

## FINANCIAL STATUS REPORT (Short Form)

**REVISED**

(Follow instructions on the back)

1. Federal Agency and Organizational Element to Which Report is Submitted  U.S. Election Assistance Commission	2. Federal Grant or Other Identifying Number Assigned By Federal Agency  HAVA title, Section 102	OMB Approval No. 0348-0038	Page of 1   2 pages
3. Recipient Organization (Name and complete address, including ZIP code)  Wisconsin State Elections Board, P.O. Box 2973, Madison, WI 53701-2973			
4. Employer Identification Number <div style="background-color: black; width: 100px; height: 15px;"></div>	5. Recipient Account Number or Identifying Number <div style="background-color: black; width: 100px; height: 15px;"></div>	6. Final Report <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7. Basis <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual
8. Funding/Grant Period (See instructions) From: (Month, Day, Year) 7/13/2003	To: (Month, Day, Year)	9. Period Covered by this Report From: (Month, Day, Year) 1/1/2004	To: (Month, Day, Year) 12/31/2004
10. Transactions:	I Previously Reported	II This Period	III Cumulative
a. Total outlays		1,308,810.00	1,308,810.00
b. Recipient share of outlays			0.00
c. Federal share of outlays			0.00
d. Total unliquidated obligations			
e. Recipient share of unliquidated obligations			
f. Federal share of unliquidated obligations			
g. Total Federal share (Sum of lines c and f)			0.00
h. Total Federal funds authorized for this funding period			1,308,810.00
i. Unobligated balance of Federal funds (Line h minus line g)			1,308,810.00
11. Indirect Expense	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
0.00	N/A	0.00	0.00
12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation.  As of the end of the report period no vendors had applied for approval of an accessible voting system per Wis. Stats. 5.91, EIBd Chapter 7, Wis. Adm. Code.			
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  Kevin J. Kennedy, Executive Director		Telephone (Area code, number and extension)  (608) 266-8087	
Signature of Authorized Certifying Official  		Date Report Submitted  April 19, 2005	

**REVISED**

## Reporting Schedule January 1, 2004 - December 31, 2004

**HAVA Section 102 Federal Money Budget Spreadsheet**

Total Available Monies: \$1,308,810

TYPES OF EXPENDITURES	Budgeted Expenses	Actual Expenses to Date	Balance Remaining
<b>SUPPLIES &amp; SERVICES</b>			
Facilities Rental Expense	\$0.00	\$0.00	\$0.00
Virchow Krause Contract Expenses for RFP Project	\$0.00	\$0.00	\$0.00
Monthly BadgerNet Charges ( Use of Lan Lines)	\$0.00	\$0.00	\$0.00
Database Hosting & Computer File Space Charges	\$0.00	\$0.00	\$0.00
Telephone Expense			Total Telephone \$0.00
STS Phone Bill	\$0.00	\$0.00	\$0.00
Cell Phone Bill	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00
Travel - HAVA			Total Travel \$0.00
Airline Tickets	\$0.00	\$0.00	\$0.00
Fleet Car	\$0.00	\$0.00	\$0.00
Hotel	\$0.00	\$0.00	\$0.00
Travel Vouchers	\$0.00	\$0.00	\$0.00
Registration Fees (Seminars and/or Employee Training)	\$0.00	\$0.00	\$0.00
Annual Membership Dues (NASED, NASS, etc.)	\$0.00	\$0.00	\$0.00
Printing	\$0.00	\$0.00	\$0.00
Postage	\$0.00	\$0.00	\$0.00
Office Supplies	\$0.00	\$0.00	\$0.00
Subscriptions and Purchases of Books	\$0.00	\$0.00	\$0.00
DOA Charge Backs for DOA Services Provided	\$0.00	\$0.00	\$0.00
Miscellaneous Expenses	\$0.00	\$0.00	\$0.00
		Total Spent on Chief Inspector Training	\$0.00
Chief Inspector Training		Training	\$0.00
Travel - Chief Inspector Training			
Fleet Car	\$0.00	\$0.00	
Hotel	\$0.00	\$0.00	
Travel Vouchers	\$0.00	\$0.00	
Printing	\$0.00	\$0.00	
Postage	\$0.00	\$0.00	
<b>TOTAL SUPPLIES &amp; SERVICES</b>	\$0.00	\$0.00	\$0.00
<b>TOTAL CAPITAL EQUIPMENT</b>			
<b>SALARIES &amp; BENEFITS</b>			
Salary Expenses - Staff	1 70 1	\$0.00	\$0.00
Limited Term Employees	1 70 2	\$0.00	\$0.00
Fringe Benefits Cost	1 70 3	\$0.00	\$0.00
<b>TOTAL SALARY &amp; BENEFITS</b>		\$0.00	\$0.00
<b>TOTAL SPENDING</b>		\$0.00	\$0.00
<b>REVENUES:</b>			
Reports and Manuals		\$0.00	
Seminar Fees		\$0.00	
Board Meeting Tapes Fees		\$0.00	
<b>TOTAL REVENUE:</b>		\$0.00	