

# Election Assistance Commission HAVA Formula Progress Report

Updated July 2023

## Section I: Cover Page

### Grant Information

1. State or Territory	2. Federal Grant or Other Identifying Number Assigned by Federal Agency
3. Grant Type	<input type="radio"/> 101 <input type="radio"/> 251 <input type="radio"/> Election Security
	<input type="radio"/> Other :

### Report Information

4. Report Type	<input type="radio"/> Semi-Annual <input type="radio"/> Annual <input type="radio"/> Final
	<input type="radio"/> Other:
5. Report Period	
Start Date ( <i>Month, Day, Year</i> )	End Date ( <i>Month, Day, Year</i> )

## Section II: Progress and Narrative

Instructions: Reports due for the period ending March 31 should describe the activities from the previous six-month period and reports due for the period ending September 30 should cover the previous 12-month period. Final reports should cover the entire performance period from the start of the grant. All expenses should be reported by reporting period and cumulative, with cumulative totals matching what is reported on the FFR.

Additional guidance can be found on our website: <https://www.eac.gov/payments-and-grants/financial-progress-reporting>

EAC grants reports will be made publicly available. Therefore, your report narrative should:

- Be written in clear, concise, and plain language
- Not include sensitive confidential information

Check if no grant activity during this reporting period.

<b>Comments (optional):</b>

6. For each of the following categories, *briefly* describe the activities carried out during the reporting period only and how you implemented the approved grant activities in accordance with your Program Narrative.

For each category provide all federal expenditures (including federal interest and subaward expenditures) and state match expenditures (including state interest, program income, and subaward expenditures) for the reporting period only. (*Note:* You will be able to provide more details on subaward activities and expenditures in Section III).

<b>a. Voting Equipment</b>	
<input type="checkbox"/> Check if no activity for this category	
Federal:	Match:

<b>b. Voting Processes</b>	
<input type="checkbox"/> Check if no activity for this category	
Federal:	Match:

<b>c. Voter Registration Systems</b>	
<input type="checkbox"/> Check if no activity for this category	
Federal:	Match:

d. Election Auditing	
<input type="checkbox"/> Check if no activity for this category	
Federal:	Match:

e. Cyber Security	
<input type="checkbox"/> Check if no activity for this category	
Federal:	Match:

f. Physical Security	
<input type="checkbox"/> Check if no activity for this category	
Federal:	Match:

g. Voter Education	
<input type="checkbox"/> Check if no activity for this category	
Federal:	Match:

h. Accessibility	
<input type="checkbox"/> Check if no activity for this category	
Federal:	Match:

i. Other (write in):	
<input type="checkbox"/> Check if no activity for this category	
Federal:	Match:

7. Briefly describe any training including cyber security and other election-related training that occurred during the reporting period.	
<input type="checkbox"/> Check if no activity for this category	

8. Match (if applicable)

Describe how you will or have made the match available and identify the source of your match. (Note: For Election Security grants there is a two-year deadline from the date of disbursement to make match funds available).

Check if no activity for this category

**Section III: Additional Subaward Information**

9. Subgrants (if applicable)
<input type="checkbox"/> Check if no activity for this category
a. Briefly describe your subaward program, including how many subawards were made, and how your program reflects the needs of local communities.
b. Identify whether subgrants were provided as an advance or on a cost-reimbursement basis. If provided as an advance, confirm whether funds were deposited in an interest-bearing account per HAVA 254(b)(1)(d) and the Uniform Guidance §200.305(b)(7,8) and §200.332(a)(2,3).

10. Subaward Expenditures by Category Provide a breakdown subaward expenditures across major categories for the reporting period only.		
<b>Category</b>	<b>Federal Expenditures</b>	<b>Match Expenditures</b>
Voting Equipment		
Voting Processes		
Voter Registration Systems		
Election Auditing		
Cyber Security		
Physical Security		
Voter Education		
Accessibility		
Other:		
<b>Total</b>		

**Section IV: Challenges and Changes**

11. Issues Encountered
<input type="checkbox"/> Check if no major issues were encountered during this reporting period
a. Describe any issues that arose during the implementation of the project.
b. Describe how and whether the issues were resolved. Also, briefly discuss the implications of any unresolved issues or concerns.
12. Describe any significant changes to your program during the reporting period, including changes to your original State Plan or Program Narrative or favorable developments that improved program efficiency and/or service delivery.
<input type="checkbox"/> Check if no significant changes were made during this reporting period

**Section V: Expenditure Table**

13. The Expenditure Table includes cumulative and current reporting period data.

***Electronic Submission***

“Current Reporting Period” amounts are auto-filled based on your response to Section II, question 6.

“Previous Expenditures” refers to cumulative expenditures from the previous annual reporting period. If this is your first time entering cumulative data, please enter the amounts. Once your initial report has been submitted, the column will be auto-filled for future reports. Review the table and ensure the amounts are accurate and make corrections as needed prior to submission.

Expenditures should be consistent with activities described in your narrative and with the amounts in your federal financial report

***Paper Submission***

Please enter the Federal and State match expenditures for both the current reporting period and cumulative expenditures from the start of the grant performance period. Write in any costs that do not fit into the predefined categories next to “Other”.

“Current Reporting Period” amounts should be the same amounts reported in question #6a-i. “Previous Expenditures” refers to cumulative expenditures from the previous annual reporting period. The column for “Current Cumulative Expenditures” will automatically calculate cumulative expenditures for the current reporting period.

Expenditures should be consistent with activities described in your narrative and with the amounts in your federal financial report.

<b>Federal Expenditures</b>			
Category	<i>Previous Expenditures</i>	<i>Current Reporting Period Expenditures</i>	<i>Current Cumulative Expenditures</i>
Voting Equipment			
Voting Processes			
Voter Registration Systems			
Election Auditing			
Cyber Security			
Physical Security			
Voter Education			
Accessibility			
Other:			
<b>Total</b>			

<b>State Match Expenditures</b>			
Category	<i>Previous Expenditures</i>	<i>Current Reporting Period Expenditures</i>	<i>Current Cumulative Expenditures</i>
Voting Equipment			
Voting Processes			
Voter Registration Systems			
Election Auditing			
Cyber Security			
Physical Security			
Voter Education			
Accessibility			
Other:			
<b>Total</b>			

## Section VI: Final Assessment

The final progress report is your opportunity to share the significant successes of your project and the results your project achieved. The report should cover the entire period of performance.

14. Self-Assessment – Assess whether the goals set out in your State Plan and/or Program Narrative were met as intended during the grant program. Highlight any needs that were not met, ongoing, or under-resourced.
15. Impact and Achievements - Describe how this grant program impacted elections in your state/territory. Highlight your accomplishments and successes.
16. Lessons Learned – Describe any lessons learned during the grant that may be replicated, expanded, or used as a model for other state programs.



**Section VII: Certification**

17. Name and Contact of the authorized certifying official.	
First and Last Name	Title
Phone Number	Email Address
18. Signature of Certifying Official	