



STATE OF MICHIGAN  
TERRI LYNN LAND, SECRETARY OF STATE  
DEPARTMENT OF STATE  
LANSING

January 22, 2007

Mr. Edgardo Cortés  
Election Assistance Commission  
Amended 102 Reports  
1225 New York Avenue, N.W., Suite 1100  
Washington, DC 20005

Dear Mr. Cortés:

Enclosed please find a revised 2004 and 2005 financial status report (SF269) for Help America Vote Act (HAVA), Title I, Section 102 funds. As requested, the original reports submitted were amended as follows:

Accrual was selected as the method used to account for our federal appropriation in Box 7. This method will be maintained on succeeding reports for each calendar year until all funds are expended.

Final charges for indirect costs are included in Box 11, a, b, c and d.

If you have any questions regarding these reports, please contact Cindy Paradine, Michigan Department of State, Grants Management Section at (517) 373-7941.

Sincerely,

Brian DeBano  
Chief of Staff and Chief Operating Officer

Enclosures

pc: Christopher Thomas  
Joseph Pavona  
Gena Hyde  
Cindy Paradine

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COMMISSION

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REVISED

FINANCIAL STATUS REPORT (Long Form)

(Follow instructions on the back)

1. Federal Agency and Organizational Element to Which Report is Submitted: U.S. Election Assistance Commission
2. Federal Grant or Other Identifying Number Assigned By Federal Agency: Title I, 102
OMB Approval No. 0348-0039 Page of 1 1 pages
3. Recipient Organization (Name and complete address, including ZIP code): State of Michigan, Michigan Department of State Treasury Building, Fourth Floor, 430 West Allegan, Lansing, MI 48918
4. Employer Identification Number: [Redacted]
5. Recipient Account Number or Identifying Number: CFDA #39.011
6. Final Report: [X] Yes [ ] No
7. Basis: [X] Cash [ ] Accrual
8. Funding/Grant Period (See instructions): From: 4/30/2003 To: 8/8/2006
9. Period Covered by this Report: From: 1/1/2004 To: 12/31/2004
10. Transactions: Table with columns: Previously Reported, This Period, Cumulative. Rows include Total outlays, Refunds, rebates, etc., Program income used in accordance with the deduction alternative, Net outlays, Recipient's share of net outlays, etc.
11. Indirect Expense: a. Type of Rate (Place "X" in appropriate box) [X] Final [ ] Fixed; b. Rate 17.02%; c. Base 0.00; d. Total Amount 0.00; e. Federal Share 0.00
12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation. \$104,580.66 of interest was earned during this report period and is included in line o.
13. Certification: I certify to the best of my knowledge and belief that this report is correct and complete and that all outlays and unliquidated obligations are for the purposes set forth in the award documents.
Typed or Printed Name and Title: Joseph P. Pavona, Chief Financial Officer, Michigan Department of State
Telephone (Area code, number and extension): (517) 241-4500
Signature of Authorized Certifying Official: [Signature]
Date Report Submitted: January 18, 2007

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