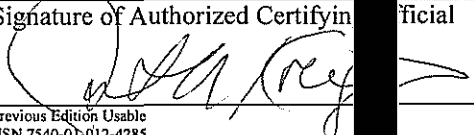


FINANCIAL STATUS REPORT
(Long Form)
(Follow instructions on the back)

ORIGINAL

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 Help America Vote Act of 2002		OMB Approval No. 0348-0039		Page 1 of 1 pages	
3. Recipient Organization (Name and complete address, including ZIP code) Commonwealth of PA Department of State 302 North Office Building Harrisburg, PA 17120							
4. Employer Identification Number 23-6003081		5. Recipient Account Number of Identifying Number 19-S80710010200 (Section 102)		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) 04/15/2003		To: (Month, Day, Year) 01/01/2006		9. Period Covered by this Report From: (Month, Day, Year) 01/01/04		To: (Month, Day, Year) 12/31/2004	
10. Transactions				I Previously Reported		II This Period	
				III Cumulative			
a. Total outlays				0.00		0.00	
b. Refunds, rebates, etc.				0.00		0.00	
c. Program income used in accordance with the deduction alternative				0.00		0.00	
d. Net outlays (Line a, less the sum of lines b and c)				0.00		0.00	
Recipient's share of net outlays, consisting of:							
e. Third party (in-kind) contributions				0.00		0.00	
f. Other Federal awards authorized to be used to match this award				0.00		0.00	
g. Program income used in accordance with the matching or cost sharing alternative				0.00		0.00	
h. All other recipient outlays not shown on lines e, f, or g				0.00		0.00	
i. Total recipient share of net outlays (Sum of lines e, f, g, and h)				0.00		0.00	
j. Federal share of net outlays (Line d less line i)				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						22,916,952.00	
p. Unobligated balance of Federal funds (Line o minus line n)						22,916,952.00	
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				883,335.99		609,304.35	
t. Total program income realized (Sum of lines q, r and s)				883,335.99		1,492,640.34	
11. Indirect Expense		a. Type of Expense (Place "X" in appropriate box) <input type="checkbox"/> Discretionary <input type="checkbox"/> Predetermined <input type="checkbox"/> Final <input checked="" type="checkbox"/> Fixed					
		b. Rate		c. Base N/A		d. Total Amount 0.00	
		e. Federal Share 0.00					
12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation. Section 8 – Funding period to date has not been defined by the awarding agency. Period used represents the date of the initial receipt of funds. Section 10 s – Interest earned on the Title I, Section 102 funds.							
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 David A. Kreiger, Chief Contract Review/Federal Accounting				Telephone (Area code, number and extension) (717) 783-7880			
Signature of Authorized Certifying Official 				Date Report Submitted February 17, 2005			