#### **FEDERAL FINANCIAL REPORT**

(Follow form instructions)

1. Federal A	gency and Org	janizationa	I Element to Which R		Federal Grant or Other Identifying Number Assigned by						
							deral Agency (To report multiple grants, use FFR Attachment)  A20101CARES				
3. Recipient Organization (Name and complete address including Zip code)											
SECRETARY OF THE COMMONWEALTH, MASSACHUSETTS											
1 ASHBURTON PL RM 1717, BOSTON, MA 021081518											
4a. DUNS N		4b. I	EIN :	5. Recipient Account Nu	ımber or Iden	tifying Numl	ber 6. Rep	ort Type	7. Basis of Accounting		
				(To report multiple gran	ts, use FFR A	Attachment)	☐ Qu		⊠ Cash		
							☐ Sei	mi-Annual	☐ Accural		
							⊠ Fin				
8. Project/Gr	rant Period (Mo	Year)				9. Reportir	ng Period End D	ate (Month, Day, Year)			
From: March 28, 2020				To: December 31, 2020 Dece		Decemb	ember 31, 2020				
10. Transac	tions						Cumulative				
(Use lines a-	-c for single or	combined	multiple grant reporti	ng)							
Federal Cas	sh (To report r	multiple gr	rants separately, als	o use FFR Attachmen	t):						
a. Cash R	teceipts								\$8,325,918.00		
b. Cash D	isbursements								\$8,325,918.00		
c. Cash o	n Hand (line a	minus b)							\$0.00		
	o for single gra										
Federal Exp	enditures and	d Unobliga	ated Balance:					ı			
d. Total Federal funds authorized								\$8,325,918.00			
	I share of expe								\$8,325,918.00		
f. Federal	share of unliqu	uidated obl	igations						\$0.00		
g. Total F	ederal share (s	sum of lines	s e and f)						\$8,325,918.00		
h. Unoblig	jated balance o	of Federal t	funds (line d minus g	)					\$0.00		
Recipient S	hare:										
	cipient share re							\$1,665,183.00			
j. Recipient share of expenditures								\$2,762,214.00			
		hare to be	provided (line i minus	s j)					\$0.00		
Program Inc								1			
	deral share of								\$12,519.00		
	•		ccordance with the de					\$0.00			
			cordance with the ad						\$12,519.00		
	o. Unexpended program income (line I minus line m and line n)				_ A	t Channad	\$0.00				
11. Indirect Expense	а. туре	b. Rate	c. Period From	Period To	d. Base		e. Amour	nt Charged	f. Federal Share		
				g. Totals:		\$0.00		\$0.00	\$0.00		
12 Remarks	s: Attach anv e	ynlanation	s deemed necessary	or information required	hy Federal si	·	nency in co	·			
	•	•	c accinica necessary	o. miormanon reguired	ay i dudiai sp	Jonesoning ag	, 0110y 111 CC	pance with 9	jovoming registration.		
	rest Earned:										
expenditure	es, disbursem	ents and o	cash receipts are for	best of my knowledge r the purposes and int criminal, civil, or adm	ent set forth	in the awar	rd docume	ents. I am awar	e that any false,		
a. Typed or Printed Name and Title of Authorized Certifying Official							c. Telephone (Area code, number, and extension)				
Tassinari, Michelle							d. Email Address				
Director, Elections Division											
·								e. Date Report Submitted (Month, Day, Year)			
Tassinari, Michelle								February 23, 2021			
	,					Stan	ndard Form 42	5			
							3 Approval Nu ration Date: 0	mber: 4040-0014 2/28/2022			

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 FINANCIAL REPORT

(Additional Page)

Federal Agency & Organization : Election Assistance Commission

Federal Grant ID : MA20101CARES

Recipient Organization : SECRETARY OF THE COMMONWEALTH, MASSACHUSETTS

1 ASHBURTON PL RM 1717, BOSTON, MA 021081518

DUNS Number

EIN

Reporting Period End Date : December 31, 2020

Status : Awarding Agency Approval
Remarks : State Interest Earned: \$0.00

State Interest Expended: \$0.00 Program Income Earned: \$0.00

Program Income Earned Breakdown: N/A

Program Income Expended: \$0.00

Report Status: Report Certified/Pending Agency Approval Page 2 of 2 Printed Date: Feb 24, 2021

# EAC Progress Report

Response ID:152 Data

1. Login
Please enter your userword and password to begin the Progress Narrative. If you require assistance or have any questions, please contact grants@eac.gov
2. Verification
reCAPTCHA answered
3. EAC Progress Report
1. State or Territory:  Massachusetts
2. Grant Number: MA20101CARES
3. Report: CARES (Off-cycle report only due February 28, 2021)
4. Grant: Please select only one. CARES
5. Reporting Period Start Date 03/28/2020
6. Reporting Period End Date 12/31/2020
7. DUNS/UEI:
8. EIN:
9. Recipient Organization:
Organization Name

Elections Division, Office Of The Secretary Of The Commonwealth

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# 4. Progress and Narrative

### 1. CARES Grant Specific:

#### Describe how you used the funds to address the pandemic.

The funds were used to support our voters and local election officials. For voters, the funds were used to print and distribute a postage prepaid vote by mail application to each registered voter, which was preaddressed to their local election official. The vote by mail ballot envelopes provided to voters were also preaddressed to the appropriate local election official and postage prepaid. To support local election officials, we provided personal protective equipment (PPE) including masks, hand sanitizer, gloves and cleaning supplies in addition to plexiglass shields. In some instances we purchased and distributed the PPE and in other instances we provided reimbursement to the cities and towns. We further provided reimbursement to cities and towns for drop boxes and security for those drop boxes, which were specifically authorized by a law passed relative to election administration during the pandemic. We also used the funds to rent additional voting and other equipment for local election election officials to assist with the processing of vote by mail ballots.

# 2. Describe the major issues you faced in dealing with the pandemic in the election cycle.

The pandemic created logistical issues for the voting process, both for voters and election officials. Many local election officials struggled with recruiting poll workers as well as finding suitable polling places large enough to allow social distancing but still hold the necessary tables, voting booths and other equipment while remaining accessible. Since local election offices were working on reduced staffing each day, processing the increased applications and ballots was challenging as well.

# 3. Describe in detail what happened during this reporting period and explain how you implemented the approved grant activities.

In our request, we indicated that we would use the funds to expand voting by mail for both the state primary and state election, which would increase printing costs for additional ballots and envelopes and for postage. We expected to provide additional equipment for our municipalities for processing higher volumes of ballots by mail. And finally, we anticipated purchasing cleaning supplies and protective equipment for poll workers. Using our CARES funding, we printed additional mail-in ballots and new envelopes for our local election officials. We created "kits" for our local election officials, comprised of the ballot, instructions and the necessary envelopes so they did not have to manually stuff the envelopes. This was incredibly helpful to save time and ensure the required materials were included. The envelopes we printed for the local election officials were preaddressed and postage prepaid for each city and town. We created 351 postal permits (one for each municipality) with the funds being drawn down from our parent account. We were able to secure additional tabulation equipment for cities and towns as well as PPE, including masks, hand sanitizer and plexiglass shields. We used limited CARES funding to advertise the changes to the voting process implemented as a result of the pandemic including new deadlines. We also used our CARES funds to reimburse cities and towns for ballot drop boxes, additional PPE and for limited postage for mailing ballots to voters.

4. Provide a timeline and description of project activities funded to meet HAVA requirements. Provide an analysis of how

#### such activities conform to the submitted State Plan or Program Narrative as applicable.

June 2020: printing and delivery of new envelopes for vote by mail to local election officials

June 2020- November 2020: creation of 351 postal permits to pay for vote by mail applications and vote by mail ballots being returned by voters which was funded by a master account held by SOC (some postage was paid for using state funds and some using CARES funds).

July 2020: creating kits for local election officials including ballots, instructions and envelopes for mail-in voting for the primary July 2020: printing and mailing of vote by mail applications to each registered voter before state primary (paid for using state funds as a match, including postage)

July 2020-November 2020: rental of additional voting equipment for local election officials to process additional vote by mail ballots

August 2020: disbursement of PPE to local election officials for primary

September 2020: printing and mailing of vote by mail applications to each registered voter before state election (partially paid for using state funds as a match, including postage)

September 2020: creating kits for local election officials including ballots, instructions and envelopes for mail-in voting for the election

September 2020- December 2020: reimbursement to cities and towns for drop boxes, PPE and postage

October 2020: delivery of PPE to local election officials for state election

October 2020: ran PSAs about voting by mail

All of the above listed activities are exactly contemplated in our request for CARES funding.

5. Describe any significant changes to your program during the course of the project, or if the project was implemented differently than described in your original State Plan or Program Narrative.

Otherwise enter - no significant changes during this period.

No significant changes during this period.

6. Describe any favorable developments which enabled meeting time schedules and objectives sooner or at less cost than anticipated or producing more or different beneficial results than originally planned.

#### Otherwise enter N/A.

The printing of the envelopes with a new design was successful. In addition to including prepaid postage on the return envelopes, having them pre-addressed to the local election officials using the artwork created by the post office allowed them to be processed through the automated system, which appears to have shortened the delivery timeframe. Additionally, redesigning the inner envelopes that the voters must sign appears to have reduced our rejections rates, even with significantly more ballots being received.

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

#### Otherwise enter - No articles of voting equipment purchased during this period.

No article of voting equipment purchased during this period. As noted above, we rented additional equipment for our local election officials to supplement their existing equipment so they could more easily process the increased vote by mail ballots.

8. Provide a description of any security training conducted and the number of participants.

#### Otherwise enter - no security training conducted during this period.

As noted in our Security Funds reports, our cyber security team conducted both in person training (pre-pandemic) and virtual training. The in-person training had approximately 100 participants and was held in February 2020 as a table top exercise focusing on contingency planning and cross-training. Further, each user of the statewide database must go through cyber security training annually, which is an online program. Monthly newsletters are sent from the cyber security team in addition to weekly calls/virtual meetings by region for those wanting to participate. All training was paid for using HAVA Security Funds.

#### 9. Subgrants (if applicable):

Describe how you made funds available to local jurisdictions.

Provide a description of the major categories of subgrant activities local voting districts will accomplish with the funds.

#### Otherwise enter N/A.

Rather than issue subgrants, this Office either directly paid for items for local election officials (rental of equipment, printing of envelopes, postage, PPE) and provided reimbursement for allowable expenses such as ballot drop boxes, security for ballot drop boxes, PPE and postage.

#### 10. Match (if applicable):

Describe how you are meeting the matching requirement.

#### Otherwise enter - match not required.

In July, we created a mailer that was sent to all registered voters that included a vote by mail application, that was postage prepaid and pre-addressed back to their appropriate election official. Another mailing was done in mid-September but was limited to any voter who had not already submitted a vote by mail application. These costs were paid for using state funds qualifying as our required match.

#### 11. Issues Encountered:

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

#### Otherwise enter - no issues encountered.

We successfully met our established and only encountered one issue. We had budgeted for certain activities using the CARES funding. When legislation was passed to require a mailing to all registered voters that included a vote by mail application, which we had not included as part of our CARES budget, we requested state funds for such purpose. However, we had outside organizations arguing that we should use our CARES funding for the mailing which delayed the encumbrance of our state funds. Based on the previous guidance from the EAC and information on the EAC website, we believed that the mailing constituted

get out the vote" activity for which CARES funds could not be used, in addition to them not being budgeted for such purpose. A congressman had even requested an opinion from the EAC as to whether we could use CARES funds. If we had used our CARES funds for this mailing, we would not have complied with our objectives in our funding request and would not have been able to provide the direct support to our cities and towns for PPE, additional equipment and drop boxes. Luckily, we were able to secure state funds for this project and use our CARES funds for the purposes stated in our request.

#### 12. Upcoming Activities:

Provide a timeline and description of upcoming activities.

We have fully spent all CARES funds and matching funds.

# 5. Expenditures

# 13. Current Period Amount Expended and Unliquidated Obligations

# **CARES COST CATEGORIES**

	Federal	Match
Voting Processes:		
Staffing:	\$0.00	\$0.00
Security and Training:	\$30,799.00	\$0.00
Communications:	\$221,328.00	\$0.00
Supplies:	\$1,730,871.00	\$298,000.00
Total	\$8,338,437.00	\$2,762,214.00
Voting Equipment Rental	\$1,939,705.00	\$150,000.00
Printing and Supplies	\$3,089,391.00	\$1,094,509.00
Postage	\$1,326,363.00	\$1,219,705.00

**OMB CONTROL NUMBER: 3265-0020** 

# 6. Certification

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

#### **First Name**

Michelle

#### **Last Name**

Tassinari

### Title

Director and Legal Counsel, Elections Division

**Phone Number** 

**Email Address** 

Signature of Certifying Official:

Muchaktanh

Signature of: Michelle K. Tassinari

# 7. Report Submitted to EAC



Thank you, your progress report has been submitted to EAC. Please keep the PDF download of your submission as grant record.