U.S. Election Assistance Commission					/IB Number: 3265-0022 Expires 04/30/2025	
	FEDERA	L FINAN (EAC F	CIAL REPC	DRT		
1. Federal Agency and Org. Element to Which Report is Submitted 2. Federal Grant or Other Identifying Number (To report multiple grants, use FFR Attachment) U.S. Election Assistance Commission			Assigned	l By Fed. Agency		
3. Recipient Organization (Name and	complete address includin	ıg Zip code)				
Recipient Organization Name:						
Street1:						
Sueen.						
Street2:						
City:		Co	unty:			
<u></u>					<u></u>	
State:					Province:	
Country:		Zij	5:		Zip +4	l:
United States					<u> </u>	
4a. UEI	4b. EIN	um	Recipient Account Number Iber report multiple grants, use		6. Report Type X Quarterly Semi-Annual Annual Final	
7. Basis of Accounting	8. Project/Grant Peri	od			9. Rep	orting Period End Date
Cash Accrual	From:	То	:		11 °	h, Day, Year) 31/2023
10. TRANSACTIONS (Use lines a-c for single or multiple grant reporting) Federal Cash: (To report multiple grants, also use FFR attachment)					Cumulative	
a. Cash Receipts					\$44,241,919.00	
b. Cash Disbursements					\$24,555,352.61	
c. Cash on hand (line a minus b)						\$19,686,566.3
Federal Expenditures and Unobligat	ed Balance: Do not comp	lete this section if report	ting on multiple awards.			<u> </u>
d. Total Federal funds authorized					\$44,241,919.00	
e. Federal share of expenditures					<u> </u>	\$24,555,352.61
f. Federal share of unliquidated ob	_				<u> </u>	
g. Total Federal share (sum of line e plus line f)					<u> </u>	\$19,686,566.3
h. Unobligated balance of Federal f					<u> </u>	\$19,080,300.3
Recipient Share: Do not complete this section if reporting on multiple awards.						\$5,970,333.00
i. Total recipient share required					\$5,970,333.00	
j. Recipient share of expenditures k. Remaining recipient share to be provided <i>(line i minus j)</i>					\$0.00	
Program Income: Do not complete th		nultiple awards.				
1. Total Federal program income earned						
m. Program income expended in accordance with the deduction alternative						
n. Program Income expended in accordance with the addition alternative						
o. Unexpended program income (li	ne I minus line m and line	en)				
Federal Interest:						
p. Total Federal interest earned						\$742,042.7
q. Federal interest expenditures						\$0.0
r. Remaining Federal interest to be expended <i>(line p minus q)</i> \$742,042						
1. Indirect Expense						
a. b. Type Rate	c. Period From	Period To	d. Base	e. Amount Charg	ged	f. Federal Share
		g. Total				

12. Remarks:				
a. State Interest Earned: Enter the current year amount earned (not cumulative)				
b. State Interest Expended: Enter the current year amount expended (not cumulative)				
c. Program Income Earned: Enter the current year amount earned. (not cumulative)				
d. Program Income Expended: Enter the amount of Program Income expended in the current year (not cumulative)				
e Program Income Farned Breakdown. List each source of program income individually next to each amount (federal interest earned is not program income)				

13. Certification: By signing this report, I certify to the best of my knowledge and belief that the report is true, com plete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objective s set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulen t information, or the omission of any material fact, may subject me to criminal, civil or administrative penalti es for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Section s 3729-3730 and 3801-3812).

aMaria Matthews, Director	c.Telephone 850 245-6520
Division of Elections	d.Maria.matthews@dos.myflorida.com
b. Signature of Authorized Certifying Official	e. Date Report Submitted (Month, Day, Year) 9/20/2023

CLEAR