

Voting System Grant Fund Closure Form

Expenditures Report

County: _____ Date of Award: _____

Address: _____

City: _____ State: _____ Zip: _____

Physical Address Where Purchased Items are Stored/Located: _____

1) Please give an itemized report of expenditures from **grant money** (attach additional pages, if necessary):

<u>Date</u>	<u>Item</u>	<u>Cost</u>

2) Attach copies of all canceled checks and invoices from grant to this form.

3) Attach a copy of the county Ordinance appropriating the grant funds.

4) Total amount of grant funds received: \$ _____
(Amount of state grant award)

5) Total amount of grant funds expended: \$ _____

6) Amount (if any) of grant funds remaining: \$ _____

Note: A check payable to the Secretary of State for any remaining grant funds must be attached to this report.

7) Prepared by (signature of preparer): _____

8) Printed name and phone number of preparer: _____

9) Approved by (signature of County Judge): _____

10) Printed name and phone number of County Judge: _____

11) Date of submission: _____

****NOTE: All questions must be answered for the grant to be completed and closed.**

Arkansas Secretary of State • Elections Division
State Capitol, Room 026 • Little Rock, AR 72201
(501) 682-5070