Attachment III- Grants (Federal &	Private)																						-
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Agency Name:																							
																							
					Official Award	Official Award Amou	nt																
	Grant Type (Federal or		Catalog of Federal	Grant Period of Performance (i.e. 01/01/2019 - 12/31/2021)	Date (Anticipated	(Please list anticipate	l or		Grant Allowable	Anticipated Grant								FY22 #					
	(Federal or	Grantor/Agency Name (Federal or Private)	Domestic Assistance	Performance (i.e. 01/01/2019	date if not yet	previous year's amou	nt New vs	Carryover vs	Expenses: PS, NPS,	Use: PS, NPS, or		MOE Requirement	SOAR Grant		FY22 Proposed	FY22 Anticipated	FY22 #	Anticipated	DC Agency Program Manger Name	DC Agency Prograr Manager Position Tit	ı		
Official Grant Name	Private)	(Federal or Private)	Number (CFDA)	- 12/31/2021)	available)	if not yet available	Ongoing Gran	t New Award	or Both	Both	Match Amount	(Y/N)	Number S	SOAR Grant Phase	Budget	Revised Budget	Proposed FTEs	Revised FTEs	Manger Name	Manager Position Ti	e	Grant Purpose	
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	FY 2021 Payment	FY 2022 Payment Change	New/On-going	Purpose
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Attachment III- Grants Lapse (FY2	(0)	Assault			***************************************	***************************************						***************************************		***************************************	CONTRACTOR	***************************************		2000			
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	Grant Type (Federal or	Grantor/Agoney Namo	Catalog of Federal	Grant Period of Performance (i.e. 01/01/2018 - 12/31/2019)	Original, Official Award Date	Original Official	Expenditures Prior	Now ve	Carryovor ve	Grant Allowable	SOAP Grant	SOAR Grant	EV20 Approved	EV20 Povisod	FY20 Year-end Cash, Accrued,	FY20 Unexpended Grant Award Amount	FY20 #	EV20 # Voar	DC Agoney Program	DC Agoncy Program	
Official Grant Name	Private)	Grantor/Agency Name (Federal or Private)	Domestic Assistance Number (CFDA)	01/01/2018 - 12/31/2019)	Award Date	Award Amount	IDCR)	New vs Ongoing Grant	New Award	Expenses: PS, NPS, or Both	SOAR Grant Number	SOAR Grant Phase	Budget	Budget (Year-end)	Expenditures	Amount	FTEs	FY20 # Year- end FTEs	DC Agency Program Manger Name	DC Agency Program Manager Position Title	Grant Purpose
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