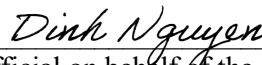
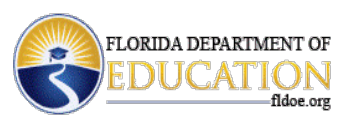


**Florida Department of Education
Project Award Notification**

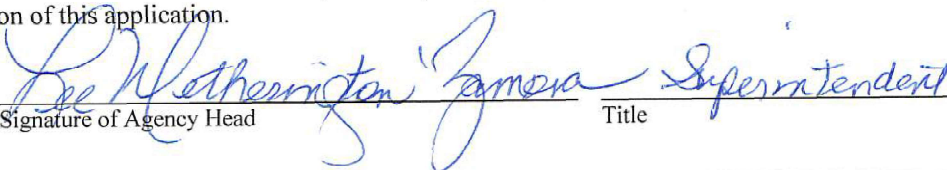
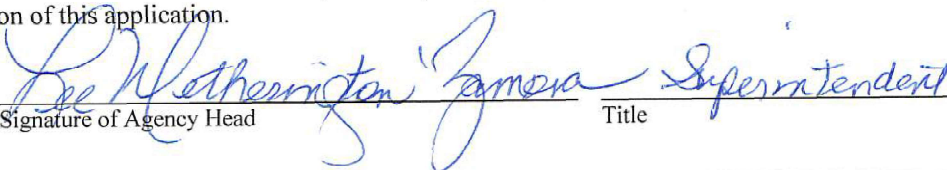
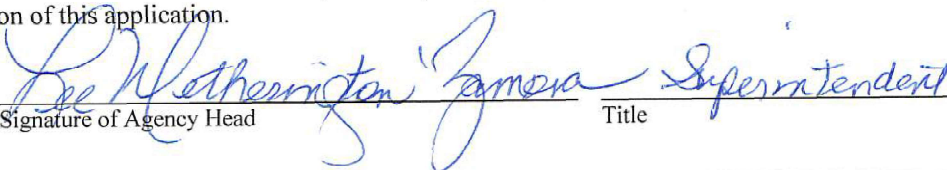
1 PROJECT RECIPIENT Hamilton County School District	2 PROJECT NUMBER 240-1274B-4CH01				
3 PROJECT/PROGRAM TITLE Title IX, Part A - Education of Homeless Children and Youth Project <p style="text-align: right;">TAPS 24A006</p>	4 AUTHORITY 84.196A Title IX Part A Homeless ESSA USDE or Appropriate Agency FAIN#: S196A230010				
5 AMENDMENT INFORMATION Amendment Number: Type of Amendment: Effective Date:	6 PROJECT PERIODS Budget Period: 07/01/2023 - 08/31/2024 Program Period: 07/01/2023 - 08/31/2024				
7 AUTHORIZED FUNDING Current Approved Budget: \$118,919.00 Amendment Amount: Estimated Roll Forward: Certified Roll Amount: Total Project Amount: \$118,919.00	8 REIMBURSEMENT OPTION Federal Cash Advance				
9 TIMELINES <ul style="list-style-type: none"> Last date for incurring expenditures and issuing purchase orders: <u>08/31/2024</u> Date that all obligations are to be liquidated and final disbursement reports submitted: <u>10/20/2024</u> Last date for receipt of proposed budget and program amendments: <u>07/31/2024</u> Refund date of unexpended funds; mail to DOE Comptroller, 325 W. Gaines Street, 944 Turlington Building, Tallahassee, Florida 32399-0400: 					
10 DOE CONTACTS Program: Courtney Walker Phone: (850) 245-0665 Email: courtney.walker@fldoe.org Grants Management: Unit A (850) 245-0735	<table style="width: 100%;"> <tr> <td style="width: 50%;">Comptroller Office</td> <td style="width: 50%;">UEI#: EN27S7HKPMC5</td> </tr> <tr> <td>Phone: (850) 245-0401</td> <td>FEIN#: F596000629013</td> </tr> </table>	Comptroller Office	UEI#: EN27S7HKPMC5	Phone: (850) 245-0401	FEIN#: F596000629013
Comptroller Office	UEI#: EN27S7HKPMC5				
Phone: (850) 245-0401	FEIN#: F596000629013				
11 TERMS AND SPECIAL CONDITIONS <ul style="list-style-type: none"> This project and any amendments are subject to the procedures outlined in the <u>Project Application and Amendment Procedures for Federal and State Programs</u> (Green Book) and the General Assurances for Participation in Federal and State Programs and the terms and requirements of the Request for Proposal or Request for Application, RFP/RFA, hereby incorporated by reference. For federal cash advance projects, expenditures must be recorded in the Florida Grants System (FLAGS) as close as is administratively feasible to when actual disbursements are made for this project. Cash transaction requests must be limited to amounts needed and be timed with the actual, immediate cash requirements to carry out the purpose of the approved project. All provisions not in conflict with any amendment(s) are still in full force and effect and are to be performed at the level specified in the project award notification. The Department's approval of this contract/grant does not excuse compliance with any law. Other: 					
12 APPROVED: <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;">  Authorized Official on behalf of the Commissioner of Education </div> <div style="text-align: center;"> <u>10/26/2023</u> Date of Signing </div> <div style="text-align: right;">  </div> </div>					

INSTRUCTIONS
PROJECT AWARD NOTIFICATION

- 1** Project Recipient: Agency, Institution or Non-Governmental entity to which the project is awarded.
- 2** Project Number: This is the agency number, grant number, and project code that must be used in all communication. (Projects with multiple project numbers will have a separate DOE-200 for each project number).
- 3** Project Description: Title of program and/or project. TAPS #: Departmental tracking number.
- 4** Authority: Federal Grants - Public Law or authority and CFDA number. State Grants - Appropriation Line Item Number and/or applicable statute and state identifier number.
- 5** Amendment Information: Amendment number (consecutively numbered), type (programmatic, budgeting, time extension or others) in accordance with the Project Application and Amendment Procedures for Federal and State Programs (Green Book), and effective date.
- 6** Project Periods: The periods for which the project budget and program are in effect.
- 7** Authorized Funding: Current Approved Project (total dollars available prior to any amendments); Amendment Amount (total amount of increase or decrease in project funding); Estimated Roll Forward (roll forward funds which have been estimated into this project); and Total Project Amount (total dollars awarded for this project).
- 8** Reimbursement Options:
 - Federal Cash Advance –On-Line Reporting required monthly to record expenditures.
 - Advance Payment – Upon receipt of the Project Award Notification, up to 25% of the total award may be advanced for the first payment period. To receive subsequent payments, 90% of previous expenditures must be documented and approved by the Department.
 - Quarterly Advance to Public Entity – For quarterly advances of non-federal funding to state agencies and LEAs made in accordance within the authority of the General Appropriations Act. Expenditures must be documented and reported to DOE at the end of the project period. If audited, the recipient must have expenditure detail documentation supporting the requested advances.
 - Reimbursement with Performance - Payment made upon submission of documented allowable expenditures, plus documentation of completion of specified performance objectives.
- 9** Timelines: Date requirements for financial and program reporting/requests to the Department of Education.
- 10** DOE Contacts: Program contact for program issues, Grants Management Unit for processing issues, and Comptroller's Office number for payment information.
- 11** Terms and Special Conditions: Listed items apply to this project. (Additional space provided on Page 2 of 2 if needed.)
- 12** Approved: Approval signature from the Florida Department of Education and the date signature was affixed.

FLORIDA DEPARTMENT OF EDUCATION

PROJECT APPLICATION

Please return to: Florida Department of Education Office of Grants Management Room 332 Turlington Building 325 West Gaines Street Tallahassee, Florida 32399-0400 Telephone: (850) 245-0735	A) Program Name: Title IX, Part A (TIXPA) - Education of Homeless Children and Youth (EH CY) Project <p style="text-align: center;">TAPS NUMBER: 24A006</p>	DOE USE ONLY Date Received <p style="text-align: center; color: red;">06/29/2023 via SHAREFILE</p>								
B) Name and Address of Eligible Applicant: Hamilton County School District 5683 US Highway 129 S Jasper, FL 32052		Project Number (DOE Assigned) <p style="text-align: center;">240-1274B-4CH01</p>								
C) Total Funds Requested: \$ 46,939.74 <hr style="width: 20%; margin: 10px auto;"/> <p style="text-align: center;">DOE USE ONLY</p> <p>Total Approved Project:</p>	D) Applicant Contact & Business Information <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Contact Name: Peggy Hasty</td> <td style="width: 40%;">Telephone Numbers: 386-792-7807</td> </tr> <tr> <td>Fiscal Contact Name: April Perez</td> <td>386-792-7818</td> </tr> <tr> <td>Mailing Address: 5683 US Highway 129 S Jasper, FL 32052</td> <td>E-mail Addresses: Peggy.hasty@hamiltonfl.com April.perez@hamiltonfl.com</td> </tr> <tr> <td>Physical/Facility Address:</td> <td>UEI number: FEIN number: 596000629013</td> </tr> </table>		Contact Name: Peggy Hasty	Telephone Numbers: 386-792-7807	Fiscal Contact Name: April Perez	386-792-7818	Mailing Address: 5683 US Highway 129 S Jasper, FL 32052	E-mail Addresses: Peggy.hasty@hamiltonfl.com April.perez@hamiltonfl.com	Physical/Facility Address:	UEI number: FEIN number: 596000629013
Contact Name: Peggy Hasty	Telephone Numbers: 386-792-7807									
Fiscal Contact Name: April Perez	386-792-7818									
Mailing Address: 5683 US Highway 129 S Jasper, FL 32052	E-mail Addresses: Peggy.hasty@hamiltonfl.com April.perez@hamiltonfl.com									
Physical/Facility Address:	UEI number: FEIN number: 596000629013									
CERTIFICATION <p>I, <u>Lee Wetherington-Zamora</u>, (<i>Please Type Name</i>) as the official who is authorized to legally bind the agency/organization, do hereby certify to the best of my knowledge and belief that all the information and attachments submitted in this application are true, complete and accurate, for the purposes, and objectives, set forth in the RFA or RFP and are consistent with the statement of general assurances and specific programmatic assurances for this project. I am aware that any false, fictitious or fraudulent information or the omission of any material fact may subject me to criminal, or administrative penalties for the false statement, false claims or otherwise. Furthermore, all applicable statutes, regulations, and procedures; administrative and programmatic requirements; and procedures for fiscal control and maintenance of records will be implemented to ensure proper accountability for the expenditure of funds on this project. All records necessary to substantiate these requirements will be available for review by appropriate state and federal staff. I further certify that all expenditures will be obligated on or after the effective date and prior to the termination date of the project. Disbursements will be reported only as appropriate to this project, and will not be used for matching funds on this or any special project, where prohibited.</p> <p>Further, I understand that it is the responsibility of the agency head to obtain from its governing body the authorization for the submission of this application.</p>										
<table style="width: 100%;"> <tr> <td style="width: 40%; vertical-align: bottom;"> E) <u></u> Signature of Agency Head </td> <td style="width: 30%; vertical-align: bottom; text-align: center;"> <u>Superintendent</u> Title </td> <td style="width: 30%; vertical-align: bottom; text-align: right;"> <u>06-29-23</u> Date </td> </tr> </table>			E) <u></u> Signature of Agency Head	<u>Superintendent</u> Title	<u>06-29-23</u> Date					
E) <u></u> Signature of Agency Head	<u>Superintendent</u> Title	<u>06-29-23</u> Date								

Allen, Lorraine

From: Peggy Hasty <Peggy.Hasty@hamiltonfl.com>
Sent: Wednesday, September 6, 2023 9:33 AM
To: Allen, Lorraine
Cc: Walker, Courtney; Kruis1, Jennifer; Hemenway, Derek
Subject: Hamilton: 2023-24 EHCY

Good morning. This is to notify the Department of Education that Hamilton County School District is applying for the full approved amount of \$118,919.00. A revised DOE 101S form has been submitted to indicate this. Thank you for your support.

Peggy Sue Hasty
Hamilton County School District
Coordinator of Federal Programs
Office: 386-792-7807

"I've learned that people will forget what you said, people will forget what you did, but people will never forget how you made them feel." ~Maya Angelou



**2023-24 Title IX, Part A (TIXPA)
Education for Homeless Children and Youth (EHCY) Project –
Year 3 Application**

Local Educational Agency Name:	Hamilton County School District
Project Contact Name:	Peggy Sue Hasty
Project Contact Title:	Coordinator of Federal Programs
Project Contact Telephone:	386-792-7807
Project Contact E-mail:	Peggy.hasty@hamiltonfl.com
McKinney-Vento Liaison Name:	Phyllis Johnson/ Peggy Sue Hasty

For more information, please contact:

Florida McKinney-Vento Program

Phone: (850) 245-0479

Email: flmvp@fldoe.org

**Bureau of Federal Educational Programs
Florida McKinney-Vento Program**

**2023-24 TIXPA–EHCY Project – Year 3
Program Specific Assurances**

Activity Table

2023-24 TIXPA-EHCY Project Funding Application

The Local Educational Agency (LEA) must assure that:

- The LEA will comply with all reporting requirements at such time and in such manner and containing such information as required, including but not limited to the requirements under the McKinney-Vento Act;
- All costs are reasonable and necessary and that these uses of funds align with the purpose of, and other requirements in, the [McKinney-Vento Homeless Assistance Act](#) (MVA); and
- The LEA will meet the requirements of section 442 of the General Education Provisions Act (GEPA), 20 U.S.C. 1232e, [Single local educational agency application](#).

☒ By checking this box, I hereby certify that the LEA agrees to all the assurances of the EHCY Program, and will abide by all federal, state and local laws.

Part 1: SUMMARY

☒ By checking this box, I hereby certify that the intended outcomes for Year 3 have not changed from the TIXPA-EHCY Project Application-Years 1 or 2.

If the intended outcomes for Year 3 have changed, please describe the changes below.

Part 2: GOALS AND PROGRESS MONITORING

☒ By checking this box, I hereby certify that the Areas of Focus for Year 3 have not changed from the TIXPA-EHCY Project Application-Years 1 or 2.

If the Areas of Focus for Year 3 have changed, please describe the changes below.

☒ By checking this box, I hereby certify that the Goals for Year 3 have not changed from the TIXPA-EHCY Project Application-Years 1 or 2.

If the Goals for Year 3 have changed, please describe the changes below.

☒ By checking this box, I hereby certify that the Progress Monitoring Indicators for Year 3 have not changed from the TIXPA-EHCY Project Application-Years 1 or 2.

If the Progress Monitoring Indicators for Year 3 has changed, please describe the changes below.

Part 3: IMPLEMENTATION PLAN**A. Use of Other Resources**

What other federal funds is the LEA/consortium using to support the identification, enrollment, retention, and educational success of children and youth experiencing homelessness specifically? Select all that apply.

- ☐ Coronavirus Aid, Relief, and Economic Security (CARES) Act funds (signed into law March 2020)
- ☐ Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act (December 2020)
- ☐ American Rescue Plan (ARP) ESSER funds
- ☒ Title I, Part A Homeless Set-aside funds reserved for children and youth experiencing homelessness
- ☒ American Rescue Plan-Homeless Children and Youth (ARP-HCY) funds
- ☐ Other funds and services available to children, youth, and families experiencing homelessness. Please specify:

--

Use of Title I, Part A Reservation for Homeless Education

1. Provide the amount of the Title I, Part A Homeless (TIPA) Reservation for the 2022-23 and 2023-24 subgrants. Verify this amount with TIPA staff, especially for the 2023-24 school year.

2022-23 TIPA Homeless Reservation	2023-24 TIPA Homeless Reservation*
\$18,000	\$18,000

****The 2023-24 amount above must match the Homeless Set-Aside amount on the 2023-24 Title I, Part A application in order to be approved.***

2. Indicate how the amount of the 2023-24 Title I, Part A Reservation was determined. Include in your response, a brief explanation as to why the amount has increased or decreased from the previous year (2022-23).

The amount has remained the same for Title I Part A application. This reservation was calculated using the 2022 survey 5 data and student data from the needs assessment. 243 students were identified as homeless in survey 5.

It was determined through the needs assessment that \$18,000 (approximately \$74 per student) will be used to address the needs of these students.

3. List by number (e.g., 1, 2, 3) the activities supported with the use of the 2023-24 Title I, Part A reservation.

1. Supplemental materials and supplies will be provided to identified students to assist in being prepared for the school day and to provide personalized materials for each child to meet their individual needs (school supplies, paper, pencils, pens, backpacks, notebooks, folders, binders, art supplies, workbook, calculators)

B. Proposed Use of Grant Funds for EHCY

☒ By checking this box, I hereby certify that the Activities for Year 3 has not changed from the TIXPA-EHCY Project Application-Years 1 or 2.

If the activities for Year 3 have changed, please describe the changes below and complete an Activity Table for each new activity.

--

☒ By checking this box, I hereby certify that no amendments were submitted for Year 2.

If an amendment or amendments were submitted for Year 2, briefly summarize the changes below.

--

A. LEA Program Operations Activities**Project Management**

☒ By checking this box, I hereby certify that the McKinney-Vento (MV) Liaison has not changed from the TIXPA-EHCY Project Application-Years 1 or 2.

If the McKinney-Vento Liaison has changed, please provide below the first and last names, email address, qualifications for the position, and percent of time devoted to the MV Program.

--

☒ By checking this box, I hereby certify that the Project Manager has not changed from the TIXPA-EHCY Project Application-Years 1 or 2.

If the Project Manager has changed, please provide below the first and last names and position title.

--

☒ By checking this box, I hereby certify that the additional MV staff have not changed from the TIXPA-EHCY Project Application-Years 1 or 2.

If the MV staff have changed, please provide below the first and last names, position title, position FTE, and percent of time of the staff's time devoted to the MV Program.

Name (First, Last)	Position Title	Position FTE	Percent of Time - MVP

Part 4: EVALUATION PLAN

☒ By checking this box, I hereby certify that the Evaluation Plan has not changed from the TIXPA-EHCY Project Application-Years 1 or 2.

If the Evaluation Plan has changed, please describe the changes below.

Part 5: STRATEGIC IMPERATIVES, EXECUTIVE ORDER, GEPA

Support for Strategic Imperatives

☒ By checking this box, I hereby certify that the Strategic Imperatives have not changed from the TIXPA-EHCY Project Application-Years 1 or 2.

If the Strategic Imperatives have changed, please describe the changes below.

Executive Order

Instructions: Read the statement on Executive Order 11-116 and then select the checkbox to continue.

-
- ☒ The employment of unauthorized aliens by any contractor is considered a violation of Section 274A (e) of the Immigration and Nationality Act. If the contractor knowingly employs unauthorized aliens, such violation shall be cause for unilateral cancellation of the contract. In addition, pursuant to Executive Order 11-116, for all contracts providing goods or services to the state in excess of nominal value; (a) the Contractor will utilize the E-Verify system established by the U.S. Department of Homeland

Security to verify the employment eligibility of all new employees hired by the contractor during the Contract term, (b) require that Contractors include in such subcontracts the requirement that subcontractors performing work or providing services pursuant to the state contract utilize the E-Verify system to verify the employment eligibility of all new employees hired by the subcontractor during the contract term.

General Education Provisions Act (GEPA)

☒ By checking this box, I hereby certify that the GEPA statement has not changed from the TIXPA-EHCY Project Application-Years 1 or 2.

If the GEPA statement has changed, please describe the changes below.

--

**FLORIDA DEPARTMENT OF EDUCATION
BUDGET NARRATIVE FORM 101S**

A) Name of Eligible Recipient/Fiscal Agent:	Hamilton County School District
B) DOE Assigned Project Number:	240-1274B-4CH01
C) TAPS Number:	24A006

	(1)	(2)	(3)	(4)	(5)	(6)	(7)
LINE ITEM	ASSOCIATED ACTIVITY NUMBER(S)	FUNCTION	OBJECT	Account Title and Narrative	FTE POSITION	AMOUNT	% Allocated to This Project
1	Activity 1	5100	120	Classroom teachers (Educational support services): (6) highly qualified teachers to tutor for extended day/extended year approximately 75 homeless students in identified areas of need up to 6 teachers X 100 hours = 600 hours X up to \$50 hourly rate = \$30,000. This is a comparable hourly rate for tutors being funded out of other district programs.	0.40	\$ 30,000.00	100%
2	Activity 1	5100	210	Retirement (Educational support services) for extended day/extended year highly qualified academic tutors at 15% rate. \$30,000 X 15% = \$4,500		\$ 4,500.00	100%
3	Activity 1	5100	220	FICA at 7.65% rate (Educational support services) \$30,000 X 7.65 = \$2,295		\$ 2,295.00	100%
4	Activity 1	5100	240	Workman's Comp at 2% rate (Educational support services) \$30,000 X 2% = \$600		\$ 600.00	100%
5	Activity 1	5100	330	Travel (Educational support services) for extended day/extended year academic tutors to enable the tutor to meet the families. Travel for liaison or other designated staff to conduct home visits or community visits. 600 miles X \$.59 = \$354		\$ 354.00	100%
6	Activity 1	7800	730	Dues and Fees: Fund homeless students to attend educational field trips (e.g., Jacksonville Art Museum (Art), St. Augustine Trip (Florida History), Challenger Learning Center (STEAM), Florida Capital (History), college tours, or other extra curricular events. Field trips would include district approved student educational field trips, college tours to various colleges (usually little to no cost), and extracurricular events to include before school, after school, sports, or school sponsored events. The LEA will have an academic lesson plan for each student for the educational field trips and follow-up activities. 256 students X approximately \$25.00 = \$6,400		\$ 6,400.00	100%

7	Activity 1,4	5100	510	Supplemental Instructional materials and supplies (Educational Support Services) for homeless students above and beyond for those provided by Title I for comparable services for homeless students. Material and supplies include needed supplies for extended day/extended year program, backpacks, supplies that can be used at home to support learning, reading materials, and learning aides such as flash cards and note cards. Provide homeless students with assessment prep materials and take home practice books (ACT, SAT, PERT practice). Provide summer learning packs to help homeless students continue to acquire and retain content area skills. Approximately 256 students X \$75.00 = \$19,200. Homeless students in order to attend school often need under garments, socks, shoes and clothing to meet the school dress code. This would be purchased on an as needed basis when all other funds are not available. Approximately 256 students X \$28.06 = \$7,182.41. Activity Total: \$26,382.41 Indirect cost was over so i added the rest to this line item to keep the total at correct amount.TM \$26,382.41+495.97= 26,878.38		\$ 26,878.38	100%
8	Activity 1,2,3,4	6110	160	Other support personnel salary (Educational Support Services) for one Parent Resource Specialist (.5) to provide administrative, family and school connection, community referral service/outreach. These funds will be used to fund 50% of the position. The other .5 FTE is for Title I. Part A duties.	0.5	\$ 15,795.15	50%
9	Activity 1,2,3,4	6110	210	Retirement (Educational Support Services) for part-time parent resource specialist at 15% rate.		\$ 2,369.27	50%
10	Activity 1,2,3,4	6110	220	Social Security and Medicare (Educational Support Services) for one part time parent resource specialist at 7.65% rate.		\$ 1,208.33	50%
11	Activity 1,2,3,4	6110	230	Group insurance (Educational Support Services) for one part time parent resource specialist @ the .5 rate = \$3,000		\$ 3,000.00	50%
12	Activity 1,2,3,4	6110	240	Workers Compensation (Educational Support Services) for one part time parent resource specialist at 2% rate.		\$ 315.90	50%
13	Activity 4	7710	310	Professional and Technical Services: Consultation for evaluation by Dr. Gail Ogawa. Professional services contract attached (Educational Support Services).		\$ 1,000.00	100%
14	Activity 2,3	6110	370	Communications: Postage for home school connection program (Educational Support Services) Postage rates may vary by envelope mailed. Approximately 512 stamps X \$.66 = \$337.92		\$ 337.92	100%
15	Activity 1,2,3	6110	390	Other purchased services: Postage, printing of outreach materials, letters, envelopes, stationary paper, post cards for homeless children and families to communicate program information (Home School Connection Program) 245 students X \$2.00 = \$490		\$ 490.00	100%
16	Activity 1,2,3,4	6150	160	Other Support Personnel: Part time homeless liaisons (3) to work with homeless students and parents as a link between school and a place of residence for a total of 150 hours X approximately \$35.00 an hour = \$5,250	0.09	\$ 5,250.00	100%
17	Activity 1,2,3,4	6150	210	Retirement (Educational Support Services) for part-time homeless liaison's at 15% rate.		\$ 787.50	100%
18	Activity 1,2,3,4	6150	220	Social Security and Medicare (Educational Support Services) for part time homeless liaison's at 7.65% rate.		\$ 401.63	100%

19	Activity 1,2,3,4	6150	240	Workers Compensation (Educational Support Services) for part time homeless liaison's at 2% rate.		\$ 105.00	100%
20	Activity 1,2,3,4	6400	330	Travel: NAECHY is hosting its annual conference in New Orleans this year-The conference will be held Nov. 11-14, 2023. There is no comparable conference in Florida. The NAECHY Conference is known as one of the leading professional development opportunities for school district homeless staff across the nation and attendance is encouraged by the State Coordinator for the Education of Homeless Children and Youth. This conference focuses on topics relevant to the duties of the homeless liaison and staff working with students in transition. The conference should be beneficial and highly encouraged. The McKinney-Vento Liaison/Federal Programs Coordinator, Family Outreach Specialist, the Special Education Coordinator all work directly with MV students and will be attending. (Registration: \$499 + Hotel \$700 + Flight \$500 + meal \$180 = \$1,879.) 3 attendees X \$1,879 = \$5,637.		\$ 5,637.00	100%
20	Activity 1,2,3,4	7730	330	Travel: NAECHY is hosting its annual conference in New Orleans this year. The conference will be held Nov. 11-14, 2023. There is no comparable conference in Florida. The NAECHY Conference is known as one of the leading professional development opportunities for school district homeless staff across the nation and attendance is encouraged by the State Coordinator for the Education of Homeless Children and Youth. This conference focuses on topics relevant to the duties of the homeless liaison and staff working with students in transition. The conference should be beneficial and highly encouraged. The Parent Resource Specialist and non instructional McKinney-Vento Liaison (second liaison) will be attending. (Registration: \$499 + Hotel \$700 + Flight \$500 + meal \$180 = \$1,879.) 2 attendees X \$1,879 = \$3,758.		\$ 3,758.00	100%
21	Activity 1,2,3,4	7200	792	Indirect costs @ 6.67%.		\$ 7,435.92	100%
D) TOTAL						\$ 118,919.00	

DOE ATTESTATION (Program and Grants Management)

The cost for each line item budget category has been evaluated and determined to be allowable, reasonable and necessary as required by Section 216.3475, Florida Statutes. Documentation is on file evidencing the methodology used and the conclusions reached.



April 2022

DOE 101S