



**Florida Department of Education
Project Award Notification**

1 PROJECT RECIPIENT Liberty County School District	2 PROJECT NUMBER 390-1211M-2CR01	
3 PROJECT/PROGRAM TITLE Instructional Materials (ARP ESSER) <p align="center">TAPS 22A218</p>	4 AUTHORITY 84.425U ARP ESSER USDE or Appropriate Agency FAIN#: S425U210052	
5 AMENDMENT INFORMATION Amendment Number: Type of Amendment: Effective Date:	6 PROJECT PERIODS Budget Period: 09/02/2022 - 09/30/2024 Program Period:09/02/2022 - 09/30/2024	
7 AUTHORIZED FUNDING Current Approved Budget: \$247,085.00 Amendment Amount: Estimated Roll Forward: Certified Roll Amount: Total Project Amount: \$247,085.00	8 REIMBURSEMENT OPTION Federal Cash Advance	
9 TIMELINES <ul style="list-style-type: none"> Last date for incurring expenditures and issuing purchase orders: <u>09/30/2024</u> Date that all obligations are to be liquidated and final disbursement reports submitted: <u>11/20/2024</u> Last date for receipt of proposed budget and program amendments: <u>08/30/2024</u> Refund date of unexpended funds; mail to DOE Comptroller, 325 W. Gaines Street, 944 Turlington Building, Tallahassee, Florida 32399-0400: Date(s) for program reports: Federal Award Date : <u>03/24/2021</u> 		
10 DOE CONTACTS Program: Amber Baumbach Phone: (850) 245-9115 Email: Amber.Baumbach@fldoe.org Grants Management: Unit A (850) 245-0735	Comptroller Office Phone: (850) 245-0401 UEI#: LVN6Y885WAC4 FEIN#: F596000720001	
11 TERMS AND SPECIAL CONDITIONS <ul style="list-style-type: none"> This project and any amendments are subject to the procedures outlined in the <u>Project Application and Amendment Procedures for Federal and State Programs</u> (Green Book) and the General Assurances for Participation in Federal and State Programs and the terms and requirements of the Request for Proposal or Request for Application, RFP/RFA, hereby incorporated by reference. For federal cash advance projects, expenditures must be recorded in the Florida Grants System (FLAGS) as close as is administratively feasible to when actual disbursements are made for this project. Cash transaction requests must be limited to amounts needed and be timed with the actual, immediate cash requirements to carry out the purpose of the approved project. All provisions not in conflict with any amendment(s) are still in full force and effect and are to be performed at the level specified in the project award notification. The Department's approval of this contract/grant does not excuse compliance with any law. Other: 		
12 APPROVED: <div style="display: flex; justify-content: space-between;"> <div data-bbox="152 1856 578 1965"> <p><u>Angelia Rivers</u> Authorized Official on behalf of the Commissioner of Education</p> </div> <div data-bbox="797 1856 1068 1934"> <p><u>10/4/2022</u> Date of Signing</p> </div> <div data-bbox="1195 1797 1511 1898" style="text-align: right;">  <p>FLORIDA DEPARTMENT OF EDUCATION fldoe.org</p> </div> </div>		

**INSTRUCTIONS
PROJECT AWARD NOTIFICATION**

- 1** Project Recipient: Agency, Institution or Non-Governmental entity to which the project is awarded.
- 2** Project Number: This is the agency number, grant number, and project code that must be used in all communication. (Projects with multiple project numbers will have a separate DOE-200 for each project number).
- 3** Project Description: Title of program and/or project. TAPS #: Departmental tracking number.
- 4** Authority: Federal Grants - Public Law or authority and CFDA number. State Grants - Appropriation Line Item Number and/or applicable statute and state identifier number.
- 5** Amendment Information: Amendment number (consecutively numbered), type (programmatic, budgeting, time extension or others) in accordance with the Project Application and Amendment Procedures for Federal and State Programs (Green Book), and effective date.
- 6** Project Periods: The periods for which the project budget and program are in effect.
- 7** Authorized Funding: Current Approved Project (total dollars available prior to any amendments); Amendment Amount (total amount of increase or decrease in project funding); Estimated Roll Forward (roll forward funds which have been estimated into this project); and Total Project Amount (total dollars awarded for this project).
- 8** Reimbursement Options:
 - Federal Cash Advance –On-Line Reporting required monthly to record expenditures.
 - Advance Payment – Upon receipt of the Project Award Notification, up to 25% of the total award may be advanced for the first payment period. To receive subsequent payments, 90% of previous expenditures must be documented and approved by the Department.
 - Quarterly Advance to Public Entity – For quarterly advances of non-federal funding to state agencies and LEAs made in accordance within the authority of the General Appropriations Act. Expenditures must be documented and reported to DOE at the end of the project period. If audited, the recipient must have expenditure detail documentation supporting the requested advances.
 - Reimbursement with Performance - Payment made upon submission of documented allowable expenditures, plus documentation of completion of specified performance objectives.
- 9** Timelines: Date requirements for financial and program reporting/requests to the Department of Education.
- 10** DOE Contacts: Program contact for program issues, Grants Management Unit for processing issues, and Comptroller's Office number for payment information.
- 11** Terms and Special Conditions: Listed items apply to this project. (Additional space provided on Page 2 of 2 if needed.)
- 12** Approved: Approval signature from the Florida Department of Education and the date signature was affixed.

FLORIDA DEPARTMENT OF EDUCATION PROJECT APPLICATION

Please return to: Florida Department of Education Office of Grants Management Room 332 Turlington Building 325 West Gaines Street Tallahassee, Florida 32399-0400 Telephone: (850) 245-0735	A) Program Name: <h2 style="text-align: center;">Instructional Materials</h2> TAPS NUMBER: 22A218	DOE USE ONLY Date Received Project Number (DOE Assigned)								
B) Name and Address of Eligible Applicant: Liberty County School District 11051 NW SR 20, Bristol, FL, 32321										
C) Total Funds Requested: <h3 style="text-align: center;">\$247,085</h3> <hr style="width: 20%; margin: auto;"/> DOE USE ONLY Total Approved Project: \$	D) Applicant Contact & Business Information <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Contact Name: Mandie Fowler</td> <td>Telephone Numbers:</td> </tr> <tr> <td>Fiscal Contact Name: Melanie King</td> <td>850-643-2275</td> </tr> <tr> <td>Mailing Address: 11051 NW SR 20, Bristol, FL, 32321</td> <td>E-mail Addresses: Mandie.fowler@lcsb.org Melanie.King@lcsb.org</td> </tr> <tr> <td>Physical/Facility Address: 11051 NW SR 20, Bristol, FL, 32321</td> <td>UEI number: LVN6Y885WAC4 FEIN number: F59000720001</td> </tr> </table>		Contact Name: Mandie Fowler	Telephone Numbers:	Fiscal Contact Name: Melanie King	850-643-2275	Mailing Address: 11051 NW SR 20, Bristol, FL, 32321	E-mail Addresses: Mandie.fowler@lcsb.org Melanie.King@lcsb.org	Physical/Facility Address: 11051 NW SR 20, Bristol, FL, 32321	UEI number: LVN6Y885WAC4 FEIN number: F59000720001
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CERTIFICATION										
<p>I, <u>Kyle Peddie</u>, (Please Type Name) as the official who is authorized to legally bind the agency/organization, do hereby certify to the best of my knowledge and belief that all the information and attachments submitted in this application are true, complete and accurate, for the purposes, and objectives, set forth in the RFA or RFP and are consistent with the statement of general assurances and specific programmatic assurances for this project. I am aware that any false, fictitious or fraudulent information or the omission of any material fact may subject me to criminal, or administrative penalties for the false statement, false claims or otherwise. Furthermore, all applicable statutes, regulations, and procedures; administrative and programmatic requirements; and procedures for fiscal control and maintenance of records will be implemented to ensure proper accountability for the expenditure of funds on this project. All records necessary to substantiate these requirements will be available for review by appropriate state and federal staff. I further certify that all expenditures will be obligated on or after the effective date and prior to the termination date of the project. Disbursements will be reported only as appropriate to this project, and will not be used for matching funds on this or any special project, where prohibited.</p> <p>Further, I understand that it is the responsibility of the agency head to obtain from its governing body the authorization for the submission of this application.</p>										
E)  _____ Signature of Agency Head	_____ Superintendent Title	_____ September 1, 2022 Date								

Instructional Materials

Program-Specific Assurances

1. The LCSB will utilize all grant funds to purchase standards-aligned curricula
2. All instructional materials will be from the 2022, 22-23, or 23-24 state adopted list.
3. The LCSB acknowledges that all curricula purchased must comply with s 1006.28, Florida Statutes (F.S.), s. 1003.42(2), F.S. and Rule 6A-1.094124(3)(a)-(c), Florida Administrative Code (F.A.C.).


Scope of Work/Narrative

The LCSB will utilize all allocated funds to fully implement standards align, state-adopted curricula, as reflected in the submitted budget narrative.

**FLORIDA DEPARTMENT OF EDUCATION
BUDGET NARRATIVE FORM 101S**

A) Name of Eligible Recipient/Fiscal Agent:	Liberty County
B) DOE Assigned Project Number:	
C) TAPS Number:	22A218

(1) FUNCTION	(2) OBJECT	(3) Account Title and Narrative	(4) FTE POSITION	(5) AMOUNT	(6) % Allocated to This Project
5100	520	National Geographic Big Ideas Math K-5, support the 2022 purchase and full		\$ 83,000.00	100%
5100	520	SAVVAS MyPerspectives 6-12, support the 2022 purchase and full adoption/implementation		\$ 47,655.04	100%
5100	520	Support the spring 2023 purchase and full adoption/implementation of state adopted Social Studies K-12 curriculum		\$ 58,214.98	100%
5100	520	Support the spring 2024 purchase and full adoption/implementation of state adopted Science K-12 curriculum		\$ 58,214.98	100%
D) TOTAL				\$ 247,085.00	

<p align="center">DOE ATTESTATION (Program and Grants Management)</p> <p>The cost for each line item budget category has been evaluated and determined to be allowable, reasonable and necessary as required by Section 216.3475, Florida Statutes. Documentation is on file evidencing the methodology used and the conclusions reached.</p>	 <p align="center">FLORIDA DEPARTMENT OF EDUCATION <small>fldoc.org</small></p>
<p>April 2022 DOE 101S</p>	

Elementary and Secondary School Emergency Relief (ESSER III) Fund under the American Rescue Plan (ARP) Act

PROGRAMMATIC, FISCAL, AND REPORTING ASSURANCES The Applicant assures the following:

The applicant must purchase curricula in accordance with the requirements of this RFA. The purpose for funding is to purchase instructional materials through the 2022-23 and 2023-24 school years in alignment with the current and upcoming instructional materials adoptions. The funding is to provide additional support for Local Education Agencies (LEA) to purchase major tools with a focus on areas where new materials aligned to new standards are required.

I certify that in accordance with the requirements of this funding, my LEA will:

1. The Applicant will use program funds solely for purchasing major tools of instruction to standards-aligned curricula for any grade level.
2. Instructional materials purchased with program funds must be from the 2020-2021, 2021- 2022, 2022-2023 and/or 2023-2024 state adopted lists.
3. The Applicant acknowledges that all curricula purchased must comply with s. 1006.28, Florida Statutes (F.S.), s.1003.42(2), F.S. and Rule 6A-1.094124(3)(a)-(c), Florida Administrative Code (F.A.C.).
4. Provide a proportional allocation to each charter school in the district, collect charter school assurances from charter schools accepting funds, and make charter school assurances available to the Florida Department of Education.

Kyle Peddie

Printed Name of Superintendent

Liberty

District

Applicant's Superintendent or Authorized Representative:

Signature: 	Date: 9/8/2022
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