

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) MI20101001		
3. Recipient Organization (Name and complete address including Zip code) STATE, MICHIGAN DEPARTMENT OF 430 W ALLEGAN STREET, LANSING, MI 489331592							
4a. UEI		4b. EIN		5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR Attachment)		6. Report Type <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual <input type="checkbox"/> Final	
7. Basis of Accounting <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual							
8. Project/Grant Period (Month, Day, Year) From: March 28, 2018 To: September 30, 2019					9. Reporting Period End Date (Month, Day, Year) March 31, 2022		
10. Transactions						Cumulative	
(Use lines a-c for single or combined multiple grant reporting)							
Federal Cash (To report multiple grants separately, also use FFR Attachment):							
a. Cash Receipts						\$22,760,697.00	
b. Cash Disbursements						\$6,245,371.42	
c. Cash on Hand (line a minus b)						\$16,515,325.58	
(Use lines d-o for single grant reporting)							
Federal Expenditures and Unobligated Balance:							
d. Total Federal funds authorized						\$22,760,697.00	
e. Federal share of expenditures						\$6,245,371.42	
f. Federal share of unliquidated obligations						\$80,234.61	
g. Total Federal share (sum of lines e and f)						\$6,325,606.03	
h. Unobligated balance of Federal funds (line d minus g)						\$16,435,090.97	
Recipient Share:							
i. Total recipient share required						\$2,967,858.08	
j. Recipient share of expenditures						\$2,722,764.73	
k. Remaining recipient share to be provided (line i minus j)						\$245,093.35	
Program Income:							
l. Total Federal share of program income earned						\$490,666.46	
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)						\$490,666.46	
11. Indirect Expense	a. Type	b. Rate	c. Period From	Period To	d. Base	e. Amount Charged	f. Federal Share
	Fixed	14.4	October 1, 2021	March 31, 2022	\$609,201.45	\$87,725.01	\$83,563.10
g. Totals:					\$609,201.45	\$87,725.01	\$83,563.10
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 Paradine, Cindy Financial Services Director					c. Telephone (Area code, number, and extension) d. Email Address		
b. Signature of Authorized Certifying Official Paradine, Cindy					e. Date Report Submitted (Month, Day, Year) April 28, 2022		

Standard Form 425
OMB Approval Number: 4040-0014
Expiration Date: 02/28/2025

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

FEDERAL FINANCIAL REPORT

(Additional Page)

Federal Agency & Organization : ELECTION ASSISTANCE COMMISSION

Federal Grant ID : MI20101001

Recipient Organization : STATE, MICHIGAN DEPARTMENT OF
430 W ALLEGAN STREET, LANSING, MI 489331592

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): \$79.56
State interest expended (current fiscal year): \$0
Program income earned (current fiscal year): \$0
Program income earned breakdown (current fiscal year): N/A
Program income expended (current fiscal year): \$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:

Michigan

2. Grant Number:

MI20101001

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.*)

Post Election Auditing

Risk limited audit software was maintained and used for post election auditing.

Voter Registration Systems

Temporary staff finished processing all of the returned mail from the statewide absentee ballot application mailing conducted in 2020. This returned mail was used to ensure the accuracy of the Qualified Voter File.

The Department also continued to maintain, update and enhance the QVF system with IT programming to function more effectively and to better assist the statewide election community which includes working with them to resolve QVF file problems via specialized software.

Cyber Security

We continued to enhance security of our Qualified Voter File with IT programming.

Staffing

We continued to fund a dedicated Election Security Specialist during this period.

Training

We continued to maintain training related software that allows for additional online technical assistance for statewide election officials, including systems that allow for interactive online assistance and training on both an individual and group level.

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.

As a result of COVID-19, HAVA Security funding was used to supplement HAVA Cares Act funding for election supplies and more tabulators for local election precincts to assist them with the processing of a significantly larger than normal volume of absentee voter ballots.

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.

In order to obtain access to the Qualified Voter File, all users must complete training which includes a 25 minute security training module.

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.

The match requirement for the 2018 HAVA Security Grant was appropriated by the Legislature. The match requirement for the 2020 HAVA Security Grant has been met by using a portion of the voting equipment costs paid for with state and local funding along with other HAVA related security costs that were paid with state funding.

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

No articles of voting equipment were obtained during this reporting period.

5. Expenditures

14. Current Period Amount Expended and Unliquidated Obligations

GRANT COST CATEGORIES - FEDERAL

Post-Election Auditing: : \$57452
Voter Registration Systems: : \$372641
Cyber Security: : \$73632
Staffing: : \$73185
Training: : \$3389
Indirect Costs (If applicable, FFR Line 11): : \$83563
Unliquidated Obligations (If applicable, FFR Line 10f): : \$80235
Total : \$744097

Comments:

15. GRANT COST CATEGORIES - MATCH

Post-Election Auditing: : \$2871
Voter Registration Systems: : \$18524
Cyber Security: : \$3680
Staffing: : \$3658
Training: : \$169
Indirect Costs (If applicable, FFR Line 11): : \$4162
Total : \$33064

Comments:

7. Expenditures

16. Confirm Total Grant Expenditure Amounts

Federal : \$663862
Match : \$33064
Total : \$696926

OMB CONTROL NUMBER: 3265-0020

8. Certification

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

First Name	Cindy
Last Name	Paradine

Title

Financial Services Director

Phone Number

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Email Address

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

Signature of Certifying Official:

Cindy Paradine

Signature of: Cindy Paradine

9. Report Submitted to EAC



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.