

**FINANCIAL STATUS REPORT**  
(Short Form)  
(Follow instructions on the back)

**ORIGINAL**

1. Federal Agency and Organizational Element to Which Report is Submitted <i>State HAVA Funding Report U.S. Election Assistance Comm Washington DC, 20005</i>		2. Federal Grant or Other Identifying Number Assigned By Federal Agency <i>HAVA Funding Section 251 FY2003 &amp; FY2004</i>		OMB Approval No. <b>0348-0039</b>	Page <b>3</b> of <b>3</b> pages		
3. Recipient Organization (Name and complete address, including ZIP code) <i>Election Office Territory of American Samoa PO Box 3970 Pago Pago, American Samoa 96799</i>							
4. Employer Identification Number [REDACTED]	5. Recipient Account Number or Identifying Number [REDACTED]	6. Final Report <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7. Basis <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual				
8. Funding/Grant Period (See Instructions) From: (Month, Day, Year) <i>September 21, 2004</i>		To: (Month, Day, Year) <i>OPEN</i>		9. Period Covered by this Report From: (Month, Day, Year) <i>September 21, 2004</i>		To: (Month, Day, Year) <i>December 31, 2004</i>	
10. Transactions				I Previously Reported	II This Period	III Cumulative	
a. Total outlays						0	
b. Recipient share of outlays						0	
c. Federal share of outlays						0	
d. Total unliquidated obligations						0	
e. Recipient share of unliquidated obligations						0	
f. Federal share of unliquidated obligations						0	
g. Total Federal share (Sum of lines c and f)						0	
h. Total Federal funds authorized for this funding period						*2,319,361	
i. Unobligated balance of Federal funds (Line h minus line g)						*2,319,361	
11. Indirect Expense <i>none</i>		a. Type of Rate (Place "X" in appropriate box) <input type="checkbox"/> Provisional <input type="checkbox"/> Predetermined <input type="checkbox"/> Final <input type="checkbox"/> Fixed					
b. Rate		c. Base		d. Total Amount		e. Federal Share	
12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation. <i>*not included the 5% match (115,969) by the Territory of American Samoa.</i>							
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  <i>SOLIAI T. FUIMAONO, Chief Election Officer</i>					Telephone (Area code, number and extension)  <i>(684) 633-2522</i>		
Signature of Authorized Certifying Official 					Date Report Submitted <i>February 25, 2005</i>		