Kentucky Department of Education Award Notification

1	Name and Address of Recipi		7	Fund Type:
	Agency Name Jefferso	n County Schools		State
	Street Address PO Box	34020		
	City, State Zip Louisvill	e, KY 40232		Other:
	DUNS# 0629844	430		
			8	Method of Payment:
2	KDE Contact Information:		1	Federal Cash Request
	Program Consultant	Monica Shack (502) 564-3791 ext. 4052		Expenditure Reimbursement
		Amber Skaggs (502) 564-3791 ext. 4035		
	Street Address	300 Sower Boulevard, 5 th Floor		Automatic Payment
l	Budget Contact	Thelma Hawkins (502) 564-1979 ext. 4361		Lump Sum
	Street Address	300 Sower Boulevard, 5 th Floor		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		Receipt of invoice from vendor
1	City, KY Zip	FIGURIOIL, NT 40001	<u> </u>	1
<u> </u>	D		9	Reimbursement Frequency:
3	Description/Fund Source of			Monthly
	Description	FY18 Title I Part D, Subpart 2 Neglected & Delinquent		Quarterly
	Fund Source	Title I Part D, Subpart 2 Neglected & Delinquent	1	Other
	CFDA#	84.010A		
ļ	PR/AWARD NUMBER (FAIN)	S010A170017		
-	MUNIS Project Number	314D	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission CDIP
	Pass-through Number	3100102-17	İ	
				Other
4	Grant Authority (Source): NO	LB Title I, Part D, Subpart 2, 34 CFR PART 200 and the		La La Company (1974) And Company
		al Administrative Regulations (EDGAR) IN 34 CFR PARTS 76,		
		m Administrative Requirements, Cost Principles, and Audit		
		ards in 2 CFR Part 200 and 3474.		
		Tricken (16 2 Para) in the William State (16 and 16		
5	Award Amount:		11	Evaluations:
	\$229,506.00			
6	Period of Award:		1	
	July 1, 2017 – September 30,	2019		
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions: All funds must be spent or encumbered by September 30, 2019. The final Federal Cash Request must be submitted by			
	December 6, 2019.			
14	Authorized By (Name/Title): Tara Rodriguez, Director Date: January 19, 2018			
	Division of Consolidated Plans & Audits			