota Department of Health (MDH), the health systems providing care to Minnesotans, and the University of Minnesota and Mayo Clinic for rapid and widespread testing for COVID-19 in the State of Minnesota. This proposal is a part of a larger MDH proposal for testing, surveillance, and contact tracing and allocates \$18 million each to the University of Minnesota and Mayo Clinic to build the infrastructure and execute the first phase of the state's comprehensive plan. Phase One is expected to occur over the next 3-4 weeks and would provide molecular and serologic testing so that results can be used in real-time to support clinical practice needs and population-based strategies to limit spread of the infection.

Second, LCRC Request #10 provides \$1.84 million for preparation of a Community Alternative Care Site in Roseville, Minnesota, should it be needed. This will allow one location in the metro area to be operationally ready in a shortened time frame, if activation is needed. The estimated cost is based on a four-month period and incorporates anticipated lease costs, utilities, insurance, as well as necessary building modifications and improvements. This does not include costs associated with Community Alternative Care Site facility operations if activation is required.

As of April 29, 2020, \$94.966 million of the \$114.235 million in approved expenditures is either spent or encumbered for spending with the balance not yet committed. The majority of approved expenditures that are currently uncommitted is set aside for future supply purchases described in LCRC Notice of Action #8. Additional detail about approved expenditures from the COVID-19 Minnesota fund for the period of time covered in this report is provided in Appendix A. Additional information about the COVID-19 Minnesota fund is available online at mn.gov/mmb/budget/covid19-mn-fund.

Appendix A:

COVID-19 Minnesota Fund Detail

Laws 2020, Chapter 71, Article 1, Section 7

March 30, 2020 – April 29, 2020

(\$ in thousands)

Legislative COVID-19 Response Commission (LCRC) reviews requests over \$1 M within 24 hours for approval

Initial Fund Balance	Approved Spending Authority	Remaining Unauthorized	Actual Spent / Encumbered	Not Committed
\$ 200,000	\$ 114,235	\$85,765	\$ 94,966	\$ 19,268

Legislative COVID-19 Response Commission (LCRC) Authorizations

Agency	Expenditure Request	Approved Spending Authority	Approval Date	Purchased
Health	Ventilators	\$31,500	3/30/2020 LCRC #1	800 Ventilators and 200 Airvo machines
Health	N95 Respirators (original approval 3/30 for \$4 M)	\$16,000	4/2/2020 LCRC #2, #3	1,500,000 N95 Respirators/Masks
Health	Personal Protective Equipment--Gowns	\$8,000	4/2/2020 LCRC #4	
Health	Personal Protective Equipment-Gloves	\$7,000	4/2/2020 LCRC #5	Vendor can't fulfill order 10,000,000 gloves
Health	Personal Protective Equipment-Surgical Masks	\$5,400	4/3/2020 LCRC #6	4,000,000 Surgical masks
Corrections	COVID-19 related demands in March/April	\$2,255	4/9/2020 LCRC #7	Cleaning/medical supplies and compensation
Health	Spending already approved in previous requests	[\$42,043]	4/14/2020 LCRC #8	Discretionary spending for critical supplies
Health	Discretionary spending for critical supplies \$33		4/14/2020 LCRC #8	125,000 Gloves
Health	Discretionary spending for critical supplies \$184		4/14/2020 LCRC #8	1,000,000 Shoe covers (500,000 pairs)
Health	Discretionary spending for critical supplies \$7		4/14/2020 LCRC #8	1,440 lab coats, 100 pants, 20,000 gloves
Health	Discretionary spending critical supplies \$180		4/15/2020 LCRC #8	4,000 Half-mask respirators and 8,000 filters
Health	Discretionary spending critical supplies \$5		4/15/2020 LCRC #8	Alternate Care Sites miscellaneous supplies
Health	Discretionary spending critical supplies \$6		4/15/2020 LCRC #8	36,000 Gloves
Health	Discretionary spending critical supplies \$76		4/16/2020 LCRC #8	1,500 Infrared thermometers
Health	Discretionary spending critical supplies \$285		4/16/2020 LCRC #8	1,470,000 Gloves
Health	Discretionary spending critical supplies \$1.695 M		4/16/2020 LCRC #8	105,000 Gowns
Health	Discretionary spending critical supplies \$800		4/17/2020 LCRC #8	100,000 Gowns
Health	Discretionary spending critical supplies \$8		4/17/2020 LCRC #8	10,000 Poncho style gowns
Health	Discretionary spending critical supplies \$8		4/20/2020 LCRC #8	70,000 Gloves
Health	Discretionary spending critical supplies \$11.673 M		4/20/2020 LCRC #8	598,752 Washable gowns
Health	Discretionary spending critical supplies \$175		4/20/2020 LCRC #8	150,000 Cloth masks
Health	Discretionary spending critical supplies \$2.152 M		4/21/2020 LCRC #8	300,000 Disposable gowns
Health	Discretionary spending critical supplies \$820		4/21/2020 LCRC #8	1,000,000 Simple surgical masks
Health	Discretionary spending critical supplies \$423		4/22/2020 LCRC #8	2,415,000 Gloves
Health	Discretionary spending critical supplies \$10		4/22/2020 LCRC #8	50,000 Gloves
Health	U of M & Mayo Clinic COVID-19 Rapid Widespread Testing	\$36,000	4/22/2020 LCRC #9	U of M and Mayo Clinic - Rapid & Widespread Testing
Health	Discretionary spending critical supplies \$130		4/22/2020 LCRC #8	4,000 Washable gowns
Health	Discretionary spending critical supplies \$77		4/23/2020 LCRC #8	9,000 Disposable gowns
Health	Discretionary spending critical supplies \$4		4/23/2020 LCRC #8	80 Pulse oximeters
Health	Discretionary spending critical supplies \$7		4/24/2020 LCRC #8	99,000 Gloves
Health	Discretionary spending critical supplies \$19		4/27/2020 LCRC #8	600 Pulse oximeters
Health	Discretionary spending critical supplies \$81		4/27/2020 LCRC #8	1,116,000 Gloves
Health	Discretionary spending critical supplies \$841		4/27/2020 LCRC #8	200,000 N95 Respirators/Masks
Health	Discretionary spending critical supplies \$23		4/27/2020 LCRC #8	414,700 Gloves
Health	Preparation of Community Alt. Care Site in Roseville	\$1,840	4/28/2020 LCRC #10	Preparation of Community Alt. Care Site in Roseville
Health	Discretionary spending critical supplies \$7		4/28/2020 LCRC #8	58,900 Gloves
Health	Discretionary spending critical supplies \$351		4/28/2020 LCRC #8	100,000 Face shields
Health	Discretionary spending critical supplies \$19		4/28/2020 LCRC #8	250 Infrared thermometers [not purchased yet]
Health	Discretionary spending critical supplies \$7.487 M		4/29/2020 LCRC #8	1,000,000 Disposable gowns
Health	Discretionary spending critical supplies \$3		4/29/2020 LCRC #8	21,000 Gloves

Non-Legislative COVID-19 Response Commission (LCRC) Authorizations (\$1 million or under)

Agency	Expenditure Request	Approved Spending Authority	Approval Date	Purchased
Health	100,000 N95 Respirators/Masks	\$402	3/30/2020	104,000 N95 Respirators/Masks
Health	100,000 Cloth masks	\$250	3/31/2020	100,000 Pleated cotton masks
Health	25,000 Face shields	\$59	3/31/2020	25,000 Face shields
Health	100,000 Cloth masks	\$250	4/1/2020	50,000 Pleated cotton masks (Revised)
Health	10,000,000 Gloves	\$600	4/1/2020	1,814,800 Gloves (Revised)
Health	1,000 Cannula	\$84	4/1/2020	1,000 Cannula
Health	125,000 Face shields	\$277	4/6/2020	125,000 Face shields
Health	2,016 Moldex Reusable Respirators (half-mask)	\$78	4/7/2020	2,016 Half-mask respirator
Health	150 Infrared thermometers	\$8	4/7/2020	
Health	1,700 Reusable, washable gowns	\$85	4/7/2020	1,700 Reusable, washable gowns
Health	1,500 Safety glasses	\$8	4/7/2020	1,500 Safety glasses
Health	1,530,000 Gloves	\$77	4/7/2020	1,530,000 Gloves (Revised)
Health	Patient and Equipment Tracking System (software)	\$64	4/8/2020	Patient & Equipment Tracking System (software)
Health	700 Water resistant, washable gowns	\$35	4/8/2020	700 Water resistant, washable gowns
Health	150,000 Surgical masks	\$150	4/9/2020	150,000 Surgical masks

Agency	Expenditure Request	Approved Spending Authority	Approval Date	Purchased
Health	75,120 Bottles of hand sanitizer <i>(Revised 4/22/2020)</i>	\$455	4/9/2020	75,120 Bottles of hand sanitizer
Health	270,000 Surgical masks	\$266	4/9/2020	270,000 Surgical masks
Health	Alternate Care Sites medical supplies	\$180	4/9/2020	Alternate Care Sites Team medical supplies
Health	1,000,000 Simple surgical masks	\$850	4/10/2020	1,000,000 Surgical masks
Health	120,000 Shoe covers	\$17	4/10/2020	120,000 Shoe covers (60,000 pairs)
Health	1,000,000 Surgical masks	\$470	4/13/2020	1,000,000 Surgical masks
Health	500 BiPAP machines and related hoses/equipment	\$415	4/13/2020	500 BiPAP machines, hoses, and equipment
Health	1,000,000 Surgical masks	\$961	4/13/2020	1,000,000 Surgical masks
Health	120 boxes of gloves (100 per box)	\$2	4/13/2020	12,000 gloves
Health	Alt. Care Sites - Professional/Technical Contract	\$198	4/20/2020	Investigation & Planning Services

Purchases Summary
Data through 4/29/2020

Quantity	Purchased
1,804,000	N95 Respirators/Masks
800	Ventilators
200	Airvo machines
500	BiPAP machines, hoses, and equipment
8,420,000	Surgical Masks
300,000	Cloth Masks
250,000	Face Shields
9,252,400	Gloves
2,119,152	Gowns
1,000	Cannulas
1,500	Safety glasses
6,016	Half-mask respirator
75,120	Bottles of hand sanitizer
1,120,000	Shoe covers
1,540	Lab coats and pants
1,500	Infrared thermometers
10,000	Poncho style gowns
680	Oximeters
	Patient & Equipment Tracking System (software)
	Alternate Care Sites misc medical supplies
	Corrections cleaning/medical supplies
	P/T Contract Alternate Care Facility
	Lease and preparation Community Alt. Care Site Roseville
	COVID-19 Rapid & Widespread Testing

Appendix B:

Legislative COVID-19 Response Commission Recommendations

The Commissioner of Management and Budget submitted two expenditure requests to the Legislative COVID-19 Response Commission for review and recommendation between April 15, 2020 and April 29, 2020. Upon submission of an expenditure request, the Commission has 24 hours to review and provide a positive recommendation, a negative recommendation, or no recommendation.

If a majority of commission members from the senate and a majority of commission members from the house of representatives provide a negative recommendation on a proposed expenditure, the commissioner is prohibited from expending the money. If a majority of the commission members from the senate or a majority of the commission members from the house of representatives make a positive recommendation or no recommendation, the commissioner may expend the money.

LCRC REQUEST #	Sen. Miller	Speaker Hortman	Sen. Gazelka	Rep. Winkler	Sen. Kent	Rep. Daudt	Sen. Rosen	Rep. Carlson	Sen. Cohen	Rep. Garofalo
9. Rapid and Widespread Testing for COVID-19	Positive	Positive	Positive	Positive	Positive	Positive	Positive	Positive	Positive	Positive
10. Preparation of a Community Alternative Care Site	Positive	Positive	Positive	Positive	Positive	No	Positive	Positive	Positive	Positive



Appendix C:

Legislative COVID-19 Response Commission Request Forms

- LCRC-9 – Rapid and Widespread Testing for COVID-19
- LCRC-10 – Preparation of a Community Alternative Care Site

Health Care Response /COVID-19 Minnesota Fund Request Form

Please complete this form in accordance with the instructions

Agency/Program/Activity:

Minnesota Department of Health/Executive Office

Title of Request: University of Minnesota and Mayo Clinic Collaboration for Rapid Widespread Testing for COVID-19

Date: 4/22/2020

Amount Requested: \$ 36,000,000

Request Funding Source:



Health Care Response Fund Request



COVID-19 Minnesota Fund Request

Brief Summary of Request:

Summary must be complete on this page with supporting information attached.

RECOMMENDATION:

This request is to allow spending of \$36 million from the COVID-19 Minnesota Fund for a collaboration between the Minnesota Department of Health (MDH), the health systems providing care to Minnesotans, and the University of Minnesota and Mayo Clinic for rapid widespread testing for COVID-19 in the State of Minnesota. This proposal is a part of a larger MDH proposal for testing, surveillance, and contact tracing and allocates \$18 million each to the University of Minnesota and Mayo Clinic to build the infrastructure and execute the first phase of the state's comprehensive plan. Phase One is expected to occur over the next 3-4 weeks and would provide molecular and serologic testing so that results can be used in real-time to support clinical practice needs and population-based strategies to limit spread of the infection. Details about this proposal for Phase One are provided in the attached contract and Exhibit A to the contract.

RATIONALE:

The aim of this proposal is:

1. To provide the means for every person in the state with symptoms of COVID-19 to get tested.
2. To identify emerging "hotspots" of infection for rapid intervention.
3. To provide the supporting information for contact tracing efforts for better control of the infection.
4. To collect data on prevalence, geographic distribution, and barriers to care to inform the MDH.
5. To conduct groundbreaking research on COVID-19 to better understand the infection, and the most evidence-based use of specific tests for specific purposes. This research may ultimately also inform better means to cure as well as prevent the infection.

Deliverables of this proposal:

- Increase availability of COVID-19 testing across the state with a dependable supply of tests allocated in accordance with clinical practice and public health needs.
- Virtual command center to monitor daily testing needs and coordinate rapid responses to outbreaks.
- Statewide database for results reporting.
- Establish capacity to deliver 20,000 molecular and 15,000 serology tests per day.
- Early seroprevalence study on discarded blood to be used to inform testing strategies in Phase 2.
- Access to as many as 1,000 serologic and 2,000 molecular tests per day in addition to current statewide capacity during start-up.

Margaret Kelly

Department Head Signature

Digitally signed by Margaret Kelly
Date: 2020.04.22 12:37:23 -05'00'

4/22/2020

Date

Health Care Response /COVID-19 Minnesota Fund Request Form

Please complete this form in accordance with the instructions

Agency/Program/Activity:

Minnesota Department of Health

Title of Request: Preparation of Community Alternative Care Site in Roseville

Date: 4/21/2020

Amount Requested: \$ 1,840,000

Request Funding Source:



Health Care Response Fund Request



COVID-19 Minnesota Fund Request

Brief Summary of Request:

Summary must be complete on this page with supporting information attached.

Government-authorized Alternate Care Sites (ACS) are being established to reduce the morbidity, mortality, and the social impact on the community from the COVID-19 Pandemic when it is anticipated that all other healthcare resources are, or will be rapidly be exhausted. Hospitals will establish similar sites at their facility to the degree possible. The community ACS will provide further overflow for patients that would otherwise be hospitalized but cannot be due to demand for inpatient care

Minnesota Department of Health in coordination with MN HSEM, Minnesota National Guard, U.S. Army Corps of Engineers, Regional Health Care Preparedness Coalitions, county/local emergency managers, and medical professionals have been developing plans on how to stand up community Alternative Care Sites (C-ACS) in Minnesota should they be needed. The decision to activate a C-ACS will be based on local and State interpretation of COVID-19 data as it evolves.

This proposal requests funding to perform the necessary building modifications for one C-ACS to add up to 84 non-acute, patient beds into the health care system. This will allow one location in the metro area to be operationally ready in a shorten time frame if activation is needed. The estimated cost is based on a four month period and incorporates anticipated lease costs, utilities, insurance, as well as necessary building modifications and improvements, such as:

Building and Site Modifications - installing a generator, upgrading wiring, paving, HVAC rebalancing and testing, commissioning a fire protection system and nurse call button base station, signage, post construction cleaning, etc.

Patient Room Setups - privacy screening, reinstalling of furniture, adding nurse call button system, installing wall mounted standard sanitation items, drywall patching and touch-up, etc.

This request does not include costs associated with C-ACS facility operations if activation is required. Additional funding may be requested through the LCRC process for that purpose and/or additional C-ACS facilities depending on needs of the state.

Jan K. Malcolm

Department Head Signature

Digitally signed by Jan K. Malcolm
Date: 2020.04.27 08:01:32 -05'00'

4/27/2020

Date