

# CN SF-425

## Submission Studio

**Form Name:** SF-425 (10-11)  
**Form Description:** Federal Financial Report  
**Program:** CN - Administrative Review and Training - Method II  
**State:** WV  
**Agency Code:** 5499999 **Agency Name:** WV State Agency  
**Program Time:** December 2016 **Report Time:** December 2016  
**Submission Type:** Quarterly **Revision:** 0  
**Submission Status:** New Submission

### Report Remarks

**B. Project / Grant Period (NOTE: Refer to Grant Award Document for dates)**

From:  To:

10. Transactions	Cumulative					
Federal Cash :						
a. Cash Receipts						
b. Cash Disbursements						
c. Cash on Hand (line a minus b)						
Federal Expenditures and Unobligated Balance:						
d. Total Federal funds authorized						
e. Federal share of expenditures						
f. Federal share of unliquidated obligations						
g. Total Federal share (sum of lines e and f)						
h. Unobligated balance of Federal funds (line d minus g)						
Recipient Share:						
i. Total recipient share required						
j. Recipient share of expenditures						
k. Remaining recipient share to be provided (line i minus j)						
Program Income:						
l. Total Federal share of program income earned						
m. Program income expended in accordance with the deduction alternative						
n. Program income expended in accordance with the addition alternative						
o. Unexpended program income (line l minus line m or line n)						
<b>11. Indirect Expense</b>						
a. Type	b. Rate	c. Period From	Period To	d. Base	e. Amount Charged	f. Federal Share
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
g. Totals:						

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