

# **Recipient Information**

**1. Recipient Name** FLORIDA DEPARTMENT OF COMMERCE 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** J Alex Kelly

Alex.Kelly@commerce.fl.gov

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

2401FLCOSR

**12. Unique Federal Award Identification Number (FAIN)** 2401FLCOSR

# 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

New

**18. Is the Award R&D?** \*See Remarks

· See Kemarks

#### Summary Federal Award Financial Information Pudget Paried Start Date 10,01,2023

19. Budget Period Start Date 10-01-2023	End Date 09-30-2025
20. Total Amount of Federal Funds Obligated by this	\$2,775,075.00
Action	
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	\$2,775,075.00
budget period	
24. Total Approved Cost Sharing or Matching, where	*See Remarks
applicable	
25. Total Federal and Non-Federal Approved	*See Remarks
26. Project Period Start Date 10-01-2023 -	End Date 09-30-2025
27. Total Amount of the Federal Award including	*See Remarks
Approved Cost Sharing or Matching	

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



# Footnotes

Grants Management Officer

This grant action awards Community Services Block Grant (CSBG) funding for the first quarter of fiscal year 2024, in accordance with Public Law 118-15, the Continuing Appropriations Act, 2024, and Other Extension Act. CSBG grant recipients and CSBG eligible entities can continue to apply the higher eligibility rate of 200 percent of the Federal Poverty Level (FPL) for services provided through November 17, 2023, unless a full year appropriation is enacted before this date. Any extension beyond November 17, 2023, will depend on future actions by Congress.



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TALLAHASSEE, FLORIDA 32399 Employer Identification Number (EIN): 1364706134A5 Data Universal Numbering System (DUNS): 968930664 Recipient's Unique Entity Identifier: WVR6ECT1G9F8 Object Class: 41.15

Financial Information	
<u>Cumulative Grant</u> <u>Award to Date</u> <u>Document Number</u> <u>Funding Ty</u>	
\$2,775,075.00 G-2401FLCOSR 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/manage-grant/grant-award/non-discretionary-award-terms. 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 though 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 Evette Lovelace at CSG-OGM@acf.hhs.gov.