FEDERAL FINANCIAL REPORT

(Follow form instructions)

Federal Agency and Organizational Element to Which Report is Submitted				Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants use EED Attachment)						ge 1	of	
US Election Assistance Commission				(To report multiple grants, use FFR Attachment) Election Security Grant						•	1	
											pages	
	-	ame and complete address		5.								
Arizona De	epartment of	f State, 1700 W Wa	ishington St, 7th I	-loor, Pho	enix, A∠ 850	007						
4a. DUNS Number 4b. EIN			4c. Account Nu					6. Report Type ☐ Quarterly ☐ Semi-Annual				
						■ An	Annual					
							□ Fin	al	Cash	□ A	ccrual	
8. Project/Gran				,					ing Period End Date			
From: (Month, Day, Year)				To: (Month, Day, Year)				(Month, Day, Year)				
03/30/2018			03/22/202	03/22/2023 09/3				30/2019				
10. Transact	tions								Cumulati	ve		
(Use lines a-d	c for single or I	multiple grant reporting)										
Federal Cash	n (To report m	ultiple grants, also use l	FFR Attachment):									
a. Cash Receipts								0.00				
b. Cash Disbursements							0.00					
	Hand (line a m	·									0.00	
,	o for single gra	. 0,										
		Unobligated Balance:								7.46	00.075.00	
d. Total Federal funds authorized							7,463,675.00 2,452,425.17					
e. Federal share of expenditures f. Federal share of unliquidated obligations										2,40		
g. Total Federal share (sum of lines e and f)								0.00 2,452,425.17				
h. Unobligated balance of Federal funds (line d minus g)								5,011,249.83				
Recipient Sh		1	07								1,210.00	
i. Total red	cipient share re	quired								37	73,183.75	
j. Recipient share of expenditures							373,183.75					
		are to be provided (line i m	ninus j)								0.00	
Program Inco											20.040.00	
	deral program in		1 1 2 1 2							20	08,219.83	
		nded in accordance with the										
		ded in accordance with the ncome (line I minus line m								20	08,219.83	
о. опохрог	a. Type	b. Rate	c. Period From	Period To	d. Base	e. /	Amount (Charged	f. Federal S		70,210.00	
11. Indirect	71							<u> </u>				
Expense												
				g. Totals:								
 Remarks: Submitting revisions to F interest totals under pro- 	Attach any exp	planations deemed necess FR. While working through 251 reconciliatio, our office decided to use expenditures from	sary or information requirement was discovered that 251 interest was discovered that 251 interest was a county operating budgets as match.	ired by Feder vas mistakenly include	al sponsoring at d on the 2018 & 2019 elect	gency in compli- tion security FFRs. The 2	iance wit	h governing le	egislation: saction left off of it. This	revised repo	ort reflects corrected	
		ng this report, I certify th							TTO: THE TOPOR MORAGO	J under 1 1 1 1	o materialization.	
any false,	fictitious, or fi	raudulent information m	ay subject me to crim	inal, civil, or	administrative	penalities. (U	.S. Cod	e, Title 18, Se	ection 1001)			
a. Typed or Printed Name and Title of Authorized Certifying Official c. Telepho								ne Number				
Sarah S	chnupp											
	• •					d.	Email ac	dress				
h Signature of Authorized Certifying Official								port Submitted (Month, Day, Year)				
								/2020				
		<i>v v</i>				14.	Agency	use only:				
							Standa	d Form 425				

Paperwork Burden Statement

According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is 0348-0061. Public reporting burden for this collection of information is estimated to average 1.5 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0060), Washington, DC 20503.

OMB Approval Number: 0348-0061 Expiration Date: 10/31/2011