

**FEDERAL FINANCIAL REPORT**

(Follow form instructions)

1. Federal Agency and Organizational Element to Which Report is Submitted  <b>ELECTION ASSISTANCE COMMISSION</b>				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)  <b>Secretary of State, Vermont</b> <b>128 State St, MONTPELIER, VT 056330006</b>							
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: <b>March 28, 2020</b>				9. Reporting Period End Date (Month, Day, Year) <b>March 31, 2021</b>			
To: <b>December 31, 2020</b>							
<b>10. Transactions</b>					Cumulative		
<i>(Use lines a-c for single or combined multiple grant reporting)</i>							
<b>Federal Cash (To report multiple grants separately, also use FFR Attachment):</b>							
a. Cash Receipts					\$2,104,112.06		
b. Cash Disbursements					\$2,104,112.06		
c. Cash on Hand (line a minus b)					\$0.00		
<i>(Use lines d-o for single grant reporting)</i>							
<b>Federal Expenditures and Unobligated Balance:</b>							
d. Total Federal funds authorized					\$3,000,000.00		
e. Federal share of expenditures					\$2,104,112.06		
f. Federal share of unliquidated obligations					\$0.00		
g. Total Federal share (sum of lines e and f)					\$2,104,112.06		
h. Unobligated balance of Federal funds (line d minus g)					\$895,887.94		
<b>Recipient Share:</b>							
i. Total recipient share required					\$600,000.00		
j. Recipient share of expenditures					\$526,575.29		
k. Remaining recipient share to be provided (line i minus j)					\$73,424.71		
<b>Program Income:</b>							
l. Total Federal share of program income earned					\$2,189.12		
m. Program income expended in accordance with the deduction alternative					\$0.00		
n. Program income expended in accordance with the addition alternative					\$2,189.12		
o. Unexpended program income (line l minus line m and line n)					\$0.00		
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: "Please provide the following information:							
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  <b>Drinkwine, Stacey</b> <b>Administrative Services Director IV</b>					c. Telephone (Area code, number, and extension)		
b. Signature of Authorized Certifying Official  <b>Drinkwine, Stacey</b>					d. Email Address		
					e. Date Report Submitted (Month, Day, Year) <b>August 13, 2021</b>		

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)

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Federal Agency & Organization : ELECTION ASSISTANCE COMMISSION

Federal Grant ID

Recipient Organization

DUNS Number

DUNS Status when Certified

EIN

Reporting Period End Date : March 31, 2021

Status : Awarding Agency Approval

Remarks : "Please provide the following information:

State interest earned (current fiscal year): \$

State interest expended (current fiscal year): \$

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): \$

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**Federal Agency Review**

Reviewer Name

Phone #

Email

Review Date

Review Comments

# 2020-2021 EAC Progress Report

## 3. EAC Progress Report

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**1. State or Territory:**

Vermont

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**2. Grant Number:**

VT20101CARES

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**3. Report:**

Final (Start of Grant - End)

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**4. Grant:**

**Please select only one.**

CARES

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**5. Reporting Period Start Date**

01/01/2020

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**6. Reporting Period End Date**

06/30/2021

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**7. Recipient Organization:**

**Organization Name**

Secretary Of State, Vermont

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**Street Address**

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**City**

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Montpelier

State

Zip

#### 4. Progress and Narrative

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##### **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.

The majority of funds were used to pay for the cost of mailing service and postage to send the ballots to all active registered voters in Vermont for the General Election and for the postcard mailing for the Primary Election. A substantial amount was also spent on the direct purchase of supplies for and reimbursement payments for costs incurred to the individual town and city clerks. Finally, funds were spent on administrative and translation services.

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##### **8. CARES Grant Specific:**

Describe in detail how you used the funds to address the pandemic and explain how you implemented the approved grant activities.

Funds were spent as described above.

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

The biggest challenge was putting the pieces in place to mail a ballot to all active voters for the General Election in a period of less than 5 months. Having never mailed ballots to all active voters, we essentially needed to stand up every piece of this process in a matter of months. This was a nearly impossible task, especially with our entire Division working remotely from home due to the virus, and we are proud that we were able to do so successfully.

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##### **10. Provide a description of any training conducted.**

Otherwise enter N/A.

N/A

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##### **11. 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.

N/A

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**12. Match (if applicable):**

**Describe how you are meeting the matching requirement.**

**Otherwise enter - match not required.**

Vermont's match was met through postage expenditures incurred between June and December 2020.

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**13. Impact:**

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

The effort was very successful, leading to approximately 75% of the total ballots cast for the General election being cast early by mail. Clerks reported a level of traffic at the polling places on election day that was small enough that they could operate their polling places safely without risk of transmission of the virus. We are not aware of any cases of COVID-19 that have been traced back to transmission at a polling place.

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**14. 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?**

The procedural changes we made were not permanent and expired at the end of 2020. However, there is a bill making its way through the Vermont legislature this session that would make many of the reforms we implemented last year permanent – most importantly the mailing of a ballot to all active voters for each General Election in Vermont going forward. The Vermont SOS would be pleased to assist any other states that are considering the policy of mailing a ballot proactively to all active voters by sharing our experiences and lessons learned from 2020. The proactive mailing of ballots to voters was very well-received by Vermonters, and polling has already shown that a large majority are in favor of making the process permanent.

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**5. Expenditures**

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**15. Current Period Amount Expended and Unliquidated Obligations**

**CARES COST CATEGORIES**

	Federal	Match
Voting Processes:	\$1,950,754.13	\$526,575.29
Staffing:	\$51,562.90	\$0.00
Security and Training:	\$0.00	\$0.00
Communications:	\$0.00	\$0.00
Supplies:	\$103,992.56	\$0.00
Total	\$2,106,309.59	\$526,575.29

OMB CONTROL NUMBER: 3265-0020

## 6. Certification

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

**First Name**

Michelle

**Last Name**

Eno

**Title**

Administrative Services Manager III

**Phone Number**

**Email Address**

Signature of Certifying Official:



Signature of: Michelle M Eno

## 7. Report Submitted to EAC

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