	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameAdair CountyStreet Address1204 Greensburg StreetCity, State ZipColumbia, KY 42728	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4	Grant Authority (Source): KRS 158.4416	11	Other		
5 6 12	Award Amount: \$43,095.00OppositePeriod of Award: July 1, 2023-June 30, 2024CompositeConsortia/Partnership Members: N/A	11 ea	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.		
13	Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	nt	Date: July 11, 2023		
	quea				

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameAllen CountyStreet Address570 Oliver StreetCity, State ZipScottsville, KY 42164	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	City, KY Zip Frankfort, KY 40601 Description/Fund Source of Award and Fiscal Year: Description	9	Reimbursement Frequency: Monthly Quarterly	
	Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK		Other Beginning of Fiscal Year	
	Master Agreement Number N/A	10	Financial Reporting Method:	
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by	
6 12	Period of Award: July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A	ea	KDE Program Contacts.	
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	yucaue			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameAnchorage Ind.Street Address11400 Ridge RoadCity, State ZipAnchorage, KY 40223	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter	8	Method of Payment: Federal Cash Request Expenditure Reimbursement	
	Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	5	 Automatic Payment Lump Sum Receipt of Invoice from Vendor 	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider	9	Reimbursement Frequency: Monthly Quarterly	
	Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK		Other Beginning of Fiscal Year	
	Master Agreement Number N/A	10	Financial Reporting Method: Image: Submission	
4	Grant Authority (Source): KRS 158.4416		Other	
5	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by	
6	Period of Award: July 1, 2023-June 30, 2024	ea	KDE Program Contacts.	
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	Yucau			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameAnderson CountyStreet Address1160 By Pass NorthCity, State ZipLawrenceburg, KY 40342	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:	8	Method of Payment: Federal Cash Request	
	Program Consultant – Phone # Street AddressChristina Weeter 300 Sower BlvdBudget Contact – Phone # Street AddressNicole Crosthwaite 300 Sower BlvdCity, KY ZipFrankfort, KY 40601	5	 Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor 	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider	9	Monthly Quarterly	
	Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK		Other Beginning of Fiscal Year	
	Master Agreement Number N/A	10	Financial Reporting Method:	
4	Grant Authority (Source): KRS 158.4416		Other	
5	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by	
6	Period of Award: Common Weight July 1, 2023-June 30, 2024 Common Weight		KDE Program Contacts.	
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	Yucau			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameAshland Ind.Street Address1420 Central AveCity, State ZipAshland, KY 41101	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416		Other	
5 6	Award Amount: \$43,095.00 Opposite Period of Award: July 1, 2023-June 30, 2024 Commonweight	11 Pa	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameAugusta Ind.Street Address307 Bracken StreetCity, State ZipAugusta, KY 41002	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per		
6	Period of Award: July 1, 2023-June 30, 2024	ea.	specific program guidelines to be disseminated by KDE Program Contacts.		
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023		
	yuca				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameBallard CountyStreet Address3465 Paducah RoadCity, State ZipBarlow, KY 42024	7 11	Fund Type: State Federal Other:		
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4	Grant Authority (Source): KRS 158.4416		Other		
5 6	Award Amount: \$43,095.00OurPeriod of Award:Commonweak	11 Ba	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.		
12	July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A				
13	Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	t	Date: July 11, 2023		
	Yucau				

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameBarbourville Ind.Street Address140 School StreetCity, State ZipBarbourville, KY 40906	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416		Other	
5 6	Award Amount: \$43,095.00 Opposite Period of Award: July 1, 2023-June 30, 2024 Commonweight	11 2 <i>a</i>	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
12	Consortia/Partnership Members: N/A			
13 14	Special Instructions/Conditions: Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	Yucau			

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameBardstown Ind.Street Address308 N Fifth StreetCity, State ZipBardstown, KY 40004	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per		
6	Period of Award: July 1, 2023-June 30, 2024	ea	specific program guidelines to be disseminated by KDE Program Contacts.		
12 13	Consortia/Partnership Members: N/A				
13 14	Special Instructions/Conditions: Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023		
	yuca				

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameBarren CountyStreet Address600 Trojan WayCity, State ZipGlasgow, KY 42141	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per	
6	Period of Award: July 1, 2023-June 30, 2024	ea	specific program guidelines to be disseminated by KDE Program Contacts.	
12	Consortia/Partnership Members: N/A			
13 14	Special Instructions/Conditions: Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	Yuca			

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameBath CountyStreet Address405 W Main StreetCity, State ZipOwingsville, KY 40360	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone # Street AddressChristina Weeter 300 Sower BlvdBudget Contact – Phone # Street AddressNicole Crosthwaite 300 Sower BlvdStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per		
6 12	Period of Award: July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A	ea	specific program guidelines to be disseminated by KDE Program Contacts.		
13	Special Instructions/Conditions:				
14	14 Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Management Date: July 11, 2023				

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameBeechwood Ind.Street Address50 Beechwood RoadCity, State ZipFort Mitchell, KY 41017	7 tt	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone # Street AddressChristina Weeter 300 Sower BlvdBudget Contact – Phone # Street AddressNicole Crosthwaite 300 Sower BlvdStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416		Other	
5 6	Award Amount: \$43,095.00 Opposite Period of Award: July 1, 2023-June 30, 2024 Commonweak	11 Ca	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
12	Consortia/Partnership Members: N/A			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	nt .	Date: July 11, 2023	
	yuca			

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameBell CountyStreet Address211 Virginia AveCity, State ZipPineville, KY 40977	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	City, KY Zip Frankfort, KY 40601 Description/Fund Source of Award and Fiscal Year: Description Description School Based Mental Health Care	9	Reimbursement Frequency: Monthly Quarterly		
	Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK		Other Beginning of Fiscal Year		
4	Master Agreement Number N/A Grant Authority (Source): KRS 158.4416	10	Financial Reporting Method: Image: Submission Image: Other		
5	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by		
6	Period of Award: July 1, 2023-June 30, 2024	ea	KDE Program Contacts.		
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	nt	Date: July 11, 2023		
	Yucau				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameBellevue Ind.Street Address219 Center StreetCity, State ZipBellevue, KY 41073	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other		
6	Award Amount: \$43,095.00 Period of Award: July 1, 2023-June 30, 2024	ea	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.		
12	Consortia/Partnership Members: N/A				
13	Special Instructions/Conditions:		P-4-0 1-1-44 2022		
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023		
	Yucau				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameBerea Ind.Street Address3 Pirate ParkwayCity, State ZipBerea, KY 40403	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per		
6	Period of Award: July 1, 2023-June 30, 2024	ea	specific program guidelines to be disseminated by KDE Program Contacts.		
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:				
13 14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023		
	Yucau				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameBoone CountyStreet Address8330 US 42City, State ZipFlorence, KY 41042	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per		
6	Period of Award: July 1, 2023-June 30, 2024	ea	specific program guidelines to be disseminated by KDE Program Contacts.		
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023		
	Yucaus				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient: Agency Name Bourbon County	1	Fund Type: State		
	Street Address 3343 Lexington Road DCD211	4	Federal		
	City, State Zip Paris, KY 40361	U	Other:		
		8	Method of Payment:		
2	KDE Contact Information:		Federal Cash Request		
_	Program Consultant – Phone # Christina Weeter		Expenditure Reimbursement		
	Street Address 300 Sower Blvd		Automatic Payment		
	Budget Contact – Phone # Nicole Crosthwaite		Lump Sum		
	Street Address 300 Sower Blvd		Receipt of Invoice from Vendor		
	City, KY Zip Frankfort, KY 40601				
		9	Reimbursement Frequency:		
3	Description/Fund Source of Award and Fiscal Year:		Monthly		
	Description School Based Mental Health Care				
	Fund Source State General Funds		Other Beginning of Fiscal Year		
	CFDA# N/A				
	MUNIS Project Number 14MK				
	Master Agreement Number N/A	10	Financial Reporting Method:		
			Electronic Submission		
4	Grant Authority (Source): KRS 158.4416		Other		
5	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by		
6	Period of Award:	00	KDE Program Contacts.		
v	July 1, 2023-June 30, 2024	ya.			
12	Consortia/Partnership Members: N/A	1			
13	Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	at .	Date: July 11, 2023		
uca					

	Kentucky Department of Education Award Notification					
1	Name and Address of Recipient:Agency NameBowling Green Ind.Street Address1211 Center StreetCity, State ZipBowling Green, KY 42101	7	Fund Type: State Federal Other:			
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor			
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission			
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per			
6 12	Period of Award: July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A	ea	specific program guidelines to be disseminated by KDE Program Contacts.			
12	Special Instructions/Conditions:					
14						

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameBoyd CountyStreet Address1104 Bob McCullough DriveCity, State ZipAshland, KY 41102	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Electronic Submission		
4	Grant Authority (Source): KRS 158.4416		Other		
5 6	Award Amount: \$43,095.00 Opposite Period of Award: July 1, 2023-June 30, 2024 Commonweak	11 2	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.		
12	Consortia/Partnership Members: N/A				
13	Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023		
L					

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameBoyle CountyStreet Address101 Citation Drive Suite CCity, State ZipDanville, KY 40422	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4	Grant Authority (Source): KRS 158.4416		Other		
5 6	Award Amount: \$43,095.00 Period of Award: Commonweak July 1, 2023-June 30, 2024 Commonweak	11 2	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.		
12	Consortia/Partnership Members: N/A				
13	Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023		
	Yucau				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameBracken CountyStreet Address1048 Bladeston DriveCity, State ZipBrooksville, KY 41004	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4	Grant Authority (Source): KRS 158.4416				
5 6 12	Award Amount: \$43,095.00OppositePeriod of Award: July 1, 2023-June 30, 2024CompositeConsortia/Partnership Members: N/A	11 92	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.		
13	Special Instructions/Conditions:				
14					

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameBreathitt CountyStreet Address420 Court StreetCity, State ZipJackson, KY 41339	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per		
6	Period of Award: July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A	ea	specific program guidelines to be disseminated by KDE Program Contacts.		
12	Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023		
	Yucaus				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameBreckinridge CountyStreet Address86 Airport RoadCity, State ZipHardinsburg, KY 40143	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone # Street AddressChristina Weeter 300 Sower BlvdBudget Contact – Phone # Street AddressNicole Crosthwaite 300 Sower BlvdStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per		
6 12	Period of Award: July 1, 2023-June 30, 2024	ea	specific program guidelines to be disseminated by KDE Program Contacts.		
12	Consortia/Partnership Members: N/A Special Instructions/Conditions:				
14	•				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameBullitt CountyStreet Address1040 Hwy 44 ECity, State ZipShepherdsville, KY 40165	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4	Grant Authority (Source): KRS 158.4416	11	Other		
5 6	Award Amount: \$43,095.00 Opposite Period of Award: July 1, 2023-June 30, 2024 Commonweight	11 ea	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.		
12	Consortia/Partnership Members: N/A				
13	Special Instructions/Conditions:		Poten luk 44, 2022		
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	nt	Date: July 11, 2023		
	yucau				

	Kentucky Department of E Award Notificatio		tion
1	Name and Address of Recipient:Agency NameBurgin Ind.Street Address140 Danville RoadCity, State ZipBurgin, KY 40310	7	Fund Type: State Federal Other:
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission
4	Grant Authority (Source): KRS 158.4416		Other
5 6	Award Amount: \$43,095.00OutPeriod of Award:Commonweak	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.
12	July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023
	Yuca		

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameButler CountyStreet Address203 N Tyler StreetCity, State ZipMorgantown, KY 42261	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Reimbursement Frequency: Monthly Quarterly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per	
6	Period of Award: July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A	ea	specific program guidelines to be disseminated by KDE Program Contacts.	
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	nt	Date: July 11, 2023	
	quca			

	Kentucky Department of E Award Notification		tion
1	Name and Address of Recipient:Agency NameCaldwell CountyStreet Address612 West Washington StreetCity, State ZipPrinceton, KY 42445	7 [1]	Fund Type: State Federal Other:
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission
4	Grant Authority (Source): KRS 158.4416		
5 6 12	Award Amount: \$43,095.00OppositePeriod of Award: July 1, 2023-June 30, 2024CompositeConsortia/Partnership Members: N/A	11 2a	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023

	Kentucky Department of E Award Notificatio		tion
1	Name and Address of Recipient:Agency NameCalloway CountyStreet Address2110 College Farm RoadCity, State ZipMurray, KY 42071	7 11	Fund Type: State Federal Other:
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission
4	Grant Authority (Source): KRS 158.4416		Other
5 6	Award Amount: \$43,095.00 Period of Award:	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.
12	July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023
	yuca		

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameCampbell CountyStreet Address101 Orchard LaneCity, State ZipAlexandria, KY 41001	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416		Other	
5 6	Award Amount: \$43,095.00 Opposite Period of Award: July 1, 2023-June 30, 2024 Commonweight	11 2	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
12	Consortia/Partnership Members: N/A			
13	Special Instructions/Conditions:		Poten luk 44, 2022	
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	YUCAU			

	Kentucky Department of E Award Notification		tion
1	Name and Address of Recipient:Agency NameCampbellsville Ind.Street Address136 S Columbia AvenueCity, State ZipCampbellsville, KY 42718	7 [1]	Fund Type: State Federal Other:
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per
6	Period of Award: July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A	ea	specific program guidelines to be disseminated by KDE Program Contacts.
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023
	yuca		

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameCarlisle CountyStreet Address4557 State Rt 1377City, State ZipBardwell, KY 42023	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment	
	Budget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	9	 Lump Sum Receipt of Invoice from Vendor Reimbursement Frequency: 	
3	Description/Fund Source of Award and Fiscal Year:DescriptionSchool Based Mental Health Care ProviderFund SourceState General FundsCFDA#N/AMUNIS Project Number14MK		Monthly Quarterly Other Beginning of Fiscal Year	
4	Master Agreement Number N/A Grant Authority (Source): KRS 158.4416	10	Financial Reporting Method: Electronic Submission Other	
5	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by	
6 12	Period of Award: July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A	ea.	KDE Program Contacts.	
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	Yuca			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameCarroll CountyStreet Address813 Hawkins StreetCity, State ZipCarrollton, KY 41008	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	City, KY ZipFrankfort, KY 40601Description/Fund Source of Award and Fiscal Year: DescriptionSchool Based Mental Health Care ProviderFund SourceState General FundsCFDA#N/AMUNIS Project Number14MK N/AMaster Agreement NumberN/A	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416		Other	
5 6	Award Amount: \$43,095.00 Opposite Period of Award: Commonweak July 1, 2023-June 30, 2024 Commonweak	11 2	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
12	Consortia/Partnership Members: N/A			
13 14	Special Instructions/Conditions: Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	quica			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameCarter CountyStreet Address228 S Carol Malone Blvd.City, State ZipGrayson, KY 41143	7 []	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower Blvd	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	City, KY Zip Frankfort, KY 40601 Description/Fund Source of Award and Fiscal Year: School Based Mental Health Care Description School Based Mental Health Care Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416		Other	
5 6	Award Amount: \$43,095.00 Opposite Period of Award: Commonweak July 1, 2023-June 30, 2024 Commonweak	11 ea	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
12	Consortia/Partnership Members: N/A			
13 14	Special Instructions/Conditions:		Date: 1/1/2023	
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	nt	Date: July 11, 2023	
	Yuca			

	Kentucky Department of E Award Notificatio		tion
1	Name and Address of Recipient:Agency NameCasey CountyStreet Address1922 N Us 127City, State ZipLiberty, KY 42539	7 [1]	Fund Type: State Federal Other:
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per
6	Period of Award: July 1, 2023-June 30, 2024	ea	specific program guidelines to be disseminated by KDE Program Contacts.
12	Consortia/Partnership Members: N/A		
13 14	Special Instructions/Conditions: Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023
	Yuca		

	Kentucky Department of E Award Notificatio		tion
1	Name and Address of Recipient:Agency NameCaverna Ind.Street Address1102 N Dixie HwyCity, State ZipCave City, KY 42127	7 17	Fund Type: State Federal Other:
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission
4	Grant Authority (Source): KRS 158.4416		Other
5 6	Award Amount: \$43,095.00OppositePeriod of Award:Composite	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.
12	July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	it	Date: July 11, 2023
	yuca		

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameChristian CountyStreet Address200 Glass AvenueCity, State ZipHopkinsville, KY 42240	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	City, KY ZipFrankfort, KY 40601Description/Fund Source of Award and Fiscal Year: DescriptionSchool Based Mental Health Care ProviderFund SourceState General FundsCFDA#N/AMUNIS Project Number14MK N/AMaster Agreement NumberN/A	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416		Other	
5 6 12	Award Amount: \$43,095.00OppositePeriod of Award: July 1, 2023-June 30, 2024CompositeConsortia/Partnership Members: N/A	11 2 a	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
13	Special Instructions/Conditions:		Data: huly 11, 2022	
14	14 Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Date: July 11, 2023 Division of Budgets & Financial Management Division of Budgets & Financial Management			

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameClark CountyStreet Address1600 W Lexington AvenueCity, State ZipWinchester, KY 40391	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole Crosthwaite	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum		
3	Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601 Description/Fund Source of Award and Fiscal Year:	9	Receipt of Invoice from Vendor Reimbursement Frequency: Monthly		
	DescriptionSchool Based Mental Health Care ProviderFund SourceState General FundsCFDA#N/AMUNIS Project Number14MK		Quarterly Other Beginning of Fiscal Year		
	MUNIS Project Number 14MK Master Agreement Number N/A	10	Financial Reporting Method:		
4	Grant Authority (Source): KRS 158.4416		Other		
5 6	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.		
0 12	July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A	ta.			
13	Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	nt	Date: July 11, 2023		
	Yucau				

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameClay CountyStreet Address128 Richmond RoadCity, State ZipManchester, KY 40962	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower Blvd	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	City, KY ZipFrankfort, KY 40601Description/Fund Source of Award and Fiscal Year:DescriptionSchool Based Mental Health Care ProviderFund SourceState General Funds	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year	
4	CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A Grant Authority (Source): KRS 158.4416	10	Financial Reporting Method: Image: Submission Image: Other	
5	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per	
6	Period of Award: July 1, 2023-June 30, 2024	ea	specific program guidelines to be disseminated by KDE Program Contacts.	
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:			
13	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	Yucau			

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameClinton CountyStreet Address1273 KY HWY 90 West Ste 103City, State ZipAlbany, KY 42602	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per		
6 12	Period of Award: July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A	ea	specific program guidelines to be disseminated by KDE Program Contacts.		
13	Special Instructions/Conditions:				
14	•				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameCloverport Ind.Street Address301 Poplar StreetCity, State ZipCloverport, KY 40111	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per		
6	Period of Award: July 1, 2023-June 30, 2024	ea	specific program guidelines to be disseminated by KDE Program Contacts.		
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:				
13 14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023		
	Yucau				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameCorbin Ind.Street Address108 Roy Kidd AvenueCity, State ZipCorbin, KY 40701	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4	Grant Authority (Source): KRS 158.4416				
5 6	Award Amount: \$43,095.00 Other Period of Award: July 1, 2023-June 30, 2024 Commonweight	11 2	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.		
12	Consortia/Partnership Members: N/A				
13	Special Instructions/Conditions:		Poten luk 44, 2022		
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023		
	Yucau				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameCovington Ind.Street Address25 E Seventh StreetCity, State ZipCovington, KY 41011	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per		
6	Period of Award: July 1, 2023-June 30, 2024	ea.	specific program guidelines to be disseminated by KDE Program Contacts.		
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:				
13	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	t	Date: July 11, 2023		
	Yucau				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameCrittenden CountyStreet Address601 W Elm StreetCity, State ZipMarion, KY 42064	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4	Grant Authority (Source): KRS 158.4416		Other		
5 6	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.		
12	July 1, 2023-June 30, 2024				
12	Consortia/Partnership Members: N/A Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023		
	Yucau				

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameCumberland CountyStreet Address810 N Main StreetCity, State ZipBurkesville, KY 42717	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416		Other	
5 6	Award Amount: \$43,095.00 Opposite Period of Award: July 1, 2023-June 30, 2024 Commonweight	11 2	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
12	Consortia/Partnership Members: N/A			
13	Special Instructions/Conditions:		Poten luk 44, 2022	
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	Yucau			

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameDanville Ind.Street Address115 E. Lexington Ave.City, State ZipDanville, KY 40422	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4 5	Grant Authority (Source): KRS 158.4416	11	Other Evaluations: Each program will be evaluated per		
6	Period of Award: July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A	ea	specific program guidelines to be disseminated by KDE Program Contacts.		
13	Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023		
	quca				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameDaviess CountyStreet Address1622 Southeastern ParkwayCity, State ZipOwensboro, KY 42303	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per		
6	Period of Award: July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A	ea	specific program guidelines to be disseminated by KDE Program Contacts.		
12	Special Instructions/Conditions:	_			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	t	Date: July 11, 2023		
	qucau				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameDawson Springs Ind.Street Address118 E Arcadia AvenueCity, State ZipDawson Springs, KY 42408	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone # Street AddressChristina Weeter 300 Sower BlvdBudget Contact – Phone # Street AddressNicole Crosthwaite 300 Sower BlvdStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per		
6	Period of Award: July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A	ea	specific program guidelines to be disseminated by KDE Program Contacts.		
12	Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023		
	Yucau				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameDayton Ind.Street Address200 Clay StreetCity, State ZipDayton, KY 41074	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per		
6	Period of Award: July 1, 2023-June 30, 2024	ea	specific program guidelines to be disseminated by KDE Program Contacts.		
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:				
13	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023		
	Yuca				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameEast Bernstadt Ind.Street Address296 East Highway 3094City, State ZipEast Bernstadt, KY 40729	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4	Grant Authority (Source): KRS 158.4416		Other		
5 6 12	Award Amount: \$43,095.00OppositePeriod of Award: July 1, 2023-June 30, 2024CompositeConsortia/Partnership Members: N/A	11 Pa	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.		
13	Special Instructions/Conditions:				
14	14 Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Management Date: July 11, 2023				

	Kentucky Department of E Award Notification		tion
1	Name and Address of Recipient:Agency NameEdmonson CountyStreet Address100 Wildcat WayCity, State ZipBrownsville, KY 42210	7 [1]	Fund Type: State Federal Other:
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per
6	Period of Award: July 1, 2023-June 30, 2024	ea	specific program guidelines to be disseminated by KDE Program Contacts.
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:		
13 14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023
	Yuca		

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameElizabethtown Ind.Street Address219 Helm StreetCity, State ZipElizabethtown, KY 42701	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	City, KY ZipFrankfort, KY 40601Description/Fund Source of Award and Fiscal Year:DescriptionSchool Based Mental Health Care ProviderFund SourceState General FundsCFDA#N/AMUNIS Project Number14MK	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year	
4	Master Agreement Number N/A Grant Authority (Source): KRS 158.4416	10	Financial Reporting Method: Electronic Submission Other	
5	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by	
6	Period of Award: July 1, 2023-June 30, 2024	ea	KDE Program Contacts.	
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	t	Date: July 11, 2023	
	Yucau			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameElliott CountyStreet AddressP.O. Box 767City, State ZipSandy Hook, KY 41171	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416			
5 6	Award Amount: \$43,095.00	11 2a	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameEminence Ind.Street Address291 West Broadway StreetCity, State ZipEminence, KY 40019	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416		Other	
5 6	Award Amount: \$43,095.00 Opposite Period of Award: July 1, 2023-June 30, 2024 Commonweak	11 2	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
12	Consortia/Partnership Members: N/A			
13	Special Instructions/Conditions:		D-4-0 1.1.44 0000	
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	t	Date: July 11, 2023	
	yucau			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameErlanger-Elsmere Ind.Street Address500 Graves AvenueCity, State ZipErlanger, KY 41018	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per	
6	Period of Award: July 1, 2023-June 30, 2024	ea	specific program guidelines to be disseminated by KDE Program Contacts.	
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	quea			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameEstill CountyStreet Address253 Main StreetCity, State ZipIrvine, KY 40336	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416		Other	
5 6	Award Amount: \$43,095.00 Opposite Period of Award: July 1, 2023-June 30, 2024 Commonweak	11 Pa	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
12	Consortia/Partnership Members: N/A	L		
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	yuca			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameFairview Ind.Street Address2100 Main StreetCity, State ZipAshland, KY 41102	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per	
6	Period of Award: July 1, 2023-June 30, 2024	ea	specific program guidelines to be disseminated by KDE Program Contacts.	
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:			
13 14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	Yuca			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameFayette CountyStreet Address701 East Main StreetCity, State ZipLexington, KY 40505	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter	8	Method of Payment: Federal Cash Request Expenditure Reimbursement	
	Street Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	S	 Automatic Payment Lump Sum Receipt of Invoice from Vendor 	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care	9	Reimbursement Frequency: Monthly Quarterly	
	Fund Source Provider FUND Source State General Funds CFDA# N/A MUNIS Project Number 14MK		Other Beginning of Fiscal Year	
	Master Agreement Number N/A	10	Financial Reporting Method:	
4	Grant Authority (Source): KRS 158.4416		Other	
5	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by	
6	Period of Award: July 1, 2023-June 30, 2024	ea	KDE Program Contacts.	
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	Yucau			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameFleming CountyStreet Address211 W Water StreetCity, State ZipFlemingsburg, KY 41041	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	9	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416		Other	
5 6	Award Amount: \$43,095.00 Opposite Period of Award: July 1, 2023-June 30, 2024 Commonweight	11 2a	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
12	Consortia/Partnership Members: N/A			
13 14	Special Instructions/Conditions: Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch		Date: July 11, 2023	
	Division of Budgets & Financial Management			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameFloyd CountyStreet Address442 KY RT 550City, State ZipEastern, KY 41622	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per	
6	Period of Award: July 1, 2023-June 30, 2024	ea	specific program guidelines to be disseminated by KDE Program Contacts.	
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:			
13	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	yuca			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameFort Thomas Ind.Street Address28 N Ft Thomas AvenueCity, State ZipFort Thomas, KY 41075	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment	
	Budget Contact – Phone # Nicole Crosthwaite Street Address City, KY Zip Prankfort, KY 40601	9	Lump Sum Receipt of Invoice from Vendor Reimbursement Frequency:	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A		Monthly Quarterly Other Beginning of Fiscal Year	
	MUNIS Project Number 14MK Master Agreement Number N/A	10	Financial Reporting Method:	
4	Grant Authority (Source): KRS 158.4416		Other	
5	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by	
6	Period of Award: July 1, 2023-June 30, 2024	ea	KDE Program Contacts.	
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	Yucau			

	Kentucky Department of E Award Notificatio		tion
1	Name and Address of Recipient:Agency NameFrankfort Ind.Street Address959 Leestown LaneCity, State ZipFrankfort, KY 40601	7 [1]	Fund Type: State Federal Other:
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per
6	Period of Award: July 1, 2023-June 30, 2024	ea	specific program guidelines to be disseminated by KDE Program Contacts.
12	Consortia/Partnership Members: N/A		
13 14	Special Instructions/Conditions: Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023
	Yuca		

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameFranklin CountyStreet Address190 Kings Daughters Drive #300City, State ZipFrankfort, KY 40601	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	City, KY Zip Frankfort, KY 40601 Description/Fund Source of Award and Fiscal Year: Description Description School Based Mental Health Care Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416		Other	
5	Award Amount: \$43,095.00	11 Pa	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameFulton CountyStreet Address2780 Moscow AvenueCity, State ZipHickman, KY 42050	7	Fund Type: State Federal Other:	
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416		Other	
5 6	Award Amount: \$43,095.00	11 Pa	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
12	July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	Yucau			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameFulton Ind.Street Address304 West State LineCity, State ZipFulton, KY 42041	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416		Other	
5 6	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
12	July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A			
12	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t X	Date: July 11, 2023	
	Yucau			

	Kentucky Department of E Award Notification		tion
1	Name and Address of Recipient:Agency NameGallatin CountyStreet Address600 E Main StreetCity, State ZipWarsaw, KY 41095	7 [1]	Fund Type: State Federal Other:
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per
6	Period of Award: July 1, 2023-June 30, 2024	ea	specific program guidelines to be disseminated by KDE Program Contacts.
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:		
13	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023
	Yuca		

	Kentucky Department of E Award Notificatio		tion	
1	Name and Address of Recipient:Agency NameGarrard CountyStreet Address322 West Maple AvenueCity, State ZipLancaster, KY 40444	7	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416		Other	
5 6	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
	July 1, 2023-June 30, 2024	Ja.		
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t.	Date: July 11, 2023	
	Yucau			

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameGlasgow Ind.Street Address711 S. L. Rogers Wells Blvd.City, State ZipGlasgow, KY 42142		Fund Type: State Federal Other:		
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City: IGV Zip Fumplifiert IGV 40604	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	City, KY ZipFrankfort, KY 40601Description/Fund Source of Award and Fiscal Year:DescriptionSchool Based Mental Health Care ProviderFund SourceState General FundsCFDA#N/AMUNIS Project Number14MK N/AMaster Agreement NumberN/A	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per		
6 12	Period of Award: July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A	ea	specific program guidelines to be disseminated by KDE Program Contacts.		
13	Special Instructions/Conditions:				
14	•				

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameGrant CountyStreet Address820 Arnie Risen BoulevardCity, State ZipWilliamstown, KY 41097	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416	-	Other	
5 6	Award Amount: \$43,095.00 Opposite Period of Award: Commonweight	11 ea	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
12	July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	ıt	Date: July 11, 2023	
	yucaue			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameGraves CountyStreet Address2290 State Rt 121 N.City, State ZipMayfield, KY 42066	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum	
3	Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601 Description/Fund Source of Award and Fiscal Year:	9	Receipt of Invoice from Vendor Reimbursement Frequency: Monthly	
	Description School Based Mental Health Care Fund Source State General Funds CFDA# N/A		Quarterly Other Beginning of Fiscal Year	
	MUNIS Project Number 14MK Master Agreement Number N/A	10	Financial Reporting Method:	
4	Grant Authority (Source): KRS 158.4416		Other	
5	Award Amount: \$43,095.00	11	Evaluations: <mark>Each program will be evaluated per</mark> specific program guidelines to be disseminated by	
6	Period of Award: July 1, 2023-June 30, 2024	ea	KDE Program Contacts.	
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	Yucau			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameGrayson CountyStreet Address790 Shaw Station RoadCity, State ZipLeitchfield, KY 42755	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	City, KY Zip Frankfort, KY 40601 Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Fund Source State General Funds CFDA# N/A	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year	
4	MUNIS Project Number 14MK Master Agreement Number N/A Grant Authority (Source): KRS 158.4416	10	Financial Reporting Method: Electronic Submission Other	
5	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by	
6	Period of Award: July 1, 2023-June 30, 2024	ea	KDE Program Contacts.	
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:			
13	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	Yucau			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameGreen CountyStreet Address402 East Hodgenville AveCity, State ZipGreensburg, KY 42743	7 []	Fund Type: State Federal Other:	
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416		Other	
5 6	Award Amount: \$43,095.00 Opposite Period of Award: July 1, 2023-June 30, 2024 Commonweak	11 2	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
12	Consortia/Partnership Members: N/A			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	YUCAU			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameGreenup CountyStreet Address45 Musketeer DriveCity, State ZipGreenup, KY 41144	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact Director for the part of	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment	
	Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	9	Lump Sum Receipt of Invoice from Vendor Reimbursement Frequency:	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A		 Monthly Quarterly Other <u>Beginning of Fiscal Year</u> 	
	MUNIS Project Number 14MK Master Agreement Number N/A	10	Financial Reporting Method:	
4	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per	
6	Period of Award: July 1, 2023-June 30, 2024	ea	specific program guidelines to be disseminated by KDE Program Contacts.	
12	Consortia/Partnership Members: N/A			
13 14	Special Instructions/Conditions: Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	Yucau			

	Kentucky Department of E Award Notification		tion
1	Name and Address of Recipient:Agency NameHancock CountyStreet Address83 State Route 3543City, State ZipHawesville, KY 42348	7 [1]	Fund Type: State Federal Other:
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission
4	Grant Authority (Source): KRS 158.4416		
5 6 12	Award Amount: \$43,095.00OppositePeriod of Award: July 1, 2023-June 30, 2024CompositeConsortia/Partnership Members: N/A	11 2a	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.
12	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameHardin CountyStreet Address65 W A Jenkins RoadCity, State ZipElizabethtown, KY 42701	7 []	Fund Type: State Federal Other:	
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416		Other	
5 6	Award Amount: \$43,095.00 Opposite Period of Award: July 1, 2023-June 30, 2024 Commonweak	11 Pa	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
12	Consortia/Partnership Members: N/A			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	Yuca			

	Kentucky Department of E Award Notificatio		tion
1	Name and Address of Recipient:Agency NameHarlan CountyStreet Address251 Ball Park RoadCity, State ZipHarlan, KY 40831	7 11	Fund Type: State Federal Other:
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission
4	Grant Authority (Source): KRS 158.4416		Other
5 6	Award Amount: \$43,095.00OppositePeriod of Award:Composite	11 2 2	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.
12	July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A		
12	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	t	Date: July 11, 2023
	Yuca		

	Kentucky Department of E Award Notificatio		tion
1	Name and Address of Recipient:Agency NameHarlan Ind.Street Address420 E Central StreetCity, State ZipHarlan, KY 40831	7 [1]	Fund Type: State Federal Other:
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission
4	Grant Authority (Source): KRS 158.4416		Other
5 6	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.
	July 1, 2023-June 30, 2024		
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:		
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	t X	Date: July 11, 2023
	Yuca		

	Kentucky Department of E Award Notificatio		tion	
1	Name and Address of Recipient:Agency NameHarrison CountyStreet Address308 Webster AvenueCity, State ZipCynthiana, KY 41031	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter	8	Method of Payment: Federal Cash Request Expenditure Reimbursement	
	Street Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	5	 Automatic Payment Lump Sum Receipt of Invoice from Vendor 	
3	Description/Fund Source of Award and Fiscal Year: Description	9	Reimbursement Frequency: Monthly Quarterly	
	Fund Source Provider CFDA# N/A		Other Beginning of Fiscal Year	
	MUNIS Project Number 14MK Master Agreement Number N/A	10	Financial Reporting Method: Image: Construction of the sector o	
4	Grant Authority (Source): KRS 158.4416		Other	
5	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by	
6	Period of Award: Common Weight July 1, 2023-June 30, 2024 Common Weight	ea	KDE Program Contacts.	
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	yucau			

	Kentucky Department of E Award Notificatio		tion
1	Name and Address of Recipient:Agency NameHart CountyStreet Address25 Quality StreetCity, State ZipMunfordville, KY 42765	7 [1]	Fund Type: State Federal Other:
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower Blvd	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor
3	Street Address Stob Sower Bivd City, KY Zip Frankfort, KY 40601 Description/Fund Source of Award and Fiscal Year: Description Description School Based Mental Health Care	9	Receipt of invoice from vendor Reimbursement Frequency: Monthly Quarterly
	Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK		Other Beginning of Fiscal Year
	Master Agreement Number N/A	10	Financial Reporting Method:
4	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per
6	Period of Award: July 1, 2023-June 30, 2024	ea	specific program guidelines to be disseminated by KDE Program Contacts.
12	Consortia/Partnership Members: N/A		
13	Special Instructions/Conditions:		Poter luk 11, 2022
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	it .	Date: July 11, 2023
	Yuca		

	Kentucky Department of E Award Notificatio		tion	
1	Name and Address of Recipient:Agency NameHazard Ind.Street Address705 Main StreetCity, State ZipHazard, KY 41701	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416		Other	
5 6	Award Amount: \$43,095.00 Opposite Period of Award: July 1, 2023-June 30, 2024 Commonweak	11 Pa	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
12	Consortia/Partnership Members: N/A			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameHenderson CountyStreet Address1805 Second StreetCity, State ZipHenderson, KY 42420	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Output Christina Weeter	8	Method of Payment: Federal Cash Request Expenditure Reimbursement	
	Street Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	5	 Automatic Payment Lump Sum Receipt of Invoice from Vendor 	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year	
	MUNIS Project Number 14MK Master Agreement Number N/A	10	Financial Reporting Method:	
4	Grant Authority (Source): KRS 158.4416		Other	
5 6	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
12	July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	yucau			

	Kentucky Department of E Award Notificatio		tion
1	Name and Address of Recipient:Agency NameHenry CountyStreet Address326 S Main StreetCity, State ZipNew Castle, KY 40050	7 [1]	Fund Type: State Federal Other:
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per
6	Period of Award: July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A	ea	specific program guidelines to be disseminated by KDE Program Contacts.
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023
	quca		

	Kentucky Department of E Award Notificatio		tion
1	Name and Address of Recipient:Agency NameHickman CountyStreet Address416 Waterfield Drive NorthCity, State ZipClinton, KY 42031	7 (1)	Fund Type: State Federal Other:
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission
4	Grant Authority (Source): KRS 158.4416		Other
5 6	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.
12	July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A		
12	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t X	Date: July 11, 2023
	Yuca		

	Kentucky Department of E Award Notificatio		tion	
1	Name and Address of Recipient:Agency NameHopkins CountyStreet Address320 S Seminary StreetCity, State ZipMadisonville, KY 42431	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416		Other	
5 6	Award Amount: \$43,095.00 Opposite Period of Award: July 1, 2023-June 30, 2024 Commonweak	11 ea	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
12	Consortia/Partnership Members: N/A			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	nt	Date: July 11, 2023	
	YUCav			

	Kentucky Department of E Award Notificatio		tion
1	Name and Address of Recipient:Agency NameJackson CountyStreet Address3331 Hwy 421 SouthCity, State ZipMcKee, KY 40447	7 [1]	Fund Type: State Federal Other:
2	KDE Contact Information:Program Consultant – Phone # Street AddressChristina Weeter 300 Sower BlvdBudget Contact – Phone # Street AddressNicole Crosthwaite 300 Sower BlvdStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year:DescriptionSchool Based Mental Health Care ProviderFund SourceState General FundsCFDA#N/AMUNIS Project Number14MKMaster Agreement NumberN/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission
4	Grant Authority (Source): KRS 158.4416		Other
5 6 12	Award Amount: \$43,095.00OppositePeriod of Award: July 1, 2023-June 30, 2024CompositeConsortia/Partnership Members: N/A	11 ea	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	nt .	Date: July 11, 2023
	Yuca		

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameJackson Ind.Street Address940 Highland AvenueCity, State ZipJackson, KY 41339	7 11	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone # Street AddressChristina Weeter 300 Sower BlvdBudget Contact – Phone # Street AddressNicole Crosthwaite 300 Sower BlvdStreet Address300 Sower Blvd Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4	Grant Authority (Source): KRS 158.4416		Other		
5 6	Award Amount: \$43,095.00Period of Award:	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.		
12	July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A				
13	Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	t	Date: July 11, 2023		
	Yucau				

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameJefferson CountyStreet Address3332 Newburg RoadCity, State ZipLouisville, KY 40218	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter	8	Method of Payment: Federal Cash Request Expenditure Reimbursement	
	Street Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	5	 Automatic Payment Lump Sum Receipt of Invoice from Vendor 	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care	9	Reimbursement Frequency: Monthly Quarterly	
	Fund Source Provider FUND Source State General Funds CFDA# N/A MUNIS Project Number 14MK	7	Other Beginning of Fiscal Year	
	Master Agreement Number N/A	10	Financial Reporting Method:	
4	Grant Authority (Source): KRS 158.4416		Other	
5	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by	
6	Period of Award: July 1, 2023-June 30, 2024	ea	KDE Program Contacts.	
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	Yucau			

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameJenkins Ind.Street Address9409 Hwy 805City, State ZipJenkins, KY 41537	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4	Grant Authority (Source): KRS 158.4416		Other		
5 6	Award Amount: \$43,095.00OppositePeriod of Award:Composite	11 2 2	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.		
12	July 1, 2023-June 30, 2024				
12	Consortia/Partnership Members: N/A Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	nt	Date: July 11, 2023		
	Yucau				

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameJessamine CountyStreet Address871 Wilmore RoadCity, State ZipNicholasville, KY 40356	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone # Street AddressChristina Weeter 300 Sower BlvdBudget Contact – Phone # Street AddressNicole Crosthwaite 300 Sower BlvdStreet Address300 Sower Blvd Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A Grant Authority (Source): KRS 158.4416	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission Other	
4 5	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by	
6 12	Period of Award: July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A	ea	KDE Program Contacts.	
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	Yucau			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameJohnson CountyStreet Address253 North Mayo TrailCity, State ZipPaintsville, KY 41240	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416	11	Other Evaluations: Each program will be evaluated per	
6 12	Period of Award: July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A	ea	specific program guidelines to be disseminated by KDE Program Contacts.	
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	t	Date: July 11, 2023	
	ucau			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameKenton CountyStreet Address1055 Eaton DriveCity, State ZipFort Wright, KY 41017	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone # Street AddressChristina Weeter 300 Sower BlvdBudget Contact – Phone # Street AddressNicole Crosthwaite 300 Sower BlvdStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4 5	Grant Authority (Source): KRS 158.4416	11	Other Evaluations: Each program will be evaluated per	
6	Period of Award: July 1, 2023-June 30, 2024	ea	specific program guidelines to be disseminated by KDE Program Contacts.	
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	Yucau			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameKnott CountyStreet Address1156 Hindman BypassCity, State ZipHindman, KY 41822	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416		Other	
5 6	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
12	July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A	7a .		
12	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	t	Date: July 11, 2023	
	Yucau			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameKnox CountyStreet Address200 Daniel Boone DriveCity, State ZipBarbourville, KY 40906	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole Crosthwaite	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum	
3	Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601 Description/Fund Source of Award and Fiscal Year: Description	9	Receipt of Invoice from Vendor Reimbursement Frequency: Monthly	
	DescriptionSchool Based Mental Health Care ProviderFund SourceState General FundsCFDA#N/AMUNIS Project Number14MK		Quarterly Other Beginning of Fiscal Year	
	Master Agreement Number N/A	10	Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416			
5 6	Award Amount: \$43,095.00OppositePeriod of Award:Composite	11 2 2	Evaluations: <mark>Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.</mark>	
12	July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A			
13 14	Special Instructions/Conditions: Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch		Date: July 11, 2023	
14	Division of Budgets & Financial Managemen	t	Date. July 11, 2023	
	Yucaus			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameLaRue CountyStreet Address208 College StreetCity, State ZipHodgenville, KY 42748	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per	
6	Period of Award: July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A	ea	specific program guidelines to be disseminated by KDE Program Contacts.	
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	Yucau			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameLaurel CountyStreet Address718 North Main StreetCity, State ZipLondon, KY 40741	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone # Street AddressChristina Weeter 300 Sower BlvdBudget Contact – Phone # Street AddressNicole Crosthwaite 300 Sower BlvdStreet Address300 Sower Blvd Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Sech program will be evaluated per	
5 6 12	Award Anlount: \$43,095.00 Period of Award: July 1, 2023-June 30, 2024 Commonwer Consortia/Partnership Members: N/A	ea	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	t	Date: July 11, 2023	
	Yucaus			

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameLawrence CountyStreet Address500 Bulldog LaneCity, State ZipLouisa, KY 41230	7	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4	Grant Authority (Source): KRS 158.4416		Other		
5 6	Award Amount: \$43,095.00OurPeriod of Award:Commonweak	11 ea	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.		
12	July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A				
13	Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023		
	Yucau				

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameLee CountyStreet Address242 Lee AvenueCity, State ZipBeattyville, KY 41311	7 []	Fund Type: State Federal Other:	
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416		Other	
5 6	Award Amount: \$43,095.00 Omega Period of Award: July 1, 2023-June 30, 2024 Commonweight	11 Pa	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
12	Consortia/Partnership Members: N/A			
13	Special Instructions/Conditions:		Pater July 11, 2022	
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	Yucau			

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameLeslie CountyStreet Address108 Maple StreetCity, State ZipHyden, KY 41749	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4	Grant Authority (Source): KRS 158.4416				
5 6 12	Award Amount: \$43,095.00OppositePeriod of Award: July 1, 2023-June 30, 2024CommonweilConsortia/Partnership Members: N/A	11 ea	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.		
13 14	Special Instructions/Conditions:		Date: July 11, 2023		
14	14 Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Management Date: July 11, 2023				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameLetcher CountyStreet Address224 Park StreetCity, State ZipWhitesburg, KY 41858	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per		
6 12	Period of Award: July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A	ea	specific program guidelines to be disseminated by KDE Program Contacts.		
13	Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	t	Date: July 11, 2023		
	qucau				

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameLewis CountyStreet Address65 Central ElementaryCity, State ZipVanceburg, KY 41179	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416		Other	
5 6	Award Amount: \$43,095.00 Opposite Period of Award: July 1, 2023-June 30, 2024 Commonweight	11 2	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
12	Consortia/Partnership Members: N/A			
13 14	Special Instructions/Conditions: Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch		Date: July 11, 2023	
	Division of Budgets & Financial Management			

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameLincoln CountyStreet Address305 Danville AvenueCity, State ZipStanford, KY 40484	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per		
6	Period of Award: July 1, 2023-June 30, 2024	ea	specific program guidelines to be disseminated by KDE Program Contacts.		
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:				
13 14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023		
	Yuca				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameLivingston CountyStreet Address127 E Adair StreetCity, State ZipSmithland, KY 42081	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	City, KY ZipFrankfort, KY 40601Description/Fund Source of Award and Fiscal Year:DescriptionSchool Based Mental Health Care ProviderFund SourceState General Funds N/A	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year		
4	MUNIS Project Number 14MK Master Agreement Number N/A Grant Authority (Source): KRS 158.4416	10	Financial Reporting Method: Electronic Submission Other		
5	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by		
6	Period of Award: July 1, 2023-June 30, 2024	ea	KDE Program Contacts.		
12 13	Consortia/Partnership Members: N/A				
13	Special Instructions/Conditions: Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023		
	yucau				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameLogan CountyStreet Address2222 Bowling Green RoadCity, State ZipRussellville, KY 42276	7 []	Fund Type: State Federal Other:		
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4	Grant Authority (Source): KRS 158.4416	11	Other Evaluations: Each program will be evaluated per		
6	Period of Award: July 1, 2023-June 30, 2024	ea	specific program guidelines to be disseminated by KDE Program Contacts.		
12	Consortia/Partnership Members: N/A				
13 14	Special Instructions/Conditions:		Date: July 11, 2023		
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023		
	Yucau				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameLudlow Ind.Street Address525 Elm StreetCity, State ZipLudlow, KY 41016	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4	Grant Authority (Source): KRS 158.4416	11	Other Evaluations: Each program will be evaluated per		
6	Period of Award: July 1, 2023-June 30, 2024	ea	specific program guidelines to be disseminated by KDE Program Contacts.		
12	Consortia/Partnership Members: N/A				
13 14	Special Instructions/Conditions: Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023		
	Yuca				

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameLyon CountyStreet Address217 Jenkins RoadCity, State ZipEddyville, KY 42038	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter	8	Method of Payment: Federal Cash Request Expenditure Reimbursement	
	Street Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	5	 Automatic Payment Lump Sum Receipt of Invoice from Vendor 	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care	9	Reimbursement Frequency: Monthly Quarterly	
	Fund Source Provider FUND Source State General Funds CFDA# N/A MUNIS Project Number 14MK		Other Beginning of Fiscal Year	
	Master Agreement Number N/A	10	Financial Reporting Method:	
4	Grant Authority (Source): KRS 158.4416		Other	
5	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by	
6	Period of Award: July 1, 2023-June 30, 2024Commonwer	ea	KDE Program Contacts.	
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	t	Date: July 11, 2023	
	Yucau			

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameMadison CountyStreet Address301 Highland Park DriveCity, State ZipRichmond, KY 40476	7 (1)	Fund Type: State Federal Other:		
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4	Grant Authority (Source): KRS 158.4416		Other		
5 6	Award Amount: \$43,095.00Period of Award:	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.		
12	July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A				
12	Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	t	Date: July 11, 2023		
	Yucau				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameMagoffin CountyStreet Address109 Gardner TrailCity, State ZipSalyersville, KY 41465	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A Grant Authority (Source): KRS 158.4416	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission Other		
4 5	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by		
6 12	Period of Award: July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A	ea	KDE Program Contacts.		
13	Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t .	Date: July 11, 2023		

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameMarion CountyStreet Address755 E Main StreetCity, State ZipLebanon, KY 40033	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone # Street AddressChristina Weeter 300 Sower Blvd	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment		
	Budget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	9	Lump Sum Receipt of Invoice from Vendor Reimbursement Frequency:		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A		 Monthly Quarterly Other Beginning of Fiscal Year 		
	MUNIS Project Number 14MK Master Agreement Number N/A	10	Financial Reporting Method:		
4	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Other Evaluations: Each program will be evaluated per		
6	Award Allount: \$43,033.00 Period of Award: Commonwer July 1, 2023-June 30, 2024 Commonwer	ea	specific program guidelines to be disseminated by KDE Program Contacts.		
12	Consortia/Partnership Members: N/A				
13	Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023		
	yucau				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameMarshall CountyStreet Address86 High School RoadCity, State ZipBenton, KY 42025	7 11	Fund Type: State Federal Other:		
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4	Grant Authority (Source): KRS 158.4416		Other		
5 6	Award Amount: \$43,095.00OurPeriod of Award:Commonweak	11 Ba	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.		
12	July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A				
12	Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	t	Date: July 11, 2023		
	Yucau				

	Kentucky Department of I Award Notificatio		tion
1	Name and Address of Recipient:Agency NameMartin CountyStreet Address104 East Main StreetCity, State ZipInez, KY 41224	7	Fund Type: State Federal Other:
2	KDE Contact Information:Program Consultant – Phone # Street AddressChristina Weeter 300 Sower BlvdBudget Contact – Phone # Street AddressNicole Crosthwaite 	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9 10	Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission
4	Grant Authority (Source): KRS 158.4416		Other
5 6 12	Award Amount: \$43,095.00	11 ea	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:		
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	nt	Date: July 11, 2023
	Yuca		

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameMason CountyStreet Address34 East 2nd StreetCity, State ZipMaysville, KY 41056	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per		
6	Period of Award: July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A	ea	specific program guidelines to be disseminated by KDE Program Contacts.		
12	Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023		
	yuca				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameMayfield Ind.Street Address914 E College StretCity, State ZipMayfield, KY 42066	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone # Street AddressChristina Weeter 300 Sower BlvdBudget Contact – Phone # Street AddressNicole Crosthwaite 300 Sower BlvdStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by		
6 12	Period of Award: July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A	ea	KDE Program Contacts.		
12	Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023		
	quca				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameMcCracken CountyStreet Address5347 Benton RoadCity, State ZipPaducah, KY 42003	7	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone # Street AddressChristina WeeterBudget Contact – Phone # Street AddressNicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601		 Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor 		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per		
6 12	Period of Award: Common July 1, 2023-June 30, 2024 Common Consortia/Partnership Members: N/A N/A	ea	specific program guidelines to be disseminated by KDE Program Contacts.		
13	Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023		

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameMcCreary CountyStreet Address120 Raider WayCity, State ZipStearns, KY 42647	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	City, KY ZipFrankfort, KY 40601Description/Fund Source of Award and Fiscal Year:DescriptionSchool Based Mental Health Care ProviderFund SourceState General Funds N/A	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year		
4	MUNIS Project Number 14MK Master Agreement Number N/A Grant Authority (Source): KRS 158.4416	10	Financial Reporting Method: Electronic Submission Other		
5	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by		
6	Period of Award: July 1, 2023-June 30, 2024	ea	KDE Program Contacts.		
12 13	Consortia/Partnership Members: N/A				
13 14	Special Instructions/Conditions: Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023		
	Yucau				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameMcLean CountyStreet Address410 Highway 136 EastCity, State ZipCalhoun, KY 42327	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4	Grant Authority (Source): KRS 158.4416		Other		
5 6	Award Amount: \$43,095.00 Opposite Period of Award: July 1, 2023-June 30, 2024 Commonweak	11 ea	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.		
12	Consortia/Partnership Members: N/A	I			
13	Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	it	Date: July 11, 2023		
	yuca				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameMeade CountyStreet Address1155 Old Ekron RoadCity, State ZipBrandenburg, KY 40108	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4	Grant Authority (Source): KRS 158.4416	11	Other Evaluations: Each program will be evaluated per		
6	Period of Award: July 1, 2023-June 30, 2024	ea	specific program guidelines to be disseminated by KDE Program Contacts.		
12	Consortia/Partnership Members: N/A				
13 14	Special Instructions/Conditions: Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen		Date: July 11, 2023		

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameMenifee CountyStreet Address202 Back StreetCity, State ZipFrenchburg, KY 40322	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	City, KY Zip Frankfort, KY 40601 Description/Fund Source of Award and Fiscal Year: Description Description School Based Mental Health Care Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4 5	Grant Authority (Source): KRS 158.4416	11	Other Evaluations: Each program will be evaluated per		
6	Period of Award: July 1, 2023-June 30, 2024	ea	specific program guidelines to be disseminated by KDE Program Contacts.		
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:				
13	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023		
	yuca				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameMercer CountyStreet Address530 Perryville RoadCity, State ZipHarrodsburg, KY 40330	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per		
6 12	Period of Award: July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A	ea	specific program guidelines to be disseminated by KDE Program Contacts.		
13	Special Instructions/Conditions:				
14					

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameMetcalfe CountyStreet Address709 West Stockton StreetCity, State ZipEdmonton, KY 42129	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4	Grant Authority (Source): KRS 158.4416	44	Other		
5 6 12	Award Amount: \$43,095.00OppositePeriod of Award: July 1, 2023-June 30, 2024CompositeConsortia/Partnership Members: N/A	11 9a	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.		
13	Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	t	Date: July 11, 2023		
	quca				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameMiddlesboro Ind.Street Address220 N 20th StreetCity, State ZipMiddlesboro, KY 40965	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	City, KY Zip Frankfort, KY 40601 Description/Fund Source of Award and Fiscal Year: Description Description School Based Mental Health Care Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4	Grant Authority (Source): KRS 158.4416		Other		
5 6	Award Amount: \$43,095.00 Opposite Period of Award: Composite	11 ea	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.		
12	July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A				
13	Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023		
	yucaue				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameModel Laboratory SchoolStreet Address521 Lancaster AveCity, State ZipRichmond, KY 40475	7	Fund Type: State Federal Other: Method of Payment:		
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	9	 Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor 		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4	Grant Authority (Source): KRS 158.4416				
5 6 12	Award Amount: \$43,095.00OppositePeriod of Award: July 1, 2023-June 30, 2024CompositeConsortia/Partnership Members: N/A	11 Ca	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.		
12	Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	ıt	Date: July 11, 2023		
	Yucaue				

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameMonroe CountyStreet Address309 Emberton StreetCity, State ZipTompkinsville, KY 42167	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone # Street AddressChristina Weeter 300 Sower BlvdBudget Contact – Phone # Street AddressNicole Crosthwaite 300 Sower BlvdStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year:DescriptionSchool Based Mental Health Care ProviderFund SourceState General FundsCFDA#N/AMUNIS Project Number14MKMaster Agreement NumberN/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per	
6 12	Period of Award: July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A	e a .	specific program guidelines to be disseminated by KDE Program Contacts.	
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	t	Date: July 11, 2023	
	ucau			

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameMontgomery CountyStreet Address700 Woodford DriveCity, State ZipMt Sterling, KY 40353	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Street Address 300 Sower Bivd City, KY Zip Frankfort, KY 40601 Description/Fund Source of Award and Fiscal Year: Description Description School Based Mental Health Care	9	Receipt of Invoice from Vendor Reimbursement Frequency: Monthly Quarterly		
	Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK		☐ Quarterry ☐ Other <u>Beginning of Fiscal Year</u>		
	Master Agreement Number N/A	10	Financial Reporting Method:		
4	Grant Authority (Source): KRS 158.4416		Other		
5 6	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.		
12	July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A				
13	Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	t	Date: July 11, 2023		
	Yucau				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameMorgan CountyStreet Address155 University DriveCity, State ZipWest Liberty, KY 41472	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4	Grant Authority (Source): KRS 158.4416		Other		
5	Award Amount: \$43,095.00	11 Pa	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.		
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:				
14	•				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameMuhlenberg CountyStreet Address510 W Main StreetCity, State ZipPowderly, KY 42367	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	City, KY Zip Frankfort, KY 40601 Description/Fund Source of Award and Fiscal Year: Description Description School Based Mental Health Care	9	Reimbursement Frequency: Monthly Quarterly		
	Fund SourceProviderFund SourceState General FundsCFDA#N/AMUNIS Project Number14MKMaster Agreement NumberN/A	10	Other Beginning of Fiscal Year		
4	Grant Authority (Source): KRS 158.4416		Electronic Submission		
5 6	Award Amount: \$43,095.00Period of Award:	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.		
12	July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A				
13 14	Special Instructions/Conditions: Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	it .	Date: July 11, 2023		
	Yucau				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameMurray Ind.Street Address208 S 13th StreetCity, State ZipMurray, KY 42071	7 11	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4	Grant Authority (Source): KRS 158.4416		Other		
5 6	Award Amount: \$43,095.00 Omega Period of Award: July 1, 2023-June 30, 2024 Commonweak	11 Pa	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.		
12	Consortia/Partnership Members: N/A				
13	Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	t	Date: July 11, 2023		
	Yucau				

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameNelson CountyStreet Address288 Wildcat LaneCity, State ZipBardstown, KY 40004	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year:DescriptionSchool Based Mental Health Care ProviderFund SourceState General FundsCFDA#N/AMUNIS Project Number14MKMaster Agreement NumberN/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per	
6 12	Period of Award: July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A	ea	specific program guidelines to be disseminated by KDE Program Contacts.	
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	t	Date: July 11, 2023	
	Gucau			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameNewport Ind.Street Address30 W. 8th StreetCity, State ZipNewport, KY 41071	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment	
	Budget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	9	Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A	9	Monthly Quarterly Other Beginning of Fiscal Year	
	MUNIS Project Number 14MK Master Agreement Number N/A	10	Financial Reporting Method:	
4	Grant Authority (Source): KRS 158.4416		Other	
5	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by	
6	Period of Award: July 1, 2023-June 30, 2024	ea	KDE Program Contacts.	
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	Yucau			

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameNicholas CountyStreet Address395 West Main StreetCity, State ZipCarlisle, KY 40311	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4	Grant Authority (Source): KRS 158.4416		Other		
5 6	Award Amount: \$43,095.00 Opposite Period of Award: July 1, 2023-June 30, 2024 Commonweak	11 ea	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.		
12	Consortia/Partnership Members: N/A	•			
13	Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023		
	yucau				

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameOhio CountyStreet Address315 E Union StreetCity, State ZipHartford, KY 42347	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone # Street AddressChristina Weeter 300 Sower BlvdBudget Contact – Phone # Street AddressNicole Crosthwaite 300 Sower BlvdStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per	
6	Period of Award: July 1, 2023-June 30, 2024	ea	specific program guidelines to be disseminated by KDE Program Contacts.	
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:			
13	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	Yuca			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameOldham CountyStreet Address1350 N Hwy 393City, State ZipCrestwood, KY 40014	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Fumplifiert, KY 40604	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	City, KY Zip Frankfort, KY 40601 Description/Fund Source of Award and Fiscal Year: Description Description School Based Mental Health Care Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416		Other	
5 6	Award Amount: \$43,095.00 Opposite Period of Award: Commonwerk July 1, 2023-June 30, 2024 Commonwerk	11 2 2	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
12	Consortia/Partnership Members: N/A			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	Yucaus			

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameOwen CountyStreet Address1600 Hwy 22 ECity, State ZipOwenton, KY 40359	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per		
6	Period of Award: July 1, 2023-June 30, 2024	ea	specific program guidelines to be disseminated by KDE Program Contacts.		
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:				
13	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023		
	yucaue				

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameOwensboro Ind.Street Address450 Griffith AvenueCity, State ZipOwensboro, KY 42301	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:	8	Method of Payment: Federal Cash Request	
	Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	5	 Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor 	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care	9	Reimbursement Frequency: Monthly Quarterly	
	Fund Source Provider FUND Source State General Funds CFDA# N/A MUNIS Project Number 14MK	7	Other Beginning of Fiscal Year	
	Master Agreement Number N/A	10	Financial Reporting Method:	
4	Grant Authority (Source): KRS 158.4416		Other	
5	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by	
6	Period of Award: Common Weight July 1, 2023-June 30, 2024 Common Weight	ea	KDE Program Contacts.	
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	Yucau			

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameOwsley CountyStreet Address14 Old KY 11City, State ZipBooneville, KY 41314	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone # Street AddressChristina Weeter 300 Sower BlvdBudget Contact – Phone # Street AddressNicole Crosthwaite 300 Sower BlvdStreet Address300 Sower Blvd Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per		
6 12	Period of Award: July 1, 2023-June 30, 2024	ea.	specific program guidelines to be disseminated by KDE Program Contacts.		
12	Consortia/Partnership Members: N/A Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023		
	yuca				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NamePaducah Ind.Street Address500 South 25th StreetCity, State ZipPaducah, KY 42003	7 11	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4	Grant Authority (Source): KRS 158.4416		Other		
5 6	Award Amount: \$43,095.00 Opposite Period of Award: July 1, 2023-June 30, 2024 Commonweak	11 ea	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.		
12	Consortia/Partnership Members: N/A				
13	Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	t	Date: July 11, 2023		
	yucau				

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NamePaintsville Ind.Street Address305 2nd StreetCity, State ZipPaintsville, KY 41240	7 []	Fund Type: State Federal Other:	
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum	
3	Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601 Description/Fund Source of Award and Fiscal Year:	9	Receipt of Invoice from Vendor Reimbursement Frequency: Monthly	
	DescriptionSchool Based Mental Health Care ProviderFund SourceState General FundsCFDA#N/AMUNIS Project Number14MK		Quarterly Other Beginning of Fiscal Year	
4	Master Agreement Number N/A Grant Authority (Source): KRS 158.4416	10	Financial Reporting Method: Electronic Submission Other	
5	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by	
6	Period of Award: July 1, 2023-June 30, 2024	ea	KDE Program Contacts.	
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:			
13	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	Yucau			

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameParis Ind.Street Address310 W Seventh StreetCity, State ZipParis, KY 40361	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per		
6	Period of Award: July 1, 2023-June 30, 2024	ea	specific program guidelines to be disseminated by KDE Program Contacts.		
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	t	Date: July 11, 2023		
	Yucau				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NamePendleton CountyStreet Address2525 Hwy 27 NCity, State ZipFalmouth, KY 41040	7	Fund Type: State Federal Other:		
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4	Grant Authority (Source): KRS 158.4416		Other		
5 6	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.		
12	July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A				
12	Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023		
	Yucau				

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NamePerry CountyStreet Address315 Park AvenueCity, State ZipHazard, KY 41701	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416		Other	
5 6 12	Award Amount: \$43,095.00	11 Pa	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
12	Consortia/Partnership Members: N/A Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NamePike CountyStreet Address316 South Mayo TrailCity, State ZipPikeville, KY 41501	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	City, KY Zip Frankfort, KY 40601 Description/Fund Source of Award and Fiscal Year: Description Description School Based Mental Health Care	9	Reimbursement Frequency: Monthly Quarterly		
	Fund SourceProviderFund SourceState General FundsCFDA#N/AMUNIS Project Number14MKMaster Agreement NumberN/A	10	Other Beginning of Fiscal Year		
4	Grant Authority (Source): KRS 158.4416		Electronic Submission		
5	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by		
6	Period of Award: July 1, 2023-June 30, 2024	ea	KDE Program Contacts.		
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	t	Date: July 11, 2023		
	Yucau				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NamePikeville Ind.Street Address148 Second StreetCity, State ZipPikeville, KY 41501	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4 5	Grant Authority (Source): KRS 158.4416	11	Other Evaluations: Each program will be evaluated per		
6	Period of Award: July 1, 2023-June 30, 2024	ea.	specific program guidelines to be disseminated by KDE Program Contacts.		
12 13	Consortia/Partnership Members: N/A				
13 14	Special Instructions/Conditions: Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	t	Date: July 11, 2023		
	Yucau				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NamePineville Ind.Street Address401 Virginia AvenueCity, State ZipPineville, KY 40977	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4	Grant Authority (Source): KRS 158.4416		Other		
5 6	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.		
12	July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A				
12	Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	t.	Date: July 11, 2023		
	Yucau				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NamePowell CountyStreet Address691 Breckinridge StreetCity, State ZipStanton, KY 40380	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4	Grant Authority (Source): KRS 158.4416		Other		
5 6	Award Amount: \$43,095.00 Period of Award: Commonweak July 1, 2023-June 30, 2024 Commonweak	11 ea	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.		
12	Consortia/Partnership Members: N/A				
13	Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023		
	yucau				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NamePulaski CountyStreet Address925 N. Main StreetCity, State ZipSomerset, KY 42503	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4	Grant Authority (Source): KRS 158.4416		Other		
5 6	Award Amount: \$43,095.00 Opposite Period of Award: July 1, 2023-June 30, 2024 Commonweight	11 Pa	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.		
12	Consortia/Partnership Members: N/A				
13 14	Special Instructions/Conditions: Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023		
	ucau				

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameRaceland Ind.Street Address600 Ram BlvdCity, State ZipRaceland, KY 41169	7 [1]	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per		
6	Period of Award: July 1, 2023-June 30, 2024	ea	specific program guidelines to be disseminated by KDE Program Contacts.		
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:				
13	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023		
	Yucau				

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameRobertson CountyStreet Address1762 Sardis RoadCity, State ZipMount Olivet, KY 41064	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per	
6 12	Period of Award: July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A	ea	specific program guidelines to be disseminated by KDE Program Contacts.	
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	Yucau			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameRockcastle CountyStreet Address245 Richmond StreetCity, State ZipMount Vernon, KY 40456	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter	8	Method of Payment: Federal Cash Request Expenditure Reimbursement	
	Street Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	5	 Automatic Payment Lump Sum Receipt of Invoice from Vendor 	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider	9	Reimbursement Frequency: Monthly Quarterly	
	Fund SourceState General FundsCFDA#N/AMUNIS Project Number14MK		Other Beginning of Fiscal Year	
4	Master Agreement Number N/A Grant Authority (Source): KRS 158.4416	10	Financial Reporting Method: Electronic Submission Other	
5	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by	
6 12	Period of Award: July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A		KDE Program Contacts.	
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	Yucau			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameRowan CountyStreet Address551 Viking DriveCity, State ZipMorehead, KY 40351	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower Blvd	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	City, KY Zip Frankfort, KY 40601 Description/Fund Source of Award and Fiscal Year: Description Description School Based Mental Health Care Provider State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method:	
4	Grant Authority (Source): KRS 158.4416		 Electronic Submission Other 	
5 6	Award Amount: \$43,095.00	11	Evaluations: <mark>Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.</mark>	
12	July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	Yucau			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameRussell CountyStreet Address404 South Main StreetCity, State ZipJamestown, KY 42629	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per	
6 12	Award Anlount: \$43,095.00 Period of Award: Commonweak July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A	ea	specific program guidelines to be disseminated by KDE Program Contacts.	
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	nt	Date: July 11, 2023	

	Kentucky Department of E Award Notification		tion
1	Name and Address of Recipient:Agency NameRussell Ind.Street Address908 Powell LaneCity, State ZipFlatwoods, KY 41139	7 [1]	Fund Type: State Federal Other:
2	KDE Contact Information:Program Consultant – Phone # Street AddressChristina Weeter 300 Sower BlvdBudget Contact – Phone # Street AddressNicole Crosthwaite 300 Sower BlvdStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per
6 12	Period of Award: July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A	2 a .	specific program guidelines to be disseminated by KDE Program Contacts.
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023
	yuca		

	Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameRussellville Ind.Street Address355 South Summer StreetCity, State ZipRussellville, KY 42276	7	Fund Type: State Federal Other:		
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601		Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor		
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission		
4	Grant Authority (Source): KRS 158.4416		Other		
5 6	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.		
	July 1, 2023-June 30, 2024	Ta.			
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:				
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023		
	Yucau				

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameScience Hill Ind.Street Address6007 N Hwy 27City, State ZipScience Hill, KY 42553	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416		Other	
5 6	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
12	July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A			
12	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	Yuca			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameScott CountyStreet Address2168 Frankfort Pk.City, State ZipGeorgetown, KY 40324	7 []	Fund Type: State Federal Other:	
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	City, KY Zip Frankfort, KY 40601 Description/Fund Source of Award and Fiscal Year: Description	9	Reimbursement Frequency: Monthly Quarterly	
	Description School based Mental Health Care Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK		Quarterry Other Beginning of Fiscal Year	
	Master Agreement Number N/A	10	Financial Reporting Method:	
4	Grant Authority (Source): KRS 158.4416		Other	
5	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by	
6	Period of Award: July 1, 2023-June 30, 2024	ea	KDE Program Contacts.	
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:			
13	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	ıt	Date: July 11, 2023	
	Yucau			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameShelby CountyStreet Address1155 W Main StreetCity, State ZipShelbyville, KY 40065	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416		Other	
5 6	Award Amount: \$43,095.00 Opposite Period of Award: July 1, 2023-June 30, 2024 Commonweak	11 2 <i>a</i>	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
12	Consortia/Partnership Members: N/A			
13 14	Special Instructions/Conditions: Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	Yucau			

	Kentucky Department of E Award Notificatio		tion
1	Name and Address of Recipient:Agency NameSimpson CountyStreet Address430 S College StreetCity, State ZipFranklin, KY 42135	7 [1]	Fund Type: State Federal Other:
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per
6	Period of Award: July 1, 2023-June 30, 2024	ea	specific program guidelines to be disseminated by KDE Program Contacts.
12	Consortia/Partnership Members: N/A		
13 14	Special Instructions/Conditions: Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023
	Yuca		

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameSomerset Ind.Street Address305 College StreetCity, State ZipSomerset, KY 42501	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per	
6 12	Period of Award: July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A	ea	specific program guidelines to be disseminated by KDE Program Contacts.	
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	t	Date: July 11, 2023	

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameSouthgate Ind.Street Address6 William F. Blatt AvenueCity, State ZipSouthgate, KY 41071	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416		Other	
5 6	Award Amount: \$43,095.00 Period of Award: Commonweak July 1, 2023-June 30, 2024 Commonweak	11 Pa	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
12	Consortia/Partnership Members: N/A			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	+	Date: July 11, 2023	

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameSpencer CountyStreet Address110 Reasor AveCity, State ZipTaylorsville, KY 40071	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone # Street AddressChristina Weeter 300 Sower BlvdBudget Contact – Phone # Street AddressNicole Crosthwaite 300 Sower BlvdStreet Address300 Sower Blvd Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416		Other	
5 6 12	Award Amount: \$43,095.00OppositePeriod of Award: July 1, 2023-June 30, 2024CompositeConsortia/Partnership Members: N/A	11 2 a	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
13	Special Instructions/Conditions:			
14	14 Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Management Date: July 11, 2023			
		pr*		

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameTaylor CountyStreet Address1209 E BroadwayCity, State ZipCampbellsville, KY 42718	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4 5	Grant Authority (Source): KRS 158.4416	11	Other Evaluations: Each program will be evaluated per	
6	Period of Award: July 1, 2023-June 30, 2024	ea	specific program guidelines to be disseminated by KDE Program Contacts.	
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	Yuca			

	Kentucky Department of E Award Notification		tion
1	Name and Address of Recipient:Agency NameTodd CountyStreet Address205 Airport RoadCity, State ZipElkton, KY 42220	7 [1]	Fund Type: State Federal Other:
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per
6	Period of Award: July 1, 2023-June 30, 2024	ea	specific program guidelines to be disseminated by KDE Program Contacts.
12	Consortia/Partnership Members: N/A		
13 14	Special Instructions/Conditions: Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023
	Yuca		

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameTrigg CountyStreet Address202 Main StreetCity, State ZipCadiz, KY 42211	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416		Other	
5 6	Award Amount: \$43,095.00 Omega Period of Award: July 1, 2023-June 30, 2024 Commonweight	11 ea	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
12	Consortia/Partnership Members: N/A			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	ıt	Date: July 11, 2023	
	yuca			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameTrimble CountyStreet Address116 Wentworth AvenueCity, State ZipBedford, KY 40006	7 11	Fund Type: State Federal Other:	
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416		Other	
5 6	Award Amount: \$43,095.00OppositePeriod of Award:Composite	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
12	July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	t	Date: July 11, 2023	
	yuca			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameUnion CountyStreet Address4500 US Highway-60 WCity, State ZipMorganfield, KY 42437	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower Blvd	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	City, KY ZipFrankfort, KY 40601Description/Fund Source of Award and Fiscal Year:DescriptionSchool Based Mental Health Care ProviderFund SourceState General Funds	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year	
4	CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A Grant Authority (Source): KRS 158.4416	10	Financial Reporting Method: Electronic Submission Other	
5	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per	
6 12	Period of Award: July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A	ea	specific program guidelines to be disseminated by KDE Program Contacts.	
12	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	nt	Date: July 11, 2023	
	Yuca			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameWalton Verona Ind.Street Address16 School RoadCity, State ZipWalton, KY 41094	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone # Street AddressChristina Weeter 300 Sower BlvdBudget Contact – Phone # Street AddressNicole Crosthwaite 300 Sower BlvdStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per	
6 12	Period of Award: July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A	ea	specific program guidelines to be disseminated by KDE Program Contacts.	
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	t	Date: July 11, 2023	
	Gucaus			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameWarren CountyStreet Address303 Lovers LaneCity, State ZipBowling Green, KY 42102	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Image: Semicirit Frequency. Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per	
6	Period of Award: July 1, 2023-June 30, 2024	ea	specific program guidelines to be disseminated by KDE Program Contacts.	
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	Yucau			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameWashington CountyStreet Address120 Mackville Hill RoadCity, State ZipSpringfield, KY 40069	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum	
3	Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601 Description/Fund Source of Award and Fiscal Year:	9	Receipt of Invoice from Vendor Reimbursement Frequency: Monthly	
	DescriptionSchool Based Mental Health Care ProviderFund SourceState General FundsCFDA#N/AMUNIS Project Number14MK		Quarterly Other Beginning of Fiscal Year	
4	Master Agreement Number N/A Grant Authority (Source): KRS 158.4416	10	Financial Reporting Method: Image: Constraint of the state of the stat	
5	Award Amount: \$43,095.00	11	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by	
6 12	Period of Award: July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A		KDE Program Contacts.	
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	it	Date: July 11, 2023	
	Yucau			

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameWayne CountyStreet Address150 Cardinal WayCity, State ZipMonticello, KY 42633	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd Other Model Time	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	City, KY Zip Frankfort, KY 40601 Description/Fund Source of Award and Fiscal Year: Description Description School Based Mental Health Care Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416		Other	
5 6	Award Amount: \$43,095.00 Opposite Period of Award: Commonweak July 1, 2023-June 30, 2024 Commonweak	11 Pa	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
12	Consortia/Partnership Members: N/A			
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	YUCAU			

	Kentucky Department of E Award Notificatio		tion
1	Name and Address of Recipient:Agency NameWebster CoStreet Address28 State Route 1340City, State ZipDixon, KY 42409	7 11	Fund Type: State Federal Other:
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission
4	Grant Authority (Source): KRS 158.4416		Other
5 6	Award Amount: \$43,095.00OurPeriod of Award:Commonweak	11 Ba	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.
12	July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A		
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	t	Date: July 11, 2023
	yuca		

	Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameWhitley CountyStreet Address300 Main StreetCity, State ZipWilliamsburg, KY 40769	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	10	Image: Semicir Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per	
6 12	Period of Award: July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A	ea	specific program guidelines to be disseminated by KDE Program Contacts.	
13	Special Instructions/Conditions:			
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023	
	quca			

Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameWilliamsburg Ind.Street Address1000 Main StreetCity, State ZipWilliamsburg, KY 40769	7 [1]	Fund Type: State Federal Other:
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per
6 12	Period of Award: July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A	ea	specific program guidelines to be disseminated by KDE Program Contacts.
12	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023
	a u c a		

Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameWilliamstown Ind.Street Address300 Helton StreetCity, State ZipWilliamstown, KY 41097	7 [1]	Fund Type: State Federal Other:
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission
4 5	Grant Authority (Source): KRS 158.4416 Award Amount: \$43,095.00	11	Other Evaluations: Each program will be evaluated per
6 12	Period of Award: Commonwer July 1, 2023-June 30, 2024 Commonwer Consortia/Partnership Members: N/A N/A	ea	specific program guidelines to be disseminated by KDE Program Contacts.
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023
	quca		

Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameWolfe CountyStreet Address85 Main StreetCity, State ZipCampton, KY 41301	7 [1]	Fund Type: State Federal Other:
2	KDE Contact Information: Program Consultant – Phone # Christina Weeter Street Address 300 Sower Blvd Budget Contact – Phone # Nicole Crosthwaite Street Address 300 Sower Blvd City, KY Zip Frankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission
4 5	Grant Authority (Source): KRS 158.4416	11	Other Evaluations: Each program will be evaluated per
6	Period of Award: July 1, 2023-June 30, 2024	ea	specific program guidelines to be disseminated by KDE Program Contacts.
12 13	Consortia/Partnership Members: N/A Special Instructions/Conditions:		
13 14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemen	t	Date: July 11, 2023
	Yuca		

Kentucky Department of Education Award Notification			
1	Name and Address of Recipient:Agency NameWoodford CountyStreet Address330 Pisgah PkCity, State ZipVersailles, KY 40383	7 [1]	Fund Type: State Federal Other:
2	KDE Contact Information:Program Consultant – Phone #Christina WeeterStreet Address300 Sower BlvdBudget Contact – Phone #Nicole CrosthwaiteStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission
4	Grant Authority (Source): KRS 158.4416		Other
5 6 12	Award Amount: \$43,095.00OppositePeriod of Award: July 1, 2023-June 30, 2024CommonweilConsortia/Partnership Members: N/A	11 2a	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.
13	Special Instructions/Conditions:		
14	Authorized By (Name/Title): Nicole Crosthwaite, Budget Branch Division of Budgets & Financial Managemer	t	Date: July 11, 2023
	auca.		

Kentucky Department of Education Award Notification				
1	Name and Address of Recipient:Agency NameTotalStreet AddressCity, State Zip, KY	7 [1]	Fund Type: State Federal Other:	
2	KDE Contact Information:Program Consultant – Phone # Street AddressChristina Weeter 300 Sower BlvdBudget Contact – Phone # Street AddressNicole Crosthwaite 300 Sower BlvdStreet Address300 Sower BlvdCity, KY ZipFrankfort, KY 40601	8	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description School Based Mental Health Care Provider Provider Fund Source State General Funds CFDA# N/A MUNIS Project Number 14MK Master Agreement Number N/A	9	Reimbursement Frequency: Monthly Quarterly Quarterly Beginning of Fiscal Year Other Beginning of Fiscal Year Financial Reporting Method: Electronic Submission	
4	Grant Authority (Source): KRS 158.4416		Other	
5 6	Award Amount:\$7,412,340.00OurPeriod of Award:ComonweightIndex 4, 2022, hung 20, 2024	11 Pa	Evaluations: Each program will be evaluated per specific program guidelines to be disseminated by KDE Program Contacts.	
12	July 1, 2023-June 30, 2024 Consortia/Partnership Members: N/A			
13	Special Instructions/Conditions:			
14		t	Date: July 11, 2023	
	yucau			