

CT Election Security 2024 Quarterly FFR

SECTION I. DETAILS

FFR

FFR ID	Status	Report Type
10871	Approved	Quarterly
Due Date	Reporting Period From	Reporting Period To
4/30/2024	1/1/2024	3/31/2024

PROJECT/GRANT PERIOD

Federal Grant Name	Basis of Accounting
Election Security	Accrual

RECIPIENT ORGANIZATION DETAILS

Organization Legal Name	Organization Type	UEI	EIN
SECRETARY OF STATE CONNECTICUT	State	D9SNFDRCW3W7	66000798
Street	City	State	Zip Code
165 Capitol Ave	HARTFORD	CT	06106

SECTION II. TRANSACTIONS

FEDERAL CASH	
10a. Cash Receipts	\$12,876,298.00
10b. Cash Disbursements	\$11,876,298.00
10c. Cash on Hand <i>(line a minus b)</i>	\$1,000,000.00
FEDERAL EXPENDITURES AND UNOBLIGATED BALANCE	
10d. Total Federal Funds Authorized	\$12,876,298.00
10e. Federal Share of Expenditures	\$11,876,298.00
10f. Federal Share of Unliquidated Obligations	\$1,000,000.00
10g. Total Federal Share <i>(sum of line e plus line f)</i>	\$12,876,298.00
10h. Unobligated Balance of Federal Funds <i>(line d minus g)</i>	\$0.00
RECIPIENT SHARE	
10i. Total Recipient Share Required	\$1,807,177.00
10j. Recipient Share of Expenditures	\$1,807,177.00
10k. Remaining Recipient Share to be Provided <i>(line i minus j)</i>	\$0.00
PROGRAM INCOME	
10l. Total Federal Program Income Earned	\$0.00
10m. Program Income Expended in Accordance with the Deduction Alternative	\$0.00
10n. Program Income Expended in Accordance with the Addition Alternative	\$0.00
10o. Unexpended Program Income <i>(line l minus line m and line n)</i>	\$0.00
FEDERAL INTEREST	
10p. Total Federal Interest Earned	\$291,240.50

10q. Federal Interest Expenditures	\$262,763.00
10r. Remaining Federal Interest to be Expended (<i>line p minus q</i>)	\$28,477.50

SECTION III. INDIRECT EXPENSES

11a. Type	11b. Rate (%)	11c. Period From	11c. Period To	11d. Base	11e. Amount Charged	11f. Federal Share
CT Election Security 2024 Quarterly						
					false	
11g. Total						

SECTION IV. STATE INTEREST

12a. State Interest Earned	\$0.00
12b. State Interest Expended	\$0.00
12c. State Program Income Earned	\$0.00
12d. State Program Income Expended	\$0.00

SECTION V. CERTIFICATION

Name	Title	Phone Number
Rachel Moser	Director of Program Monitoring and Fiscal Review	(860) 969-7025
Email	Certified On	
rachel.moser@ct.gov	4/25/2024 10:40 AM EDT	