

FEDERAL FINANCIAL REPORT

(Follow form instructions)

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 (To report multiple grants, use FFR Attachment)			
3. Recipient Organization (Name and complete address including Zip code) State, Florida Department Of 500 S Bronough St, Tallahassee, FL 323996504							
4a. DUNS Number	4b. EIN	5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR Attachment)		6. Report Type	7. Basis of Accounting		
				<input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual <input checked="" type="checkbox"/> Final	<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual		
8. Project/Grant Period (Month, Day, Year) From: March 28, 2020				9. Reporting Period End Date (Month, Day, Year) September 30, 2021			
To: December 31, 2020							
10. Transactions					Cumulative		
<i>(Use lines a-c for single or combined multiple grant reporting)</i>							
Federal Cash (To report multiple grants separately, also use FFR Attachment):							
a. Cash Receipts				\$16,925,212.05			
b. Cash Disbursements				\$16,925,212.05			
c. Cash on Hand (line a minus b)				\$0.00			
<i>(Use lines d-o for single grant reporting)</i>							
Federal Expenditures and Unobligated Balance:							
d. Total Federal funds authorized				\$20,253,853.00			
e. Federal share of expenditures				\$16,925,212.05			
f. Federal share of unliquidated obligations				\$0.00			
g. Total Federal share (sum of lines e and f)				\$16,925,212.05			
h. Unobligated balance of Federal funds (line d minus g)				\$3,328,640.95			
Recipient Share:							
i. Total recipient share required				\$4,050,770.63			
j. Recipient share of expenditures				\$4,050,770.63			
k. Remaining recipient share to be provided (line i minus j)				\$0.00			
Program Income:							
l. Total Federal share of program income earned				\$135,675.24			
m. Program income expended in accordance with the deduction alternative				\$0.00			
n. Program income expended in accordance with the addition alternative				\$0.00			
o. Unexpended program income (line l minus line m and line n)				\$135,675.24			
11. Indirect Expense	a. Type	b. Rate	c. Period From	Period To	d. Base	e. Amount Charged	f. Federal Share
g. Totals:					\$0.00	\$0.00	\$0.00
12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation: State Interest Earned: \$0							
13. 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)							
a. Typed or Printed Name and Title of Authorized Certifying Official				c. Telephone (Area code, number, and extension)			
Matthews, Maria				d. Email Address			
Director, Division of Elections							
b. Signature of Authorized Certifying Official				e. Date Report Submitted (Month, Day, Year)			
Matthews, Maria				December 29, 2021			

Standard Form 425
OMB Approval Number: 4040-0014
Expiration Date: 02/28/2022

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 hour 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

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(Additional Page)

Federal Agency & Organization : ELECTION ASSISTANCE COMMISSION

Federal Grant ID

Recipient Organization

DUNS Number

DUNS Status when Certified

EIN

Reporting Period End Date : September 30, 2021

Status : Awarding Agency Approval

Remarks : State Interest Earned: \$0
State Interest Expended: \$0
Program Income Earned: \$0
Program Income Earned Breakdown: \$0
Program Income Expended \$0

Federal Agency Review

Reviewer Name

Phone #

Email

Review Date

Review Comments

2021-2022 EAC Progress Report

3. EAC Progress Report

1. State or Territory:

Florida

2. Grant Number:

FL20101CARES

3. Report:

Final (Start of Grant - End)

4. Grant:

CARES

5. Reporting Period Start Date

03/28/2020

6. Reporting Period End Date

09/30/2021

4. Progress and Narrative

Final Progress Report:

The final report is your opportunity to share the significant features of your project and present information about the results your project achieved.

It should be written as if the reader has no previous knowledge of your project's activities. The report should cover the entire period of performance.

Review and Self-Assessment:

Review and highlight all activities that occurred during the implementation of the project, including an assessment of your performance.

State opted to make the entirety of these funds available through a grant program in the most expeditious manner possible and to maximize the full benefit of these funds to meet identified areas of specific county and collective critical need and support consistent with the intent and purpose of the CARES Act. Grantee's used these funds for projects in the following categories.

Vote By Mail

Staffing

Registration List Maintenance

Polling Sites-Equipment, Supplies

Polling Sites-Cleaning/Sanitation/Protective gear

Polling Sites- Additional Leasing Space

Communication-public outreach

Communications Targeted Voter mailer

Positive sentiment (score: 0.4)

7. CARES Grant Specific:

Describe in detail how you used the funds to address the pandemic.

State opted to make the entirety of these funds available through a grant program in the most expeditious manner possible and to maximize the full benefit of these funds to meet identified areas of specific county and collective critical need and support consistent with the intent and purpose of the CARES Act. Subsequent to the requisite state legislative appropriation, the funds became available on July 1, 2020. The grant amount was based on a flat base of \$50,000 per each of the 67 counties plus an additional amount based on the number of registered voters as of the book closing for the 2020 Presidential Preference Primary Election. The grant required the county to meet a 20% match. Local election officials were required to track all election related COVID-19 expenditures and identify those that may be counted to offset the match. The local election officials were provided a non-exhaustive list of allowable expenses that included but were not limited to the categories of allowable expenses set forth on the U.S. Elections Assistance Commission's website at: <https://www.eac.gov/payments-and-grants/2020-cares-act-grants>, and that were provided within the Notice of Awards Package that the EAC sent to states in April 2020. As to the match, the Department of State worked at the state level to identify and obtain pandemic related resources through possible donations and to track election related COVID19 expenditures to assist counties in meeting or offsetting the local match requirement through in-kind

contribution. For example, the state worked with the Division of Emergency Management and outside stakeholders to obtain sources of personal protective equipment such as hand sanitizers and dispensers for distribution to local election officials for the upcoming general elections. Additionally, expenses associated with an incentive program for state employees to serve as poll workers that has been permitted through an executive order 2020-149, to promote the recruitment, hiring and retention of poll workers, and may be used to offset the match.

Positive sentiment (score: 0.3)

8. Describe the major issues you faced in dealing with the pandemic and how you addressed or resolved those issues.

The most significant challenges to the CARES funds program were:

- The timing of the federal award which occurred after the state's legislative session had adjourned on March 13 which necessitated legislative budget plan approval outside the regularly scheduled legislative session
- The timely implementation and administration of a grant program within the existing state and regulatory processes for accountability and fiscal release.
- The identification of allowable expenses that could meet the 20% match under the CARES Act within the specific purpose. The match percentage was steep.
- The competing market place that affected the availability or timely delivery of certain goods and services for upcoming elections

Positive sentiment (score: 0.4)

9. Provide a description of any training conducted, including security training.

All training completed with CARES funds was done through our subgrantees.

Positive sentiment (score: 0.6)

10. Subgrants:

Did your office provide subawards to local jurisdictions during this reporting period?

Yes

11. Describe the activities carried out by your subgrantees during the reporting period.

State opted to make the entirety of these funds available through a grant program in the most expeditious manner possible and to maximize the full benefit of these funds to meet identified areas of specific county and collective critical need and support consistent with the intent and purpose of the CARES Act. Grantee's used these funds for projects in the following categories.

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Communications Targeted Voter mailer

Positive sentiment (score: 0.4)

Provide a breakdown of aggregate subawards expenditures across major categories.

Voter Registration Systems : \$38,873.19

Election Auditing : \$3,123,425.64

Communications : \$1,595,456.00

Other (Specify above) : \$4,891,786.56

Other (Specify above) : \$7,275,670.66

Total : \$16925212.05

12. Match:

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

We required the subgrantee's to meet a 20% match. Local election officials are required to track all election related COVID-19 expenditures and identify those that may be counted to offset the match.

Neutral sentiment (score: 0)

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

Through our subgrantee's below are our voting equipment (more than \$5,000) purchased

1 AS450 Address Printer

3 DS200 Printers

2 DS450 Scanners

7 DS850 Scanners

2 ImageCast Central kit

1 ImageCast Central Scanner

1 ImageCast G1130Windows

1 ImageCast Kit

Neutral sentiment (score: 0)

14. Impact:

Write an assessment of how your project has impacted the problems you were trying to solve. Were there unexpected benefits? Shortfalls?

The subgrant program was a success in that collectively at the state and local level everyone worked together to maximize the full benefit of these unexpected funds in a manner that identified specific and universal critical needs in an unprecedented pandemic situation and in a major presidential election year. We believe the subgrant program was executed in a manner consistent with the intent and purpose of the CARES Act.

Positive sentiment (score: 0.6)

15. Lessons Learned:

Provide a review of your successes and suggest ways that your experience may be helpful to others. Did you make permanent changes to your processes? What are some areas of potential improvement?

Our main recommendation is having a grace period due to supply chains. Due to the nature of the pandemic we had several issues with our grantee's having issue with supply chains, which made them unable to received funds due to the tight timeline of CARES. A grace period for items under contract accommodated supply chain constraints whether it be products or services.

Positive sentiment (score: 0.5)

5. Expenditures

16. CARES COST CATEGORIES - FEDERAL

Subgrants : \$16925212

Total : \$16925212

Comments:

17. CARES COST CATEGORIES - MATCH

Subgrants : \$4274694

Total : \$4274694

Comments:

7. Expenditures

18. Confirm Total CARES Expenditure Amounts

Federal : \$16,925,212.05

Match : \$4,274,694.00

Total : \$21199906.05

OMB CONTROL NUMBER: 3265-0020

8. Certification

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

First Name

Maria

Last Name

Matthews

Title

Director, Division of Elections

Phone Number

Email Address

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

Yes!

20.

First Name

Nicholas

Last Name

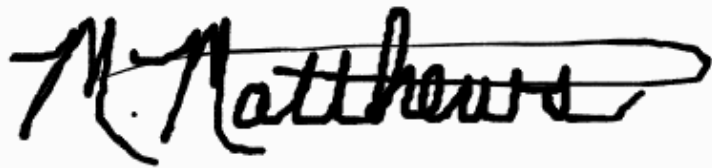
Grabowski

Title

Financial Administrator-Grants, Purchasing and Budget

Email Address

Signature of Certifying Official:

A handwritten signature in black ink that reads "M. Matthews". The signature is written in a cursive, flowing style.

Signature of: Maria Matthews

9. Report Submitted to EAC



Thank you. Your Final (Start of Grant - End) progress report for CARES has been submitted to the EAC. Please keep the PDF download of your submission as grant record.