chment III- Grants (Federal & Private																					
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ncy Name: DEPARTMENT OF CORRE	RECTIONS (FL0)																				
					Official Award	Official Award Amount															
G.	Grant Type		Catalog of Endoral	Grant Period of	Date (Anticipated	(Please list anticipated or			Grant Allowable	Anticipated Grant											
(F	Federal or G	rantor/Agency Name	Domestic Assistance	Grant Period of Performance (i.e. 01/01/2018 - 12/31/2019)	date if not yet	previous year's amount if	Now ve	Carryover vs New F	Fynonsos: PS NPS	Hear PS NPS or		MOF Requirement	SOAR Grant		FV19 Approved	FV19 Anticipated	FY19 #	FV19 # Anticipated	DC Agency Program	DC Agency Program	
Official Grant Name	Private)	(Federal or Private)	Number (CFDA)	12/31/2019)	available)	not yet avaiable)	Ongoing Grant	Award	or Both	Both	Match Amount	MOE Requirement (Y/N)	Number	SOAR Grant Phase	e Budget	Revised Budget	Approved FTEs	Revised FTFs	DC Agency Program Manger Name	DC Agency Program Manager Position Title	Grant Purpose
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Attachmen	t III-Federal Payment	S			
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Attachment III- Grants Lapse (FY1	(7)			1	1					1				1	1	1					
Attachment III- Grants Lapse (F 11	17							-							<b>+</b> + + + + + + + + + + + + + + + + + +						
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Official Grant Name	(Federal or	(Faderal or Private)	Domestic Assistance	Grant Period of Performance (i.e. 01/01/2018 - 12/31/2019)	Original, Official	Original, Orricial	to F117 (including	New VS C	arryover vs New	AIDS or Doth	SOAR Grant	COAD Crant Dhase	P11/ Approved	Pudget (Vees and)	and ID	Grant Award	Approved	FT1/# Tear-	DC Agency Program Manger Name	Manager Register Title	Grant Purpose
Official Grant Name	Private)	(Federal or Private)	Number (CFDA)	- 12/31/2019)	Award Date	Award Amount	IDCR) On	Joing Grant	Award	NPS, or Both	Number	SOAR Grant Phase	Budget	Budget (Year-end)	Expenditures	s amount	FIES	endFIES	manger Name	manager Position Little	Grant Purpose
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