### U.S. Election Assistance Commission

a. State Interest Earned: Enter the current year amount earned (not cumulative)

OMB Number: 3265-0022 Expires 04/30/2025

\$9,621.77

# FEDERAL FINANCIAL REPORT

(EACFFR)

1. Federal Agency and Org. E		hich Report is Submit		Federal Grant or Other Ide o report multiple grants, use		signed 1	By Fed. Agency
U.S. Election Assistance Commission			EAC-ELSEC22GA				
3. Recipient Organization (Na	ame and com	plete address including	Zip code)				
Recipient Organization Nar Georgia Secretary of State	me:						
Street1: 237 COLISEUM DR							
Street2:							
City: MACON			Co BI	unty: BB			
State: GA						Provin	ıce:
Country: United States			<b>Zi</b> j	<b>5:</b> 217		<b>Zip</b> +4 3805	l:
						6. Rep	ort Type
<b>4a. UEI</b> HMKMP5W5K617		<b>4b. EIN</b> 586002028	mt	Recipient Account Number oer o report multiple grants, use			uarterly mi-Annual nnual nal
7. Basis of Accounting		8. Project/Grant Perio	d				orting Period End Date
Cash Accrual		From: 03/23/2018	<b>To</b> 09/	: /30/2099		(Monta 09/30/2	<b>h, Day, Year)</b> 2022
10. TRANSACTIONS (Use lines a-c for single or mu	ltiple grant r	eporting)	II.			Cumu	lative
Federal Cash: (To report mui	ltiple grants,	also use FFR attachme	nt)		-1/		
a. Cash Receipts							\$23,735,787.00
b. Cash Disbursements							\$23,451,195.97
c. Cash on hand (line a min	nus b)						\$284,591.03
Federal Expenditures and U	nobligated B	alance: Do not complet	te this section if reportin	g on multiple awards.			
d. Total Federal funds auth	horized						\$23,735,787.00
e. Federal share of expendi	itures						\$23,451,195.97
f. Federal share of unliquid	dated obligat	ions					\$0.00
g. Total Federal share (sum	n of line e plu	s line f)					\$23,451,195.97
h. Unobligated balance of l	Federal fund	s (line d minus g)					\$284,591.03
Recipient Share: Do not com	plete this sec	tion if reporting on mul	tiple awards.				
i. Total recipient share requ	uired						\$3,574,441.80
j. Recipient share of expen	ditures						\$3,112,554.65
k. Remaining recipient sha	ire to be pro	vided (line i minus j)					\$461,887.15
Program Income: Do not con	mplete this se	ction if reporting on mi	ultiple awards.				
l. Total Federal program in							\$0.00
m. Program income expen					1		\$0.00
n. Program Income expend	ded in accord	lance with the addition	alternative		1		\$0.00
o. Unexpended program in	come (line l	minus line m and line n	)				\$0.00
Federal Interest:							
p. Total Federal interest ea					1		\$35,050.30
q. Federal interest expendi	itures						\$0.00
r. Remaining Federal inter	rest to be exp	ended (line p minus q)					\$35,050.30
1. Indirect Expense a.	b.	c.		d.	e.		f.
Туре	Rate	Period From	Period To	Base	Amount Charge		Federal Share
	0.00%			\$0.00		\$0.00	\$0.00
			g. Total	\$0.00		\$0.00	\$0.00
12 D							

b. State Interest Expended: Enter the current year amount expended (not cumulative)			\$0.00	
c. Program Income Earned: Enter the current year amount earned. (not cumulative)			\$0.00	
d. Program Income Expended: Enter the amount of Program Income expended in the current year (not cum	mulative)		\$0.00	
e. Program Income Earned Breakdown: List each source of program income individually next to each amount (federal interest earned is not program income).				
Source of program income		Amount	Delete	
e. 1		\$0.00		
	Total:		\$0.00	
f. Comments: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation:				
13. Certification: By signing this report, I certify to the best of my knowledge and belief that the report is true, complet e, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set fo rth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent informat ion, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, f alse statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812).				
rth in the terms and conditions of the Federal award. I am aware that any ion, or the omission of any material fact, may subject me to criminal, civil calse statements, false claims or otherwise. (U.S. Code Title 18, Section 1001)	e for the purpose false, fictitious, o or administrative	s and objectives s or fraudulent info e penalties for fra	et fo rmat ud, f	
rth in the terms and conditions of the Federal award. I am aware that any ion, or the omission of any material fact, may subject me to criminal, civil calse statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 3801-3812).  a. Typed or Printed Name and Title of Authorized Certifying Official	e for the purpose false, fictitious, o or administrative	s and objectives s or fraudulent info e penalties for fra ctions 3729-3730	et fo rmat ud, f	
rth in the terms and conditions of the Federal award. I am aware that any ion, or the omission of any material fact, may subject me to criminal, civil of alse statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 3801-3812).  a. Typed or Printed Name and Title of Authorized Certifying Official Capture Sterling  Certification Title  d. E	e for the purpose false, fictitious, o or administrative 1 and Title 31, Se	s and objectives s or fraudulent info e penalties for fra ctions 3729-3730	et fo rmat ud, f	

## Report Attachment (For reporting multiple grants)

14. List Information below for each grant covered by this report.		
Federal Grant Number	Recipient Account Number	Cumulative Federal Cas h Disbursement
		\$0.00
	TOTAL (Should correspond to the amount on Line 10b on Page 1)	\$0.00

#### U.S. ELECTION ASSISTANCE COMMISSION

## Progress Report Section I: Cover Page

OMB CONTROL No.: 3265-0022 Expiration Date: 04/30/2025

	7 0 1 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Grant In	formation
1. State or Territory	2. Federal Grant or Other Identifying Number Assigned by Federal Agency EAC-ELSEC22GA
3. Grant Type:	
101 251 Election Security Other [e.g., CARES]	
Describe Other	
Report In	formation
4. Report Type:	
☐ Semi-Annual     Annual     Final     Other	
Describe Other	
5. Report Period	
<b>Start Date (Month, Day, Year)</b> 10/01/2021	End Date (Month, Day, Year) 09/30/2022
Section II: Progre	ess and Narrative
Instructions: Reports due for the period ending March 31 should describe the activi ber 30 should cover the previous 12- month period. Final reports should cover the et Additional guidance can be found on our website: https://www.eac.gov/payments-an EAC grants reports will be made publicly available. Therefore, your report narrative * Be written in clear, concise, and plain language * Not include sensitive confidential information	ntire performance period from the start of the grant. nd-grants/financial-progress-reporting
6. Describe in detail what happened during this reporting period and explain how yor Plan/Program Narrative. (Note: Your activities should align with your category expersesponse as applicable.)	
Check if no activity during this reporting period.	
under the Election Integrity Act passed by the General Assembly and signed by the Gove ntee voting and post election reporting by counties. Provided here are the activities by spehanges to the absentee ballot request process, the state embarked on robust advertising a al advertising. The move to using the Drivers License Number instead of the signature as ber of rejections drop in the primaries. We also implemented another part of the Election f ballots cast by election night. This was to provide transparency to the public and increas goal in mind, our office went beyond the minimum that the law called for and built an on ss that allows them to see the number and type of ballots cast (early, absentee, etc.), regis them. It can be accesses at https://sos.ga.gov/election-data-hub. It also will allow for com on on vionig because bad actors could not make claims about voter suppression because ncreasing daily in a normal way. Voter Registration: During this period we had to do a co	and Public Relations campaigns. The avenues were earned media and television and digit the key identifier needed to be explained to voters. It was successful as we saw the num Integrity Act that required that the state work with the counties to establish the number of setheir confidence in the outcomes and combat the continuing disinformation. With that the data hub. The data hub is an online tool that is available to anyone with internet accestered voters by county, and the status of absentee ballot requests by county and compare paparing historical election data. This tool was very successful in beating back disinformat it showed the record turnouts of of voter fraud because people could see the vote totals is puple of things in parallel. First, we need to reinforce our solid, but aging Voter Registrati githat system with a new system that will be Salesforce based and house on the FedRamp or registration system is called GARVIS (Georgia Registered Voter Information System), velop the training materials for county officials. Other: This is a category for items that dis, Shipping costs for election equipment and voting materials, and project management so enhancements to the our Center for Elections equipment. This is where we conduct both Company to provide a security guard for that same facility given the increased threat envi
7. Provide a description of any training conducted, including security training.	
Check if no training was conducted during this reporting period.	
8. Report on the number and type of articles of voting equipment obtained with the	funds. Include the amount expended on the expenditure chart
Check if no voting equipment purchased during this reporting period.	nunus. menude the amount expended on the expenditure chart.
9. Subgrants (if applicable)	
Check if no subgrants were made during this reporting period.	
Describe the activities carried out by your subgrantees during the reporting period.	
10. Provide a breakdown of aggregate sub-award expenditures across major categor with \$0.00 Total expenses will automatically calculate. Please verify totals prior to su	

**Subaward Federal Expenditures** 

Category

Voting Equipment		\$0.00
Voting Processes		\$0.00
Voter Registration Systems		\$0.00
Election Auditing		\$0.00
Cyber and Physical Security		\$0.00
Voter Education		\$0.00
Accessibility		\$0.00
Other:		\$0.00
Total		\$0.00
11. Match (if applicable)	***************************************	
Check if match not required.		
Describe how you are meeting or have met the matching requireme As was discussed earlier, in this period Georgia began the process of re FedRamp Cloud housed GARVIS (Georgia Registered Voter Informatic replaced all of the voting machines for all 159 counties. The first phase line Voter Registration, the Absentee Ballot Request Portal, our "My Vo	placing and enhancing the functionality of our voter registratio on System) was funded with remaining state monies from Geo of GARVIS, the public facing half of the system was used in the ter Page" where voters can see sample ballots and find early vo-	rgia's capital project from 2019 wherein we he 2022 General Election. This included On
Section Secti	on III: Challenges and Changes	
12. Issues Encountered		
Check if no major issues encountered during this reporting p	eriod.	
Describe how and whether the issues were resolved. Also, briefly of	discuss the implications of any unresolved issues or concern	18.
13. Describe any significant changes to your program during the rej developments that improved program efficiency and/or service deliv		nn/Program Narrative or favorable
Check if no significant changes were made during this report	ing period.	
From our original State Plan we added the launch of the new voter regis o enhanced security by moving the data to the FedRamp Cloud.	stration system, GARVIS. This enhanced usability for both vot	ers and county election administrators. It als
Sec	ction IV: Expenditures	
e appropriate expense categories for #14. If you do not have expens	egories. Subaward expense totals identified in section #10 s es for a particular category please populate the field with \$	
e appropriate expense categories for #14. If you do not have expense culate. Please verify totals prior to submission.  Expenditures should be consistent with the your financial reports. (EAC uses the difference of the submission)	es for a particular category please populate the field with S  activities described in your narrative	0.00 Total expenses will automatically cal
e appropriate expense categories for #14. If you do not have expens culate. Please verify totals prior to submission.  Expenditures should be consistent with the	es for a particular category please populate the field with S  e activities described in your narrative rence between your current and previ	0.00 Total expenses will automatically cal and with the amounts in ious period FFR to calcula
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Phone Number Email Address gsterling@sos.ga.gov

