

INTERIM FINANCIAL STATUS REPORT (FSR) FORM

I: State Name: _____
 II: Federal Funding Period: _____
 III: Reporting Period: _____
 IV: Accounting Basis: _____
 V: Grant Award Numbers: State Basic Grant (Title I) - _____
 Tech Prep Grant (Title II) - _____
 VI: Title I Grant Award Amount: _____
 VII: Title II Grant Award Amount: _____
 VIII: Title II Funds Consolidated with Title I Funds: _____
 IX: Total Title I Funds (Title I Award + Title II Consolidated Funds): _____
 X. Total Title II Funds Remaining (Title II - Title II Consolidated Funds) : _____
 XI. Amended Interim FSR: Date of Filing Amended FSR: _____

Row		1	2	3	4	5	6	7	8	9	10	11
		Net Outlays Previously Reported	Total Outlays This Report Period	Program Income Credits	Net Outlays This Report Period (Column 2 - 3)	Net Outlays To Date	Non-Federal Share of Outlays	Total Federal Share of Outlays (Column 5 - 6)	Federal Share of Unliquidated Obligations	Fed. Share of Outlays & Unliquidated Obligations (Column 7 + 8)	Federal Funds Authorized	Balance of Unobligated Federal funds (Column 10 - 9)
A	* TOTAL TITLE I FUNDS *	No information is entered on this row										
B	LOCAL USES OF FUNDS	No information is entered on this row										
C	RESERVE	No information is entered on this row										
D	Funds for Secondary Recipients											
E	Funds for Postsecondary Recipients											
F	Total (Row D + E)											
G	FORMULA DISTRIBUTION	No information is entered on this row										
H	Funds for Secondary Recipients											
I	Funds for Postsecondary Recipients											
J	Total (Row H + I)											
K	TOTAL LOCAL USES OF FUNDS (Row F + J)											
L	STATE LEADERSHIP	No information is entered on this row										
M	Nontraditional Training and Employment											
N	State Institutions											
O	Other Leadership Activities											
P	TOTAL STATE LEADERSHIP (Row M + N + O)											
Q	STATE ADMINISTRATION	No information is entered on this row										
R	TOTAL STATE ADMINISTRATION											
S	TOTAL TITLE I FUNDS (Row K + P + R)											
T	* TOTAL TITLE II FUNDS *	No information is entered on this row										
U	Funds for State Administration											
V	Funds for Local Consortia											
W	TOTAL TITLE II FUNDS (Row U + V)											

ADDITIONAL INFORMATION:

XII: Certification: I understand that the use of my PIN to certify and submit this FSR is the same as certifying and signing this document.

Signature or PIN of an Authorized State Official: _____

Title/Agency: _____

FINAL FINANCIAL STATUS REPORT (FSR) FORM

I: State Name: _____
 II: Federal Funding Period: _____
 III: Reporting Period: _____
 IV: Accounting Basis: _____
 V: Grant Award Numbers: State Basic Grant (Title I) - _____
 Tech Prep Grant (Title II) - _____
 VI: Title I Grant Award Amount: _____
 VII: Title II Grant Award Amount: _____
 VIII: Title II Funds Consolidated with Title I Funds: _____
 IX: Total Title I Funds (Title I Award + Title II Consolidated Funds): _____
 X. Total Title II Funds Remaining (Title II - Title II Consolidated Funds) : _____
 XI. Amended Final FSR: Date of Filing Amended FSR: _____

Row		1	2	3	4	5	6	7	8	9	10	11
		Net Outlays Previously Reported	Total Outlays This Report Period	Program Income Credits	Net Outlays This Report Period (Column 2 - 3)	Net Outlays To Date (Column 1 + 4)	Non-Federal Share of Outlays	Total Federal Share of Outlays (Column 5 - 6)	Federal Share of Unliquidated Obligations	Fed. Share of Outlays & Unliquidated Obligations (Column 7 + 8)	Federal Funds Authorized	Balance of Unobligated Federal funds (Column 10 - 9)
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L	STATE LEADERSHIP	No information is entered on this row										
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P	TOTAL STATE LEADERSHIP (Row M + N + O)											
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R	TOTAL STATE ADMINISTRATION											
S	TOTAL TITLE I FUNDS (Row K + P + R)											
T	* TOTAL TITLE II FUNDS *	No information is entered on this row										
U	Funds for State Administration											
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