

Kentucky Department of Education
REVISION #2 School Year 2012-2013 Award Notification

1	Name and Address of Recipient: Agency Name Adair County Street Address 1204 Greensburg St City, KY Zip Columbia, KY 42728	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Contact – Phone # Brenda McEntyre – 502-564-3791 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Judy Howard – 502-564-1979 Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY13 Delinquent Fund Source Title I, Part D, Subpart 2 CFDA# 84.010A MUNIS Project Number 3143 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): U.S. Department of Education NCLB, Title I, Part A; 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81, 82 and 87 Title I, Part D, Subpart 2	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$65,942.00	11	Evaluations: N/A
6	Period of Award: July 1, 2012 – September 30, 2014		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: All funds must be spent or encumbered by September 30, 2014. The final Federal Cash Request must be submitted by December 10, 2014.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidated Plans & Audits	Date: March 22, 2013	

Kentucky Department of Education
REVISION #2 School Year 2012-2013 Award Notification

1	Name and Address of Recipient: Agency Name Bowling Green Independent Street Address 1211 Center St City, KY Zip Bowling Green, KY 42101	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____	
2	KDE Contact Information: Program Contact – Phone # Brenda McEntyre – 502-564-3791 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Judy Howard – 502-564-1979 Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description FY13 Delinquent Fund Source Title I, Part D, Subpart 2 CFDA# 84.010A MUNIS Project Number 3143 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____	
4	Grant Authority (Source): U.S. Department of Education NCLB, Title I, Part A; 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81, 82 and 87 Title I, Part D, Subpart 2		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$141,501.00	11	Evaluations: N/A	
6	Period of Award: July 1, 2012 – September 30, 2014			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions: All funds must be spent or encumbered by September 30, 2014. The final Federal Cash Request must be submitted by December 10, 2014.			
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidated Plans & Audits		Date: March 22, 2013	

Kentucky Department of Education
REVISION #2 School Year 2012-2013 Award Notification

1	Name and Address of Recipient: Agency Name Boyd County Street Address 1104 Bob McCullough Dr City, KY Zip Ashland, KY 41102	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Contact – Phone # Brenda McEntyre – 502-564-3791 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Judy Howard – 502-564-1979 Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY13 Delinquent Fund Source Title I, Part D, Subpart 2 CFDA# 84.010A MUNIS Project Number 3143 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): U.S. Department of Education NCLB, Title I, Part A; 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81, 82 and 87 Title I, Part D, Subpart 2		
5	Award Amount: \$160,734.00	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
6	Period of Award: July 1, 2012 – September 30, 2014	11	Evaluations: N/A
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: All funds must be spent or encumbered by September 30, 2014. The final Federal Cash Request must be submitted by December 10, 2014.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidated Plans & Audits		Date: March 22, 2013

Kentucky Department of Education
REVISION #2 School Year 2012-2013 Award Notification

1	Name and Address of Recipient: Agency Name Breathitt County Street Address PO Box 750 City, KY Zip Jackson, KY 41339	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Contact – Phone # Brenda McEntyre – 502-564-3791 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Judy Howard – 502-564-1979 Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY13 Delinquent Fund Source Title I, Part D, Subpart 2 CFDA# 84.010A MUNIS Project Number 3143 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): U.S. Department of Education NCLB, Title I, Part A; 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81, 82 and 87 Title I, Part D, Subpart 2	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$72,811.00	11	Evaluations: N/A
6	Period of Award: July 1, 2012 – September 30, 2014		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: All funds must be spent or encumbered by September 30, 2014. The final Federal Cash Request must be submitted by December 10, 2014.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidated Plans & Audits	Date: March 22, 2013	

Kentucky Department of Education
REVISION #2 School Year 2012-2013 Award Notification

1	Name and Address of Recipient: Agency Name Campbell County Street Address 101 Orchard Ln City, KY Zip Alexandria, KY 41001	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____	
2	KDE Contact Information: Program Contact – Phone # Brenda McEntyre – 502-564-3791 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Judy Howard – 502-564-1979 Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description FY13 Delinquent Fund Source Title I, Part D, Subpart 2 CFDA# 84.010A MUNIS Project Number 3143 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____	
4	Grant Authority (Source): U.S. Department of Education NCLB, Title I, Part A; 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81, 82 and 87 Title I, Part D, Subpart 2		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$108,530.00	11	Evaluations: N/A	
6	Period of Award: July 1, 2012 – September 30, 2014			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions: All funds must be spent or encumbered by September 30, 2014. The final Federal Cash Request must be submitted by December 10, 2014.			
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidated Plans & Audits		Date: March 22, 2013	

Kentucky Department of Education
REVISION #2 School Year 2012-2013 Award Notification

1	Name and Address of Recipient: Agency Name Christian County Street Address PO Box 609 City, KY Zip Hopkinsville, KY 42241	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____	
2	KDE Contact Information: Program Contact – Phone # Brenda McEntyre – 502-564-3791 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Judy Howard – 502-564-1979 Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description FY13 Delinquent Fund Source Title I, Part D, Subpart 2 CFDA# 84.010A MUNIS Project Number 3143 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____	
4	Grant Authority (Source): U.S. Department of Education NCLB, Title I, Part A; 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81, 82 and 87 Title I, Part D, Subpart 2		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$72,811.00	11	Evaluations: N/A	
6	Period of Award: July 1, 2012 – September 30, 2014			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions: All funds must be spent or encumbered by September 30, 2014. The final Federal Cash Request must be submitted by December 10, 2014.			
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidated Plans & Audits		Date: March 22, 2013	

Kentucky Department of Education
REVISION #2 School Year 2012-2013 Award Notification

1	Name and Address of Recipient: Agency Name Clinton County Street Address Rt 4 Box 100 Hwy 127 City, KY Zip Albany, KY 42602	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Contact – Phone # Brenda McEntyre – 502-564-3791 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Judy Howard – 502-564-1979 Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY13 Delinquent Fund Source Title I, Part D, Subpart 2 CFDA# 84.010A MUNIS Project Number 3143 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): U.S. Department of Education NCLB, Title I, Part A; 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81, 82 and 87 Title I, Part D, Subpart 2	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$81,054.00	11	Evaluations: N/A
6	Period of Award: July 1, 2012 – September 30, 2014		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: All funds must be spent or encumbered by September 30, 2014. The final Federal Cash Request must be submitted by December 10, 2014.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidated Plans & Audits	Date: March 22, 2013	

Kentucky Department of Education
REVISION #2 School Year 2012-2013 Award Notification

1	Name and Address of Recipient: Agency Name Daviess County Street Address PO Box 21510 City, KY Zip Owensboro, KY 42304	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Contact – Phone # Brenda McEntyre – 502-564-3791 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Judy Howard – 502-564-1979 Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY13 Delinquent Fund Source Title I, Part D, Subpart 2 CFDA# 84.010A MUNIS Project Number 3143 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): U.S. Department of Education NCLB, Title I, Part A; 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81, 82 and 87 Title I, Part D, Subpart 2	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$81,054.00	11	Evaluations: N/A
6	Period of Award: July 1, 2012 – September 30, 2014		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: All funds must be spent or encumbered by September 30, 2014. The final Federal Cash Request must be submitted by December 10, 2014.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidated Plans & Audits	Date: March 22, 2013	

Kentucky Department of Education
REVISION #2 School Year 2012-2013 Award Notification

1	Name and Address of Recipient: Agency Name Fayette County Street Address 701 E Main St City, KY Zip Lexington, KY 40502	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Contact – Phone # Brenda McEntyre – 502-564-3791 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Judy Howard – 502-564-1979 Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY13 Delinquent Fund Source Title I, Part D, Subpart 2 CFDA# 84.010A MUNIS Project Number 3143 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): U.S. Department of Education NCLB, Title I, Part A; 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81, 82 and 87 Title I, Part D, Subpart 2		
5	Award Amount: \$155,239.00	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
6	Period of Award: July 1, 2012 – September 30, 2014	11	Evaluations: N/A
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: All funds must be spent or encumbered by September 30, 2014. The final Federal Cash Request must be submitted by December 10, 2014.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidated Plans & Audits		Date: March 22, 2013

Kentucky Department of Education
REVISION #2 School Year 2012-2013 Award Notification

1 Name and Address of Recipient: Agency Name Graves County Street Address 2290 State Rt 121 N City, KY Zip Mayfield, KY 42066	7 Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2 KDE Contact Information: Program Contact – Phone # Brenda McEntyre – 502-564-3791 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Judy Howard – 502-564-1979 Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8 Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3 Description/Fund Source of Award and Fiscal Year: Description FY13 Delinquent Fund Source Title I, Part D, Subpart 2 CFDA# 84.010A MUNIS Project Number 3143 Master Agreement Number N/A	9 Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4 Grant Authority (Source): U.S. Department of Education NCLB, Title I, Part A; 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81, 82 and 87 Title I, Part D, Subpart 2	10 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5 Award Amount: \$16,486.00	11 Evaluations: N/A
6 Period of Award: July 1, 2012 – September 30, 2014	
12 Consortia/Partnership Members:	
13 Special Instructions/Conditions: All funds must be spent or encumbered by September 30, 2014. The final Federal Cash Request must be submitted by December 10, 2014.	
14 Authorized By (Name/Title): Donna Tackett, Director Division of Consolidated Plans & Audits	Date: March 22, 2013

Kentucky Department of Education
REVISION #2 School Year 2012-2013 Award Notification

1	Name and Address of Recipient: Agency Name Hardin County Street Address 65 W A Jenkins Rd City, KY Zip Elizabethtown, KY 42701	7 Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Contact – Phone # Brenda McEntyre – 502-564-3791 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Judy Howard – 502-564-1979 Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8 Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY13 Delinquent Fund Source Title I, Part D, Subpart 2 CFDA# 84.010A MUNIS Project Number 3143 Master Agreement Number N/A	9 Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): U.S. Department of Education NCLB, Title I, Part A; 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81, 82 and 87 Title I, Part D, Subpart 2	10 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$155,239.00	11 Evaluations: N/A
6	Period of Award: July 1, 2012 – September 30, 2014	
12	Consortia/Partnership Members:	
13	Special Instructions/Conditions: All funds must be spent or encumbered by September 30, 2014. The final Federal Cash Request must be submitted by December 10, 2014.	
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidated Plans & Audits	Date: March 22, 2013

Kentucky Department of Education
REVISION #2 School Year 2012-2013 Award Notification

1	Name and Address of Recipient: Agency Name Jackson County Street Address PO Box 217 City, KY Zip McKee, KY 40447	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Contact – Phone # Brenda McEntyre – 502-564-3791 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Judy Howard – 502-564-1979 Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY13 Delinquent Fund Source Title I, Part D, Subpart 2 CFDA# 84.010A MUNIS Project Number 3143 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): U.S. Department of Education NCLB, Title I, Part A; 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81, 82 and 87 Title I, Part D, Subpart 2	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$23,354.00	11	Evaluations: N/A
6	Period of Award: July 1, 2012 – September 30, 2014		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: All funds must be spent or encumbered by September 30, 2014. The final Federal Cash Request must be submitted by December 10, 2014.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidated Plans & Audits	Date: March 22, 2013	

Kentucky Department of Education
REVISION #2 School Year 2012-2013 Award Notification

1	Name and Address of Recipient: Agency Name Jefferson County Street Address PO Box 34020 City, KY Zip Louisville, KY 40232	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Contact – Phone # Brenda McEntyre – 502-564-3791 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Judy Howard – 502-564-1979 Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY13 Delinquent Fund Source Title I, Part D, Subpart 2 CFDA# 84.010A MUNIS Project Number 3143 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): U.S. Department of Education NCLB, Title I, Part A; 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81, 82 and 87 Title I, Part D, Subpart 2	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$170,350.00	11	Evaluations: N/A
6	Period of Award: July 1, 2012 – September 30, 2014		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: All funds must be spent or encumbered by September 30, 2014. The final Federal Cash Request must be submitted by December 10, 2014.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidated Plans & Audits	Date: March 22, 2013	

Kentucky Department of Education
REVISION #2 School Year 2012-2013 Award Notification

1	Name and Address of Recipient: Agency Name Knox County Street Address 200 Daniel Boone Dr City, KY Zip Barbourville, KY 40906	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____	
2	KDE Contact Information: Program Contact – Phone # Brenda McEntyre – 502-564-3791 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Judy Howard – 502-564-1979 Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description FY13 Delinquent Fund Source Title I, Part D, Subpart 2 CFDA# 84.010A MUNIS Project Number 3143 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____	
4	Grant Authority (Source): U.S. Department of Education NCLB, Title I, Part A; 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81, 82 and 87 Title I, Part D, Subpart 2		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$48,083.00	11	Evaluations: N/A	
6	Period of Award: July 1, 2012 – September 30, 2014			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions: All funds must be spent or encumbered by September 30, 2014. The final Federal Cash Request must be submitted by December 10, 2014.			
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidated Plans & Audits		Date: March 22, 2013	

Kentucky Department of Education
REVISION #2 School Year 2012-2013 Award Notification

1	Name and Address of Recipient: Agency Name Laurel County Street Address 718 North Main Street City, KY Zip London, KY 40741	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Contact – Phone # Brenda McEntyre – 502-564-3791 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Judy Howard – 502-564-1979 Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY13 Delinquent Fund Source Title I, Part D, Subpart 2 CFDA# 84.010A MUNIS Project Number 3143 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): U.S. Department of Education NCLB, Title I, Part A; 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81, 82 and 87 Title I, Part D, Subpart 2		
5	Award Amount: \$39,840.00	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
6	Period of Award: July 1, 2012 – September 30, 2014	11	Evaluations: N/A
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: All funds must be spent or encumbered by September 30, 2014. The final Federal Cash Request must be submitted by December 10, 2014.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidated Plans & Audits		Date: March 22, 2013

Kentucky Department of Education
REVISION #2 School Year 2012-2013 Award Notification

1	Name and Address of Recipient: Agency Name McCracken County Street Address 435 Berger Rd City, KY Zip Paducah, KY 42001	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Contact – Phone # Brenda McEntyre – 502-564-3791 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Judy Howard – 502-564-1979 Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY13 Delinquent Fund Source Title I, Part D, Subpart 2 CFDA# 84.010A MUNIS Project Number 3143 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): U.S. Department of Education NCLB, Title I, Part A; 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81, 82 and 87 Title I, Part D, Subpart 2		
5	Award Amount: \$123,641.00	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
6	Period of Award: July 1, 2012 – September 30, 2014	11	Evaluations: N/A
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: All funds must be spent or encumbered by September 30, 2014. The final Federal Cash Request must be submitted by December 10, 2014.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidated Plans & Audits		Date: March 22, 2013

Kentucky Department of Education
REVISION #2 School Year 2012-2013 Award Notification

1	Name and Address of Recipient: Agency Name Middlesboro Independent Street Address PO Box 959 City, KY Zip Middlesboro, KY 40965	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Contact – Phone # Brenda McEntyre – 502-564-3791 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Judy Howard – 502-564-1979 Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY13 Delinquent Fund Source Title I, Part D, Subpart 2 CFDA# 84.010A MUNIS Project Number 3143 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): U.S. Department of Education NCLB, Title I, Part A; 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81, 82 and 87 Title I, Part D, Subpart 2		
5	Award Amount: \$8,243.00	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
6	Period of Award: July 1, 2012 – September 30, 2014	11	Evaluations: N/A
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: All funds must be spent or encumbered by September 30, 2014. The final Federal Cash Request must be submitted by December 10, 2014.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidated Plans & Audits		Date: March 22, 2013

Kentucky Department of Education
REVISION #2 School Year 2012-2013 Award Notification

1	Name and Address of Recipient: Agency Name Montgomery County Street Address 700 Woodford Drive City, KY Zip Mount Sterling, KY 40353	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Contact – Phone # Brenda McEntyre – 502-564-3791 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Judy Howard – 502-564-1979 Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY13 Delinquent Fund Source Title I, Part D, Subpart 2 CFDA# 84.010A MUNIS Project Number 3143 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): U.S. Department of Education NCLB, Title I, Part A; 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81, 82 and 87 Title I, Part D, Subpart 2	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$129,137.00	11	Evaluations: N/A
6	Period of Award: July 1, 2012 – September 30, 2014		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: All funds must be spent or encumbered by September 30, 2014. The final Federal Cash Request must be submitted by December 10, 2014.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidated Plans & Audits	Date: March 22, 2013	

Kentucky Department of Education
REVISION #2 School Year 2012-2013 Award Notification

1	Name and Address of Recipient: Agency Name Murray Independent Street Address 208 S 13th St City, KY Zip Murray, KY 42071	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Contact – Phone # Brenda McEntyre – 502-564-3791 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Judy Howard – 502-564-1979 Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY13 Delinquent Fund Source Title I, Part D, Subpart 2 CFDA# 84.010A MUNIS Project Number 3143 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): U.S. Department of Education NCLB, Title I, Part A; 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81, 82 and 87 Title I, Part D, Subpart 2	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$8,243.00	11	Evaluations: N/A
6	Period of Award: July 1, 2012 – September 30, 2014		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: All funds must be spent or encumbered by September 30, 2014. The final Federal Cash Request must be submitted by December 10, 2014.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidated Plans & Audits	Date: March 22, 2013	

Kentucky Department of Education
REVISION #2 School Year 2012-2013 Award Notification

1	Name and Address of Recipient: Agency Name Owensboro Independent Street Address PO Box 249 City, KY Zip Owensboro, KY 42302	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Contact – Phone # Brenda McEntyre – 502-564-3791 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Judy Howard – 502-564-1979 Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY13 Delinquent Fund Source Title I, Part D, Subpart 2 CFDA# 84.010A MUNIS Project Number 3143 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): U.S. Department of Education NCLB, Title I, Part A; 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81, 82 and 87 Title I, Part D, Subpart 2	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$23,354.00	11	Evaluations: N/A
6	Period of Award: July 1, 2012 – September 30, 2014		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: All funds must be spent or encumbered by September 30, 2014. The final Federal Cash Request must be submitted by December 10, 2014.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidated Plans & Audits	Date: March 22, 2013	

Kentucky Department of Education
REVISION #2 School Year 2012-2013 Award Notification

1	Name and Address of Recipient: Agency Name Pulaski County Street Address PO Box 1055 City, KY Zip Somerset, KY 42502	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Contact – Phone # Brenda McEntyre – 502-564-3791 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Judy Howard – 502-564-1979 Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY13 Delinquent Fund Source Title I, Part D, Subpart 2 CFDA# 84.010A MUNIS Project Number 3143 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): U.S. Department of Education NCLB, Title I, Part A; 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81, 82 and 87 Title I, Part D, Subpart 2	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$100,287.00	11	Evaluations: N/A
6	Period of Award: July 1, 2012 – September 30, 2014		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: All funds must be spent or encumbered by September 30, 2014. The final Federal Cash Request must be submitted by December 10, 2014.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidated Plans & Audits	Date: March 22, 2013	

Kentucky Department of Education
REVISION #2 School Year 2012-2013 Award Notification

1	Name and Address of Recipient: Agency Name Raceland Independent Street Address 600 Ram Blvd City, KY Zip Raceland, KY 41169	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Contact – Phone # Brenda McEntyre – 502-564-3791 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Judy Howard – 502-564-1979 Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY13 Delinquent Fund Source Title I, Part D, Subpart 2 CFDA# 84.010A MUNIS Project Number 3143 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): U.S. Department of Education NCLB, Title I, Part A; 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81, 82 and 87 Title I, Part D, Subpart 2	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$81,054.00	11	Evaluations: N/A
6	Period of Award: July 1, 2012 – September 30, 2014		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: All funds must be spent or encumbered by September 30, 2014. The final Federal Cash Request must be submitted by December 10, 2014.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidated Plans & Audits	Date: March 22, 2013	

Kentucky Department of Education
REVISION #2 School Year 2012-2013 Award Notification

1	Name and Address of Recipient: Agency Name Rowan County Street Address 121 E Second St City, KY Zip Morehead, KY 40351	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Contact – Phone # Brenda McEntyre – 502-564-3791 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Judy Howard – 502-564-1979 Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY13 Delinquent Fund Source Title I, Part D, Subpart 2 CFDA# 84.010A MUNIS Project Number 3143 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): U.S. Department of Education NCLB, Title I, Part A; 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81, 82 and 87 Title I, Part D, Subpart 2	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$15,112.00	11	Evaluations: N/A
6	Period of Award: July 1, 2012 – September 30, 2014		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: All funds must be spent or encumbered by September 30, 2014. The final Federal Cash Request must be submitted by December 10, 2014.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidated Plans & Audits	Date: March 22, 2013	

Kentucky Department of Education
REVISION #2 School Year 2012-2013 Award Notification

1	Name and Address of Recipient: Agency Name Somerset Independent Street Address 305 N College St City, KY Zip Somerset, KY 42502	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Contact – Phone # Brenda McEntyre – 502-564-3791 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Judy Howard – 502-564-1979 Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY13 Delinquent Fund Source Title I, Part D, Subpart 2 CFDA# 84.010A MUNIS Project Number 3143 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): U.S. Department of Education NCLB, Title I, Part A; 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81, 82 and 87 Title I, Part D, Subpart 2		
5	Award Amount: \$13,738.00	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
6	Period of Award: July 1, 2012 – September 30, 2014	11	Evaluations: N/A
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: All funds must be spent or encumbered by September 30, 2014. The final Federal Cash Request must be submitted by December 10, 2014.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidated Plans & Audits		Date: March 22, 2013

Kentucky Department of Education
REVISION #2 School Year 2012-2013 Award Notification

1	Name and Address of Recipient: Agency Name Warren County Street Address PO Box 51810 City, KY Zip Bowling Green, KY 42102	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____	
2	KDE Contact Information: Program Contact – Phone # Brenda McEntyre – 502-564-3791 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Judy Howard – 502-564-1979 Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description FY13 Delinquent Fund Source Title I, Part D, Subpart 2 CFDA# 84.010A MUNIS Project Number 3143 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____	
4	Grant Authority (Source): U.S. Department of Education NCLB, Title I, Part A; 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81, 82 and 87 Title I, Part D, Subpart 2		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$284,375.00	11	Evaluations: N/A	
6	Period of Award: July 1, 2012 – September 30, 2014			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions: All funds must be spent or encumbered by September 30, 2014. The final Federal Cash Request must be submitted by December 10, 2014.			
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidated Plans & Audits		Date: March 22, 2013	

Kentucky Department of Education
REVISION #2 School Year 2012-2013 Award Notification

1	Name and Address of Recipient: Agency Name Wayne County Street Address 534 Albany Rd City, KY Zip Monticello, KY 42633	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____	
2	KDE Contact Information: Program Contact – Phone # Brenda McEntyre – 502-564-3791 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Judy Howard – 502-564-1979 Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description FY13 Delinquent Fund Source Title I, Part D, Subpart 2 CFDA# 84.010A MUNIS Project Number 3143 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____	
4	Grant Authority (Source): U.S. Department of Education NCLB, Title I, Part A; 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81, 82 and 87 Title I, Part D, Subpart 2		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$48,083.00	11	Evaluations: N/A	
6	Period of Award: July 1, 2012 – September 30, 2014			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions: All funds must be spent or encumbered by September 30, 2014. The final Federal Cash Request must be submitted by December 10, 2014.			
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidated Plans & Audits		Date: March 22, 2013	

Kentucky Department of Education
REVISION #2 School Year 2012-2013 Award Notification

1	Name and Address of Recipient: Agency Name Webster County Street Address 28 State Rt 1340 City, KY Zip Dixon, KY 42409	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Contact – Phone # Brenda McEntyre – 502-564-3791 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Judy Howard – 502-564-1979 Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY13 Delinquent Fund Source Title I, Part D, Subpart 2 CFDA# 84.010A MUNIS Project Number 3143 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): U.S. Department of Education NCLB, Title I, Part A; 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81, 82 and 87 Title I, Part D, Subpart 2		
5	Award Amount: \$16,484.00	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
6	Period of Award: July 1, 2012 – September 30, 2014	11	Evaluations: N/A
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: All funds must be spent or encumbered by September 30, 2014. The final Federal Cash Request must be submitted by December 10, 2014.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidated Plans & Audits		Date: March 22, 2013

Kentucky Department of Education
REVISION #2 School Year 2012-2013 Award Notification

1	Name and Address of Recipient: Agency Name Woodford County Street Address 330 Pisgah Pk City, KY Zip Versailles, KY 40383	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Contact – Phone # Brenda McEntyre – 502-564-3791 Street Address 500 Mero St., 8 th Fl., CPT Budget Contact – Phone # Judy Howard – 502-564-1979 Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY13 Delinquent Fund Source Title I, Part D, Subpart 2 CFDA# 84.010A MUNIS Project Number 3143 Master Agreement Number N/A	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): U.S. Department of Education NCLB, Title I, Part A; 34CFR 200; 34 CFR EDGAR Parts 76,77,80,81, 82 and 87 Title I, Part D, Subpart 2	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$19,233.00	11	Evaluations: N/A
6	Period of Award: July 1, 2012 – September 30, 2014		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: All funds must be spent or encumbered by September 30, 2014. The final Federal Cash Request must be submitted by December 10, 2014.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidated Plans & Audits	Date: March 22, 2013	