



RECEIVED
U.S. ELECTION ASSISTANCE
COMMISSION

2007 JAN 29 PM 12:08

STATE OF MISSISSIPPI
SECRETARY OF STATE
ERIC CLARK

401 MISSISSIPPI STREET
POST OFFICE BOX 136
JACKSON, MISSISSIPPI 39205-0136

TELEPHONE (601) 359-1350
FACSIMILE (601) 359-1499

January 26, 2007

Election Assistance Commission
Mr. Thomas R. Wilkey
Amended 102 Reports
1225 New York Avenue, NW, Suite 1100
Washington, D.C. 20005

RE: 102 Reports for 2004 and 2005

Dear Mr. Wilkey:

Enclosed please find our amended 102 Reports for 2004 and 2005. Please accept these reports to replace previously filed reports. We amended form SF 269 per your instructions.

If you have any questions, please do not hesitate to call my office at (601)359-1350. Thank you.

Sincerely,

A handwritten signature in black ink, appearing to read "Eric Clark", with a long horizontal line extending to the right.

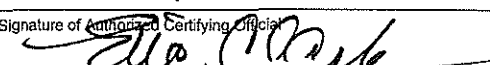
ERIC CLARK
Secretary of State

EC:LDR/slp

FINANCIAL STATUS REPORT
(Long Form)

(Follow instructions on the back)

RECEIVED
U.S. ELECTION ASSISTANCE
COMMISSION
OMB Approval No. 0348-0039
Page of 1
2007 JAN 29 PM 12:10

1. Federal Agency and Organizational Element to Which Report is Submitted Election Assistance Commission		2. Federal Grant or Other Identifying Number Assigned By Federal Agency 39.011 Election Reform Payments, Title I, Section 2007		
3. Recipient Organization (Name and complete address, including ZIP code) Mississippi Secretary of State, PO Box 136, Jackson, MS 39205-0136				
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 checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual				
8. Funding/Grant Period (See instructions) From: (Month, Day, Year) 8/1/2003		To: (Month, Day, Year) 6/6/2006		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	I This Period	III Cumulative
a. Total outlays		0.00	0.00	0.00
b. Refunds, rebates, etc.		0.00	0.00	0.00
c. Program income used in accordance with the deduction alternative		0.00	0.00	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	0.00	0.00
f. Other Federal awards authorized to be used to match this award		0.00	0.00	0.00
g. Program income used in accordance with the matching or cost sharing alternative		0.00	0.00	0.00
h. All other recipient outlays not shown on lines e, f or g		0.00	0.00	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				0.00
l. Recipient's share of unliquidated obligations				0.00
m. Federal share of unliquidated obligations				0.00
n. Total Federal share (sum of lines j and m)				0.00
o. Total Federal funds authorized for this funding period				1,815,615.57
p. Unobligated balance of Federal funds (Line o minus line n)				1,815,615.57
Program income, consisting of:				
q. Disbursed program income shown on lines c and/or g above				0.00
r. Disbursed program income using the addition alternative				0.00
s. Undisbursed program income				0.00
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) <input checked="" 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. \$37,548.57 of line 10 o. is interest earned for this reporting period and interest earned to date.				
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 Eric Clark, Secretary of State			Telephone (Area code, number and extension) 601-359-6338	
Signature of Authorized Certifying Official 			Date Report Submitted January 26, 2007	

RECEIVED
U.S. ELECTION ASSISTANCE
COMMISSION

2007 JAN 29 PM 12: 10

102 Funds Calendar Year 2004

\$0 funds expended

102 Funds Calendar Year 2005

\$0 funds expended