ttachment III- Grants (Fed	deral & Private)										_					
gency Name:	Office of the T	enant Advocate (CQ0)														
Official Grant Name	Grant Type (Federal or Private)	Grantor/Agency Name (Federal or Private) Catalog of Federal Domestic Assistance Number (CFDA)	Grant Period of Performance (i.e. 01/01/2019 - 12/31/2021)	Official Award Date	Official Award Amount (Please list anticipated or previous year's amount if not yet available)	Carryover vs New Award	Grant Allowable Expenses: PS, NPS, or Both	Anticipated Grant Use: PS, NPS, or Both	Match Amount MOE Requirement (Y/N) SOAR Grant Numbe	er SOAR Grant Phase	FY21 Proposed Budget	FY21 Anticipated Revised Budget	FY21 # Proposed FTEs	FY19 # Anticipated DC Agency Program Mange Revised FTEs Name	er DC Agency Program Manager Position Title	Grant Purpose Additional N
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	00000									Total	\$0	\$0	-	-		

CQ0\_FY21\_Attachment III - Grants, Federal Payments.xlsx

Attachment III-Fe	ederal Payments				
Agency Name:	Office of the Tenant	Advocate (CQ0)			
	FY 2020 Payment	FY 2021 Payment	Change	New/On-going	Purpose
None			0		
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			0		
	\$0	\$0	\$0		

Attachment III- Grants Lapse (F	FY19)				-														
Agency Name:	Office of the T	Tenant Advocate (CQ0)																	
Official Grant Name	Grant Type (Federal or Private)	Grantor/Agency Name Catalog of Federal Domestic (Federal or Private) Assistance Number (CFDA)	Grant Period of Performance (i.e. 01/01/2018 - 12/31/2019)	Original, Official O	Original, Official Award Amount	Expenditures Prior to FY19 (Including IDCR)	New vs Ongoing Grant	Carryover vs New Ex	Grant Allowable kpenses: PS, NPS, or Both	SOAR Grant Number	SOAR Grant Phase	FY19 Approved FY19 Revised Be Budget (Year-end	FY19 Year-end Cash udget Accrued, and ID Expenditures	FY19 Unexpended Grant Award Amount	FY19 # Approved	FY19 # Year-end FTEs	DC Agency Program Manger Name	DC Agency Program Manag Position Title	ger Grant Purpose
Not applicable														-					
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