**ELECTIONS, DELAWARE DEPARTMENT OF**

905 S GOVERNERS AVE STE 170, DOVER, DE 199044112

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### Federal Financial Report

1. **Cumulative Total:**
   - Total Federal funds authorized: $6,036,503.00
   - Federal share of expenditures: $5,115,408.85
   - Federal share of unliquidated obligations: $761,905.35
   - Total Federal share (sum of above): $5,877,314.20
   - Unobligated balance of Federal funds (line d minus g): $159,188.80

2. **Recipient Share:**
   - Total recipient share required: $757,301.00
   - Recipient share of expenditures: $10,509,512.31
   - Remaining recipient share to be provided (line i minus j): $0.00

3. **Program Income:**
   - Total Federal share of program income earned: $19,742.00
   - Program income expended in accordance with the deduction alternative: $0.00
   - Program income expended in accordance with the addition alternative: $0.00
   - Unexpended program income (line l minus line m and line n): $19,742.00

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### Transactions

#### Federal Cash

- **Cash Receipts:** $6,036,503.00
- **Cash Disbursements:** $5,115,408.85
- **Cash on Hand (line a minus b):** $921,094.15

#### Federal Expenditures and Unobligated Balance

- **Total Federal funds authorized:** $6,036,503.00
- **Federal share of expenditures:** $5,115,408.85
- **Federal share of unliquidated obligations:** $761,905.35
- **Total Federal share (sum of lines e and f):** $5,877,314.20
- **Unobligated balance of Federal funds (line d minus g):** $159,188.80

#### Recipient Share

- **Total recipient share required:** $757,301.00
- **Recipient share of expenditures:** $10,509,512.31
- **Remaining recipient share to be provided (line i minus j):** $0.00

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### Remarks

Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation:

*Please provide the following information:

**11. Indirect Expense**

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| g. Totals: | $0.00 | $0.00 | $0.00 |

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**12. Certification:** By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and intent set forth in the award documents. I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 18, Section 1001)

**Sturgeon, Sommer**

**FISCAL ADMINISTRATIVE OFFICER**

**Sturgeon, Sommer**

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**Standard Form 425**

**OMB Approval Number:** 4040-0014

**Expiration Date:** 02/28/2025

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**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 4040-0014. Public reporting burden for this collection of information is estimated to average 1 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. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: US Department of Health & Human Services, OS/OCIO/PRA, 200 Independence Ave, SW, Suite 336-E, Washington DC 20201. Attention: PRA Reports Clearance Officer
Federal Agency & Organization: ELECTION ASSISTANCE COMMISSION

Federal Grant ID: DE20101001

Recipient Organization: ELECTIONS, DELAWARE DEPARTMENT OF
905 S GOVERNERS AVE STE 170, DOVER, DE 199044112

UEI: 

UEI Status when Certified: 

EIN: 

Reporting Period End Date: March 31, 2022

Status: Awarding Agency Approval

Remarks: Please provide the following information:

State interest earned (current fiscal year): $0
State interest expended (current fiscal year): $0
Program income earned (current fiscal year): $
Program income earned breakdown (current fiscal year): $ Source: e.g. Sale of registration list
Program income expended (current fiscal year): $

No interest earned during this fiscal year.

Federal Agency Review

Reviewer Name
Phone #
Email
Review Date
Review Comments
3. EAC Progress Report

1. State or Territory:
   Delaware

2. Grant Number:
   DE20101001

3. Report:
   Semi-Annual (Oct 1 - March 31)

4. Grant:
   Election Security

5. Reporting Period Start Date
   10/01/2021

6. Reporting Period End Date
   03/31/2022

4. Progress and Narrative

7. Describe in detail what happened during this reporting period and explain how you implemented the approved grant activities in accordance with your State Plan/Program Narrative. (Note: Your activities should align with your Grant Cost Categories Table.)

   We have had no significant activity during this reporting period. We have ordered new poll books and voting machines to be delivered when available, and therefore have encumbered $694,450.00 for this expenditure.

8. Describe any significant changes to your program during the project, including changes to your original State
Plan/Program Narrative or favorable developments that improved program efficiency and/or service delivery.
N/A

9. Issues Encountered:

Describe all major issues that arose during the implementation of the project and the reasons why established goals were not met, if applicable. Address each issue separately and describe whether and how the issues were resolved. Also, briefly discuss the implications of any unresolved issues or concerns.
N/A

10. Provide a description of any training conducted, including security training.
N/A

11. Subgrants:

Did your office provide subawards to local jurisdictions during this reporting period?
No

12. Match:

Describe how you are meeting or have met the matching requirement.

We have met our state match using state funding from 2018 grant match.

13. Report on the number and type of articles of voting equipment obtained with the funds. Include the amount expended on the expenditure table.

We have not expended any funding during this reporting period on voting equipment. However, we have encumbered $694,450.00 for new voting equipment to be delivered when available.

5. Expenditures


GRANT COST CATEGORIES - FEDERAL

Voting Equipment and Processes: $694,450
Total: $694,450

Comments: We have had no expenditures during this period. We did encumber $694,450.00 for Voting Equipment and Processes.

15. GRANT COST CATEGORIES - MATCH

Other (Specify below): $247
Total: $247

Comments: Technology: $247.07

7. Expenditures

16. Confirm Total Grant Expenditure Amounts
8. Certification

Name and Contact of the authorized certifying official of the recipient.

First Name
SOMMER

Last Name
STURGEON

Title
FISCAL ADMINISTRATIVE OFFICER

Phone Number

Email Address

17. Add another contact to send a copy of submission confirmation and edit link?

Signature of Certifying Official:

Signature of: SOMMER STURGEON
Thank you. Your Semi-Annual (Oct 1 - March 31) progress report for Election Security has been submitted to the EAC. Please keep the PDF download of your submission as grant record.