Wyoming Secretary of State

Max Maxfield
Secretary of State

Patricia O'Brien Arp
Deputy Secretary of State

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ATTACHEMENT
Line 12 to Form 269

WYOMING SECRETARY OF STATE
Fund 481 (HAVA Title II)

SF 269 Long Form
As Amended 2/2/2007

I. Footnote interest earned on requirements payments during the reporting period.

Interest on federal requirements payments 10/1/04 to 9/30/05 = $310,025.69

II. Note cumulative interest earned on requirements payments to 9/30/05.

Cumulative interest on federal payments as of 9/30/05 = $400,481.20

III. (a) Note total appropriated for state 5% match.

Total 5% State match = $579,840.15

(b) Note total interest earned on [state] funds by end of the reporting period.

Total interest earned on state match as of 9/30/05 = $27,459.00

IV. Note total state maintenance of effort (MOE) spent during reporting period.

Total MOE for period 7/1/05 to 6/30/06 = $211,387

V. Total MOE appropriated for next state fiscal year.

Total MOE appropriated for 7/1/06 to 6/30/07 = $184,183.81

Elections: (307) 777-7186
Securities: (307) 777-7370
Technology: (307) 777-5953
Fax: (307) 777-7640

State Capitol Building
200 West 24th Street
Cheyenne, WY 82002
Phone: (307) 777-7378
E-mail: secofstate@state.wy.us
Website: http://soswy.state.wy.us

Business Division
Notaries & Rules
Phone: (307) 777-7311
Fax: (307) 777-5339

Amended 2/2/07

FINANCIAL STATUS REPORT

(Long Form)

(Follow instructions on the back)

1. Federal Agency and Organizational Element to Which Report is Submitted	2. Federal Grant or Other Identifying Number Assigned By Federal Agency	OMB Approval No.	Page of
U.S. Election Assistance Commission	Help America Vote Act	0348-0039	1 pages

3. Recipient Organization (Name and complete address, including ZIP code)

Wyoming Secretary of State
200 West 24th Street, Rm. 110, Cheyenne, WY 82002

4. Employer Identification Number	5. Recipient Account Number or Identifying Number	6. Final Report	7. Basis
[redacted]	[redacted]	☐ Yes ☑ No	☑ Cash ☐ Accrual

8. Funding/Grant Period *(See instructions)* From: (Month, Day, Year)	To: (Month, Day, Year)	9. Period Covered by this Report From: (Month, Day, Year)	To: (Month, Day, Year)
6/17/2004	6/17/2025	10/1/2004	9/30/2005

10. Transactions:	I Previously Reported	I This Period	III Cumulative
a. Total outlays	2,503,096.16	1,076,127.58	3,579,223.74
b. Refunds, rebates, etc.		389.39	389.39
c. Program income used in accordance with the deduction alternative			0.00
d. Net outlays *(Line a, less the sum of lines b and c)*	2,503,096.16	1,075,738.19	3,578,834.35
Recipient's share of net outlays, consisting of:			
e. Third party (in-kind) contributions	0.00	0.00	0.00
f. Other Federal awards authorized to be used to match this award	0.00	0.00	0.00
g. Program income used in accordance with the matching or cost sharing alternative	0.00	0.00	0.00
h. All other recipient outlays not shown on lines e, f or g	0.00	0.00	0.00
i. Total recipient share of net outlays *(Sum of lines e, f, g and h)*	0.00	0.00	0.00
j. Federal share of net outlays *(line d less line i)*	2,503,096.16	1,075,738.19	3,578,834.35
k. Total unliquidated obligations			0.00
l. Recipient's share of unliquidated obligations			0.00
m. Federal share of unliquidated obligations			0.00
n. Total Federal share *(sum of lines j and m)*			3,578,834.35
o. Total Federal funds authorized for this funding period			11,997,284.20
p. Unobligated balance of Federal funds *(Line o minus line n)*			8,418,449.85
Program income, consisting of:			
q. Disbursed program income shown on lines c and/or g above			0.00
r. Disbursed program income using the addition alternative			0.00
s. Undisbursed program income			27,459.00
t. Total program income realized *(Sum of lines q, r and s)*			27,459.00

11. Indirect Expense	a. Type of Rate *(Place "X" in appropriate box)* ☐ Provisional ☐ Predetermined ☐ Final ☐ Fixed			
	b. Rate	c. Base	d. Total Amount	e. Federal Share

12. *Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation.*

See Attachments (2)

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	Telephone (Area code, number and extension)
Patricia O'Brien Arp, Ph.D., Deputy Secretary of State	307-777-7378
Signature of Authorized Certifying Official	**Date Report Submitted**
Pat Arp by TMC	February 2, 2007

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WYOMING SECRETARY OF STATE
Fund 481 (HAVA Title II)

SF 269 Long Form
HAVA Worksheet (as amended 2-2-07)
State/Federal Interest Balances

10/1/2004
to
9/30/2005

	PRINCIPAL AND ACCUMULATED INTEREST	REFUNDS & REPAYMENTS (Line b)	INTEREST THIS PERIOD	TOTAL $ AVAILABLE	EXPENDITURES (Line a)	EXPENDITURES NET OF REFUNDS (Line d)	ENDING BALANCE (Line p)
Federal $	$9,184,162.35	$389.39	$310,025.69	$9,494,188.04	($1,076,127.58)	($1,075,738.19)	$8,418,449.85
State Match	$586,812.67	$0.00	$20,486.48	$607,299.15	$0.00	$0.00	$607,299.15
	$9,770,975.02	$389.39	$330,512.17	$10,101,487.19	($1,076,127.58)	($1,075,738.19)	$9,025,749.00

TOTAL CUMULATIVE $ AVAILABLE (Line o)	
$11,997,284.20	Fed requirement payment plus total cumulative interest earned

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