REVISED

FINANCIAL STATUS REPORT

(Long Form)

(Follow instructions on the back)

1. Federal Agency and Organizational Element to Which Report is Submitted	2. Federal Grant or Other Identifying Number Assigned By Federal Agency	OMB Approval No.	Page of
U. S. Election Assistance Commission	90.401 - Title II, Section 251	0348-0039	pages

3. Recipient Organization (Name and complete address, including ZIP code)

Florida Department of State
500 South Bronough Street
Tallahassee, FL 32399-0250

4. Employer Identification Number	5. Recipient Account Number or Identifying Number	6. Final Report	7. Basis
F593466865	45-20-2-339097-00000000-00-000000-00	☐ Yes ☑ No	☑ Cash ☐ Accrual

8. Funding/Grant Period *(See instructions)* From: (Month, Day, Year)	To: (Month, Day, Year)	9. Period Covered by this Report From: (Month, Day, Year)	To: (Month, Day, Year)
6/23/2004		6/23/2004	9/30/2004

10. Transactions:	I Previously Reported	I This Period	III Cumulative
a. Total outlays		0.00	0.00
b. Refunds, rebates, etc.			0.00
c. Program income used in accordance with the deduction alternative			0.00
d. Net outlays *(Line a, less the sum of lines b and c)*	0.00	0.00	0.00
Recipient's share of net outlays, consisting of:			
e. Third party (in-kind) contributions			0.00
f. Other Federal awards authorized to be used to match this award			0.00
g. Program income used in accordance with the matching or cost sharing alternative			0.00
h. All other recipient outlays not shown on lines e, f or g			0.00
i. Total recipient share of net outlays *(Sum of lines e, f, g and h)*	0.00	0.00	0.00
j. Federal share of net outlays *(line d less line i)*	0.00	0.00	0.00
k. Total unliquidated obligations			
l. Recipient's share of unliquidated obligations			
m. Federal share of unliquidated obligations			
n. Total Federal share *(sum of lines j and m)*			0.00
o. Total Federal funds authorized for this funding period			47,873,603.63
p. Unobligated balance of Federal funds *(Line o minus line n)*			47,873,603.63
Program income, consisting of:			
q. Disbursed program income shown on lines c and/or g above			
r. Disbursed program income using the addition alternative			
s. Undisbursed program income			
t. Total program income realized *(Sum of lines q, r and s)*			0.00

11. Indirect Expense	a. Type of Rate *(Place "X" in appropriate box)* ☐ Provisional ☐ Predetermined ☐ Final ☐ Fixed			
	b. Rate	c. Base	d. Total Amount	e. Federal Share
	N/A			

12. *Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation*

Form has been revised to include Interest in the amount of $456,770.63 accrued between 6/23/2004 and 9/30/2004 on Line "O" - $456,770.63.

13. Certification: **I certify to the best of my knowledge and belief that this report is correct and complete and that all outlays and unliquidated obligations are for the purposes set forth in the award documents.**

Typed or Printed Name and Title	Telephone (Area code, number and extension)
Dawn K. Roberts, Director, Division of Elections	850-245-6200
Signature of Authorized Certifying Official	**Date Report Submitted**
Dawn Roberts	March 27, 2006