



Recipient Information

- 1. Recipient Name**
Florida
107 E. MADISON STREET, MSC 400

TALLAHASSEE, FLORIDA 32399
- 2. Congressional District of Recipient**
*See Remarks
- 3. Payment Account Number and Type**
*See Remarks
- 4. Employer Identification Number (EIN)**
1364706134A5
- 5. Data Universal Numbering System (DUNS)**
968930664
- 6. Recipient's Unique Entity Identifier**
WVR6ECT1G9F8
- 7. Project Director or Principal Investigator**
Dane Eagle

dane.eagle@deo.myflorida.com
- 8. Authorized Official**
*See Remarks

Federal Agency Information

- 9. Awarding Agency Contact Information**
Angel Chen
Grants Management Specialist
angel.chen@acf.hhs.gov
646-905-8120
- 10. Program Official Contact Information**
Jolleen George
Deputy Director
Office of Community Services
jolleen.george@acf.hhs.gov
(202) 401-4830

Federal Award Information

- 11. Award Number**
2301FLCOSR
- 12. Unique Federal Award Identification Number (FAIN)**
2301FLCOSR
- 13. Statutory Authority**
The Community Services Block Grant Act (42 U.S.C. 9901 et seq.)
- 14. Federal Award Project Title**
*See Remarks
- 15. Catalog of Federal Domestic Assistance (CFDA) Number**
93.569
- 16. CFDA Program Title**
Community Services Block Grant
- 17. Award Action Type**
Supplement
- 18. Is the Award R&D?**
*See Remarks

Summary Federal Award

Financial Information

19. Budget Period Start Date 10-01-2022	End Date 09-30-2024
20. Total Amount of Federal Funds Obligated by this Action	\$5,467,373.00
20a. Direct Cost Amount	*See Remarks
20b. Indirect Cost Amount Administrative Offset	*See Remarks
21. Authorized Carryover	*See Remarks
22. Offset	*See Remarks
23. Total Amount of Federal Funds Obligated this budget period	\$11,033,386.00
24. Total Approved Cost Sharing or Matching, where applicable	*See Remarks
25. Total Federal and Non-Federal Approved	*See Remarks
26. Project Period Start Date 10-01-2022 -	End Date 09-30-2024
27. Total Amount of the Federal Award including Approved Cost Sharing or Matching	*See Remarks

- 28. Authorized Treatment of Program Income**
*See Remarks
- 29. Grants Management Officer – Signature**


Timothy Chappelle

Footnotes

Grants Management Officer

This grant action awards funding for the 2nd Quarter of FY 2023 for the CSBG program under Public Law 117-328, Consolidated Appropriations Act, 2023. For services furnished under the CSBG Act, CSBG grant recipients and eligible entities may revise the federal poverty line (FPL) by substituting "200 percent" for "125 percent" for CSBG funding awarded for FY 2022 (October 1, 2021 — September 30, 2022) and FY 2023 (October 1, 2022 — September 30, 2023).



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Employer Identification Number (EIN): 1364706134A5

Data Universal Numbering System (DUNS): 968930664

Recipient's Unique Entity Identifier: WVR6ECT1G9F8

Object Class: 41.15

Financial Information

<u>Appropriation</u>	<u>CAN</u>	<u>Allotment</u>	<u>Award this action</u>	<u>Cumulative Grant</u> <u>Award to Date</u>	<u>Document Number</u>	<u>Funding Type</u>
75-23-1536	2023,G994002	\$11,033,386.00	\$5,467,373.00	\$11,033,386.00	G-2301FLCOSR	Formula

Terms and Conditions



General Terms and Conditions:

With the acceptance of this award, you agree to administer this grant in compliance with conditions set forth in the applicable Program Instructions, terms and conditions, Departmental regulations, and OMB Circulars. The electronic General Terms and Conditions that apply to this program can be found at <https://www.acf.hhs.gov/grants/mandatory-formula-block-and-entitlement-grants>. The applicable terms and conditions for this program may be found on the above website under Office of Community Services and Community Services Block Grant Program.

Funds included in this award will be made available through the DHHS Payment Management System (PMS). Questions pertaining to payments should be directed to DHHS Division of Payment Management, Post Office Box 6021, Rockville, MD 20852; telephone 1-877-614-5533. Further, in accordance with Department of Treasury regulations 31 CFR Part 205, implementing the Cash Management Improvement Act, you agree to limit your request to draw Federal funds to the minimum amount needed and to time the request in accordance with the actual, immediate requirements in carrying out programs funded through this award. Failure to adhere to these requirements may cause the suspension of grant funds.

Consolidation of grant funds (by Territories, if applicable):

For Territories who have an approved consolidation plan, these funds are available for expenditures made in accordance with the plan under Title XX of the Social Security Act.

Reporting requirements:

Grants awarded for FY2021 and after, recipients submit annual Federal Financial Reports (FFR) Form SF-425 through the DHHS Payment Management System (PMS). Recipients need to update their PMS access profile to include the ability to electronically access and complete SF-425 reports in PMS. The Interim FFR should be submitted into PMS no later than 90 days after the close of the Federal Fiscal Year 1 of the project period. The Final FFR should be submitted into PMS no later than 90 days after the close of the project period. Recipients are encouraged to submit timely reports in PMS.

Please transmit a copy of this Notice of Award (NOA) to the office authorized to request funds covered by this award.

GrantSolutions (GS)

Please be advised that recipients should be able to download NOAs through their GS account, as GrantSolutions system enhancements have been available since 8/15/2022. Non-discretionary recipients can now log into GrantSolutions and find new features, including:

- On-demand access to their Notice of Awards (NOA) and Grant Details
- Ability to quickly locate Grant Project(s)
- View and download the NOA, grant history, grant details, and easily find their Grants Management Officer

Please contact the GrantSolutions helpdesk at help@grantsolutions.gov / 1-866-577-0771 for technical assistance.

Changes in Key Staff:

Please report any changes in points of contact, addresses, phone numbers, e-mail addresses etc. to the Grants Management Specialist named on this award notice. This includes changes in Authorized Official (AO), Principal Investigator/Project Director (PI/PD) or Point of Contact (POC) to receive electronic award notification. Changes to points of contact need to be submitted officially through an updated SF-424M form in the On-line Data Collection System (OLDC).

Remarks

* This field is intended to be included in the standardized Notice of Award and will be displayed in subsequent quarters.

For questions concerning programmatic aspects of this award, please contact Charisse Johnson at charisse.johnson@acf.hhs.gov. For questions concerning financial aspects of this award, please contact Veronika Olaniyan at veronika.olaniyan@acf.hhs.gov.