Name and Address of Recipient		Fund Type:
Agency Name:	Barren County Board of Education	⊠State
Street Address:	600 Trojan Way	□Federal
City, State, Zip:	Glasgow, KY 42141	□Other:
UEI#:	GSS1PTEJ5KJ8	
KDE Contact Information	Barren County Board of Education 600 Trojan Way Glasgow, KY 42141 GSS1PTEJ5KJ8	Research and Development:
Program Consultant:	Beth Engle	Yes
Street Address:	300 Sower Blvd, 5th Floor	⊠ No
Budget Contact:	Kelsey Ruble	
Street Address:	300 Sower Blvd, 5th Floor	Method of Payment
City, State Zip:	Frankfort, KY 40601	☐ Federal Cash Request
City, State Zip.	Frankfort, KT 40001	☐ Expenditure Reimbursement
Description/Fun Source of Award	and Fiscal Year:	⊠ Automatic Payment
Description:	and Fiscal Year: 20% Facility Funds	Lump Sum
Federal Award Date:	N/A	Receipt of Invoice from Vendor
Fund Source:	State Funds	(in the second
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	□Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	State 1.7
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	para in routin quarter.
Grant Authority (Source):		Financial Reporting Method:
		Electronic Submission CDIP
		☑Other: MUNIS project report to be emailed to
Award Amount:	Ω_{110}	Kelsey Ruble twice yearly: by January 25, 2026 &
\$ 154397.00	Our	July 25, 2026.
	Our Commonwealth	July 23, 2020.
Period of Award:	Commonwealth	Evaluations:
7/1/25-6/30/26		N/A
Consortia/Partnership Members:	N/A	
consortia/Partnership iviembers:	IV/A	
6	Annual to the second se	OCTE == let==th== tel=45, 2026

Special Instructions/Conditions: District will submit request to carry over 18CM funds, along with anticipated use, to OCTE no later than July 15, 2026.

Date: 9/16/2025

Authorized By (Name, Title): Beth Hargis, Associate Comm

Name and Address of Posinions		Fried Trings
Name and Address of Recipient	Bell County Board of Education	Fund Type:
Agency Name:	DO Pay 240	⊠ State
Street Address:	PO Box 340	□Federal
City, State, Zip:	Pineville, KY 40977	□Other:
UEI#:	GR4LZBSW3VY6	
KDE Contact Information	Bell County Board of Education PO Box 340 Pineville, KY 40977 GR4LZBSW3VY6	Research and Development:
Program Consultant:	Beth Engle	□ Yes
Street Address:	300 Sower Blvd, 5th Floor	⊠ No
Budget Contact:	Kelsey Ruble	
Street Address:	300 Sower Blvd, 5th Floor	Method of Payment
City, State Zip:	Frankfort, KY 40601	☐ Federal Cash Request
City, State Zip.	Halikiott, KI 40001	☐ Expenditure Reimbursement
Description/Fun Source of Award	and Fiscal Year:	⊠ Automatic Payment
Description:	and Fiscal Year: 20% Facility Funds	□Lump Sum
Federal Award Date:	N/A	☐ Receipt of Invoice from Vendor
Fund Source:	State Funds	
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	□Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	☑ Other: 50% in 2 nd quarter with balance to be
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	paid in routin quarter.
Grant Authority (Source):		Financial Reporting Method:
,,(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Electronic Submission CDIP
Award Amount:	0	☑ Other: MUNIS project report to be emailed to
\$ 61993.00		Kelsey Ruble twice yearly: by January 25, 2026
	Our Commonwealth	July 25, 2026.
Period of Award:	Commonwealth A	
7/1/25-6/30/26		Evaluations:
		N/A
Consortia/Partnership Members:	N/A	
Special Instructions/Conditions: L	District will submit request to carry over 18CM funds, along with anticipated use, to	OCTE no later than July 15, 2026.
Authorized By (Name, Title): Bet	h Hargis, Associate Comm Date: 9/16/2025	

Name and Address of Recipient		Fund Type:
Agency Name:	Boone County Board of Education	⊠State
Street Address:	8330 US Highway 42	□Federal
City, State, Zip:	Florence, KY 41042	□Other:
UEI#:	VZQGK6AZJL55	
KDE Contact Information	Boone County Board of Education 8330 US Highway 42 Florence, KY 41042 VZQGK6AZJL55	Research and Development:
Program Consultant:	Beth Engle	Yes
Street Address:	300 Sower Blvd, 5th Floor	⊠ No
Budget Contact:	Kelsey Ruble	
Street Address:	300 Sower Blvd, 5th Floor	Method of Payment
City, State Zip:	Frankfort, KY 40601	☐ Federal Cash Request
City, State Zip.	Trankfort, KT 40001	☐ Expenditure Reimbursement
Description/Fun Source of Award	and Fiscal Year:	
Description:	and Fiscal Year: 20% Facility Funds	Lump Sum
Federal Award Date:	N/A	Receipt of Invoice from Vendor
Fund Source:	State Funds	(*)
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	Other: 50% in 2 nd quarter with balance to be
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	
Grant Authority (Source):		Financial Reporting Method:
		Electronic Submission CDIP
		☑Other: MUNIS project report to be emailed to
Award Amount:	Ω_{110}	Kelsey Ruble twice yearly: by January 25, 2026 &
\$ 76587.00	Our	July 25, 2026.
Period of Award:	Our Commonwealth	July 23, 2020.
7/1/25-6/30/26	Commonwealth	Evaluations:
7/1/23-0/30/20		N/A
Consortia/Partnership Members:	N/Δ	
consortia, rai thership members.		

Special Instructions/Conditions: District will submit request to carry over 18CM funds, along with anticipated use, to OCTE no later than July 15, 2026.

Date: 9/16/2025

Authorized By (Name, Title): Beth Hargis, Associate Comm

Name and Address of Recipient		Fund Type:
Agency Name:	Breathitt County Board of Education	⊠State
Street Address:	PO Box 750, 420 Court Street	□Federal
City, State, Zip:	Jackson, KY 41339	□Other:
UEI#:	EEEPAJS3SEP5	
KDE Contact Information	Breathitt County Board of Education PO Box 750, 420 Court Street Jackson, KY 41339 EEEPAJS3SEP5	Research and Development:
Program Consultant:	Beth Engle	☐ Yes
Street Address:	300 Sower Blvd, 5th Floor	⊠ No
Budget Contact:	Kelsey Ruble	
Street Address:	300 Sower Blvd, 5th Floor	Method of Payment
City, State Zip:	Frankfort, KY 40601	☐ Federal Cash Request
city, State 21p.	Transfer, KT 40001	☐ Expenditure Reimbursement
Description/Fun Source of Awar	rd and Fiscal Year:	
Description:	rd and Fiscal Year: 20% Facility Funds	Lump Sum
Federal Award Date:	N/A	☐ Receipt of Invoice from Vendor
Fund Source:	State Funds	
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	□Monthly
MUNIS Project Number:	18CM	□Quarterly
MOA Number:	N/A	☑ Other: 50% in 2 nd quarter with balance to be
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	paid in routin quarter.
Grant Authority (Source):		Financial Reporting Method:
, \ \		Electronic Submission CDIP
Award Amount:	0	☑ Other: MUNIS project report to be emailed to
\$ 46480.00	Our	Kelsey Ruble twice yearly: by January 25, 2026 8
	C	July 25, 2026.
Period of Award:	Our Commonwealth	Evaluations:
7/1/25-6/30/26		=100009000
		N/A
Consortia/Partnership Member	s: N/A	
zama naj i an incremp internaci		

Special Instructions/Conditions: District will submit request to carry over 18CM funds, along with anticipated use, to OCTE no later than July 15, 2026.

Date: 9/16/2025

Authorized By (Name, Title): Beth Hargis, Associate Comm

Name and Address of Recipient		Fund Type:
Agency Name:	Breckinridge County Board of Education	⊠State
Street Address:	86 Airport Road	□Federal
City, State, Zip:	Hardinsburg, KY 40143	□Other:
UEI#:	ZT9JJJ5Y2AS2	
	Breckinridge County Board of Education 86 Airport Road Hardinsburg, KY 40143 ZT9JJJ5Y2AS2	Research and Development:
KDE Contact Information		□Yes
Program Consultant:	Beth Engle	⊠ No
Street Address:	300 Sower Blvd, 5th Floor	
Budget Contact:	Kelsey Ruble	Method of Payment
Street Address:	300 Sower Blvd, 5th Floor	Federal Cash Request
City, State Zip:	Frankfort, KY 40601	Expenditure Reimbursement
	01 11 1	
Description/Fun Source of Award		⊠ Automatic Payment
Description:		Lump Sum
Federal Award Date:	N/A	Receipt of Invoice from Vendor
Fund Source:	State Funds	
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	□Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	Other: 50% in 2 nd quarter with balance to be
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	
Grant Authority (Source):		Financial Reporting Method:
		☐ Electronic Submission CDIP
		☑Other: MUNIS project report to be emailed to
Award Amount:	011r	Kelsey Ruble twice yearly: by January 25, 2026 8
\$ 65373.00	Our	July 25, 2026.
Period of Award:	Our Commonwealth	
7/1/25-6/30/26	Commonwealth	Evaluations:
7/1/25-0/30/20		N/A
Consortia/Partnership Members:	N/A	
Special Instructions/Conditions: L	District will submit request to carry over 18CM funds, along with anticipated use, to	O OCTE no later than July 15. 2026.
		· · · · · · · · · · · · · · · · · · ·

Authorized By (Name, Title): Beth Hargis, Associate Comm

Date: 9/16/2025

Name and Address of Recipient		Fund Type:
Agency Name:	Bullitt County Board of Education	⊠State
Street Address:	Bullitt County Board of Education 1040 HWY 44 East Shepherdsville, KY 40165 UCL6WKNM6XF6	□ Federal
City, State, Zip:	Shepherdsville, KY 40165	Other:
UEI#:	UCL6WKNM6XF6	□other:
oeiii.	OCEOWININO AT THE PROPERTY OF	Bassauch and Davidanmant
KDE Contact Information		Research and Development: Yes
Program Consultant:	Beth Engle	
Street Address:	300 Sower Blvd, 5th Floor	⊠ No
Budget Contact:	Kelsey Ruble	
Street Address:	300 Sower Blvd, 5th Floor	Method of Payment
City, State Zip:	Frankfort, KY 40601	☐ Federal Cash Request
/ A		☐ Expenditure Reimbursement
Description/Fun Source of Award		
Description:	20% Facility Funds	□Lump Sum
Federal Award Date:	N/A	Receipt of Invoice from Vendor
Fund Source:	State Funds	
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	□Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	☑ Other: 50% in 2 nd quarter with balance to be
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	•
Grant Authority (Source):		Financial Reporting Method:
		□ Electronic Submission CDIP
		☑Other: MUNIS project report to be emailed to
Award Amount:	<u> </u>	Kelsey Ruble twice yearly: by January 25, 2026
\$ 97433.00	Oul	July 25, 2026.
David of Assessed	Our Commonwealth	34.7 23, 2020.
Period of Award:	Commonwealth	Evaluations:
7/1/25-6/30/26		N/A
Consortio/Bortnorship Marchare	N/A	
Consortia/Partnership Members:	IV/A	
Special Instructions/Conditions:	District will submit request to carry over 18CM funds, along with anticipated use, to	OCTE no later than July 15, 2026.

Authorized By (Name, Title): Beth Hargis, Associate Comm

Date: 9/16/2025

Name and Address of Recipient		Fund Type:
Agency Name: Butler County	Board of Education	⊠State
Street Address: PO Box 339		□Federal
City, State, Zip: Morgantown,	KY 42261	□Other:
UEI#: T9M7U8BRCV		
	415	Research and Development:
KDE Contact Information		Yes
Program Consultant: Beth Engle		⊠No
Street Address: 300 Sower Blv	d, 5th Floor	
Budget Contact: Kelsey Ruble		Method of Payment
Street Address: 300 Sower Blv		☐ Federal Cash Request
City, State Zip: Frankfort, KY	40601	□ Expenditure Reimbursement
Description /Fun Course of August and Fine I Van	01 11	✓ Automatic Payment
Description/Fun Source of Award and Fiscal Year Description: 20% Facility Fu		□Lump Sum
•	mus	·
Federal Award Date: N/A Fund Source: State Funds		☐ Receipt of Invoice from Vendor
CFDA#: N/A		Reimbursement Frequency:
PR/AWARD NUMBER (FAIN): N/A		Monthly
MUNIS Project Number: 18CM		Quarterly
MOA Number: N/A		☑Other: 50% in 2 nd quarter with balance to be
Pass-through Number: N/A		paid in fourth quarter.
Restricted Indirect Cost Rate: N/A		
Grant Authority (Source):		Financial Reporting Method:
		☐ Electronic Submission CDIP
Award Amount:		☑Other: MUNIS project report to be emailed to
\$ 49130.00	()11r	Kelsey Ruble twice yearly: by January 25, 2026 8
3 43130.00		July 25, 2026.
Period of Award:	Our Commonwea	olth American
7/1/25-6/30/26	COMMITTEDITACE	Evaluations:
, , , , , , , , ,		N/A
Consortia/Partnership Members: N/A		
Consider the street of the str		with anticipated use to OCTE no later than July 15, 2026

Date: 9/16/2025

Authorized By (Name, Title): Beth Hargis, Associate Comm

Name and Address of Recipient		Fund Type:
Agency Name:	Caldwell County Board of Education	⊠State
Street Address:	PO Box 229, 612 West Washington Street	□Federal
City, State, Zip:	Princeton, KY 42445	□Other:
UEI#:	Caldwell County Board of Education PO Box 229, 612 West Washington Street Princeton, KY 42445 H3Y4KYYUM5X8	
		Research and Development:
KDE Contact Information		Yes
Program Consultant:	Beth Engle	⊠ No
Street Address:	300 Sower Blvd, 5th Floor	2110
Budget Contact:	Kelsey Ruble	Method of Payment
Street Address:	300 Sower Blvd, 5th Floor	Federal Cash Request
City, State Zip:	Frankfort, KY 40601	Expenditure Reimbursement
Description/Fun Source of Award		☑ Automatic Payment
Description:		Lump Sum
Federal Award Date:	N/A	Receipt of Invoice from Vendor
Fund Source:	State Funds	
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	□ Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	⊠Other: 50% in 2 nd quarter with balance to be
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	
Grant Authority (Source):		Financial Reporting Method:
		☐ Electronic Submission CDIP
Assessed Assessments		☑Other: MUNIS project report to be emailed t
Award Amount:	()11t	Kelsey Ruble twice yearly: by January 25, 2026
\$ 135400.00	Oui	July 25, 2026.
Period of Award:	Our Commonwealth	
7/1/25-6/30/26	Commonwealth	Evaluations:
771723 0730720		N/A
Consortia/Partnership Members:	N/A	
		0077
Special instructions/Conditions: L	District will submit request to carry over 18CM funds, along with anticipated use, to	UCIE no later than July 15, 2026.

Authorized By (Name, Title): Beth Hargis, Associate Comm Date: 9/16/2025

Name and Address of Recipient		Fund Type:
Agency Name:	Campbell County Board of Education	⊠State
Street Address:	101 Orchard Lane	□Federal
City, State, Zip:	Alexandria, KY 41001	
UEI#:	TUE4BKLAL1N9	□Other:
OLIW.	TOLYBREALING	
KDE Contact Information	Campbell County Board of Education 101 Orchard Lane Alexandria, KY 41001 TUE4BKLAL1N9	Research and Development:
Program Consultant:	Beth Engle	Yes
Street Address:	300 Sower Blvd, 5th Floor	⊠ No
Budget Contact:	Kelsey Ruble	
Street Address:	300 Sower Blvd, 5th Floor	Method of Payment
City, State Zip:	Frankfort, KY 40601	☐ Federal Cash Request
A	Trainition, in 18881	Expenditure Reimbursement
Description/Fun Source of Award	and Fiscal Year:	
Description:	and Fiscal Year: 20% Facility Funds	Lump Sum
Federal Award Date:	N/A	Receipt of Invoice from Vendor
Fund Source:	State Funds	· ·
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	Solution Solution
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	paid in fourth quarter.
Grant Authority (Source):		Financial Reporting Method:
		Electronic Submission CDIP
Award Amount:	0.440	☑Other: MUNIS project report to be emailed t
\$ 99807.00	Our Commonwealth	Kelsey Ruble twice yearly: by January 25, 2026
	1,1	July 25, 2026.
Period of Award:	Commonwealth A	
7/1/25-6/30/26		Evaluations:
		N/A
Consortia/Partnership Members:	N/A	
Special Instructions/Conditions: L	District will submit request to carry over 18CM funds, along with anticipated use, to	OCTE no later than July 15, 2026.
Authorized By (Name, Title): Beth	n Hargis, Associate Comm Date: 9/16/2025	

Authorized By (Name, Title): Beth Hargis, Associate Comm Office of Career & Technical Education

Name and Address of Recipient		Fund Type:
Agency Name:	Carroll County Board of Education	⊠State
Street Address:	PO Box 90, 813 Hawkins St	□Federal
City, State, Zip:	Carrollton, KY 41008	□Other:
UEI#:	V2DFULJ1ZZZ5	
KDE Contact Information	Carroll County Board of Education PO Box 90, 813 Hawkins St Carrollton, KY 41008 V2DFULJ1ZZZ5	Research and Development:
Program Consultant:	Beth Engle	Yes
Street Address:	300 Sower Blvd, 5th Floor	⊠ No
Budget Contact:	Kelsey Ruble	
Street Address:	300 Sower Blvd, 5th Floor	Method of Payment
City, State Zip:	Frankfort, KY 40601	☐ Federal Cash Request
city, State Zip.	Trankfort, KT 40001	☐ Expenditure Reimbursement
Description/Fun Source of Awar	rd and Fiscal Year:	
Description:	rd and Fiscal Year: 20% Facility Funds	□Lump Sum
Federal Award Date:	N/A	☐ Receipt of Invoice from Vendor
Fund Source:	State Funds	· ·
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	□Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	Other: 50% in 2nd quarter with balance to be
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	paid in routen quarter.
Grant Authority (Source):		Financial Reporting Method:
		□ Electronic Submission CDIP
		☑Other: MUNIS project report to be emailed to
Award Amount:		Kelsey Ruble twice yearly: by January 25, 2026 8
\$ 78011.00	Our Commonwealth	July 25, 2026.
	Commonwoolth	July 23, 2020.
Period of Award:	Commonwealth A	Evaluations:
7/1/25-6/30/26		N/A
		NA
Consortia/Partnership Member	s: N/A	
construit a the simp well bei		

Special Instructions/Conditions: District will submit request to carry over 18CM funds, along with anticipated use, to OCTE no later than July 15, 2026.

Date: 9/16/2025

Authorized By (Name, Title): Beth Hargis, Associate Comm

Name and Address of Recipient		Fund Type:
Agency Name:	Casey County Board of Education	⊠State
Street Address:	1922 N US 127	□Federal
City, State, Zip:	Liberty, KY 42539	□ Other:
UEI#:	QNJ1CVRLMK38	_ care
KDE Contact Information Program Consultant: Street Address:	Casey County Board of Education 1922 N US 127 Liberty, KY 42539 QNJ1CVRLMK38 Beth Engle 300 Sower Blvd, 5th Floor	Research and Development: ☐ Yes ☑ No
Budget Contact:	Kelsey Ruble	
Street Address:	300 Sower Blvd, 5th Floor	Method of Payment
City, State Zip:	Frankfort, KY 40601	☐ Federal Cash Request
City, State Zip.	Trankfort, KT 40001	☐ Expenditure Reimbursement
Description/Fun Source of Award	l and Fiscal Year:	⊠ Automatic Payment
Description:	l and Fiscal Year: 20% Facility Funds	□Lump Sum
Federal Award Date:	N/A	Receipt of Invoice from Vendor
Fund Source:	State Funds	
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	☐ Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	☑Other: 50% in 2 nd quarter with balance to be
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	
Grant Authority (Source):		Financial Reporting Method:
		☐ Electronic Submission CDIP
Award Amount:		☑Other: MUNIS project report to be emailed to
\$ 73714.00	()11r	Kelsey Ruble twice yearly: by January 25, 2026
\$ 73714.00	C	July 25, 2026.
Period of Award:	Our Commonwealth	
7/1/25-6/30/26	Commonwealth	Evaluations:
		N/A
Consortia/Partnership Members:	N/A	
_	7 1 2 0	7

Special Instructions/Conditions: District will submit request to carry over 18CM funds, along with anticipated use, to OCTE no later than July 15, 2026.

Date: 9/16/2025

Authorized By (Name, Title): Beth Hargis, Associate Comm

Name and Address of Recipient		Fund Type:
Agency Name:	Clark County Board of Education	⊠State
Street Address:	1600 W Lexington Ave	□Federal
City, State, Zip:	Winchester, KY 40391	□Other:
UEI#:	XUX4JJAB3QY5	
KDE Contact Information	Clark County Board of Education 1600 W Lexington Ave Winchester, KY 40391 XUX4JJAB3QY5	Research and Development:
	Beth Engle	Yes
Program Consultant: Street Address:		⊠ No
	300 Sower Blvd, 5th Floor	
Budget Contact:	Kelsey Ruble	Method of Payment
Street Address:	300 Sower Blvd, 5th Floor	☐ Federal Cash Request
City, State Zip:	Frankfort, KY 40601	Expenditure Reimbursement
Description/Fun Source of Awar	d and Fiscal Year:	∴ Automatic Payment
Description:	d and Fiscal Year: 20% Facility Funds	□Lump Sum
Federal Award Date:	N/A	□ Receipt of Invoice from Vendor
Fund Source:	State Funds	Energy of millione from vendor
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	□Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	⊠Other: 50% in 2 nd quarter with balance to be
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	paid in fourth quarter.
Grant Authority (Source):		Financial Reporting Method:
		□ Electronic Submission CDIP
		☑Other: MUNIS project report to be emailed to
Award Amount:	\bigcap	Kelsey Ruble twice yearly: by January 25, 2026 8
\$ 75740.00	Our Commonwealth	July 25, 2026.
	Commonwoolth	July 23, 2020.
Period of Award:	Commonwealth	Evaluations:
7/1/25-6/30/26		N/A
		.,,.
Consortia/Partnership Members	s: N/A	
Consider the standard of Constitution	District will submit request to carry over 18CM funds, along with anticipated use.	to OCTS are laterally are lateral 2025
Special instructions/Conditions:	DISTRICT WILL SUDMIT REQUEST TO CORRY OVER TXLIVI TUNGS, DIONG WITH ANTICINATED USE.)	IO ULI E NO INTEL TRANSIUIV 15. JUZB.

Authorized By (Name, Title): Beth Hargis, Associate Comm Date: 9/16/2025

Name and Address of Recipient		Fund Type:
Agency Name:	Clay County Board of Education	⊠State
Street Address:	128 Richmond Rd	□Federal
City, State, Zip:	Manchester, KY 40962	□Other:
UEI#:	Clay County Board of Education 128 Richmond Rd Manchester, KY 40962 PGK5M65J7A24	
_		Research and Development:
KDE Contact Information		Yes
Program Consultant:	Beth Engle	⊠ No
Street Address:	300 Sower Blvd, 5th Floor	
Budget Contact:	Kelsey Ruble	Method of Payment
Street Address:	300 Sower Blvd, 5th Floor	Federal Cash Request
City, State Zip:	Frankfort, KY 40601	☐ Expenditure Reimbursement
B	where we could be a first to the country of the cou	✓ Automatic Payment
Description/Fun Source of Award		
Description:	20,01,00	Lump Sum
Federal Award Date:	N/A	Receipt of Invoice from Vendor
Fund Source:	State Funds	
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A 18CM	Monthly
MUNIS Project Number:		Quarterly
MOA Number: Pass-through Number:	N/A N/A	☑ Other: 50% in 2 nd quarter with balance to be
		paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	
Grant Authority (Source):		Financial Reporting Method:
		□ Electronic Submission CDIP
Award Amount:		☑Other: MUNIS project report to be emailed to
\$ 43801.00	()11t	Kelsey Ruble twice yearly: by January 25, 2026 8
Ţ 15501.50		July 25, 2026.
Period of Award:	Our Commonwealth	
7/1/25-6/30/26	Commonwoulding	Evaluations:
		N/A
Consortia/Partnership Members:	N/A	
-		
Special Instructions / Conditions:	District will submit request to carry over 190M funds, along with anticipated use to	OCTE no later than July 15, 2026

Special Instructions/Conditions: District will submit request to carry over 18CM funds, along with anticipated use, to OCTE no later than July 15, 2026.

Date: 9/16/2025

Authorized By (Name, Title): Beth Hargis, Associate Comm

Name and Address of Recipient		Fund Type:
Agency Name:	Clinton County Board of Education	⊠State
Street Address:	1273 KY HWY 90 W, Suite 103	□Federal
City, State, Zip:	Albany, KY 42602	□Other:
UEI#:	N7GGS1QV1M51	
	Clinton County Board of Education 1273 KY HWY 90 W, Suite 103 Albany, KY 42602 N7GGS1QV1M51	Research and Development:
KDE Contact Information		Yes
Program Consultant:	Beth Engle	⊠ No
Street Address:	300 Sower Blvd, 5th Floor	2.10
Budget Contact:	Kelsey Ruble	Method of Payment
Street Address:	300 Sower Blvd, 5th Floor	Federal Cash Request
City, State Zip:	Frankfort, KY 40601	·
		Expenditure Reimbursement
Description/Fun Source of Award		⊠ Automatic Payment
Description:	2070 1 201111 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Lump Sum
Federal Award Date:	N/A	Receipt of Invoice from Vendor
Fund Source:	State Funds	
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	☐ Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	⊠Other: 50% in 2 nd quarter with balance to be
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	
Grant Authority (Source):		Financial Reporting Method:
		□ Electronic Submission CDIP
		☑Other: MUNIS project report to be emailed t
Award Amount:	\bigcap	Kelsey Ruble twice yearly: by January 25, 2026
\$ 68719.00	Our	July 25, 2026.
	Commonwoolth	July 23, 2020.
Period of Award:	Our Commonwealth	Evaluations:
7/1/25-6/30/26		N/A
		N/A
Consortia/Partnership Members:	N/A	
Special Instructions (Conditions	District will submit request to carry over 18CM funds, along with anticipated use, to	OCTE no lates than 100 15 2026
Special instructions/ conditions: L	nstrict win submit request to carry over 10cm junus, along with anticipated use, to	OCIE NO IULEI LIIUN JUIY 15, 2020.

Authorized By (Name, Title): Beth Hargis, Associate Comm Date: 9/16/2025

Name and Address of Recipient		Fund Type:
Agency Name:	Corbin Independent Board of Education	State
Street Address:	108 Roy Kidd Ave	
	Corbin, KY 40701	□ Federal
City, State, Zip:	COTDIN, KY 40701	□Other:
UEI#:	PUJWQQ1GE4L3	
KDE Contact Information	Corbin Independent Board of Education 108 Roy Kidd Ave Corbin, KY 40701 PUJWQQ1GE4L3	Research and Development:
Program Consultant:	Beth Engle	□ Yes
Street Address:	300 Sower Blvd, 5th Floor	⊠ No
Budget Contact:	Kelsey Ruble	
Street Address:	300 Sower Blvd, 5th Floor	Method of Payment
City, State Zip:	Frankfort, KY 40601	☐ Federal Cash Request
City, State Zip.	Halikiott, KI 40001	☐ Expenditure Reimbursement
Description/Fun Source of Award	and Fiscal Year:	⊠ Automatic Payment
Description:	and Fiscal Year: 20% Facility Funds	□Lump Sum
Federal Award Date:	N/A	☐ Receipt of Invoice from Vendor
Fund Source:	State Funds	
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	☑ Other: 50% in 2 nd quarter with balance to be
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	paid in fourth quarter.
Grant Authority (Source):	.,,,,	Financial Paparting Mothods
Grand Additionally (Godarde).		Financial Reporting Method:
		□ Electronic Submission CDIP
Award Amount:		⊠ Other: MUNIS project report to be emailed to
\$ 11396.00	Our A	Kelsey Ruble twice yearly: by January 25, 2026
	1/1	July 25, 2026.
Period of Award:	Our Commonwealth	
7/1/25-6/30/26		Evaluations:
		N/A
Consortia/Partnership Members:	N/A	
Special Instructions/Conditions: District will submit request to carry over 18CM funds, along with anticipated use, to OCTE no later than July 15, 2026.		
Authorized By (Name, Title): Beth Hargis, Associate Comm Date: 9/16/2025		

Authorized By (Name, Title): Beth Hargis, Associate Comm Office of Career & Technical Education

Name and Address of Recipient		Fund Type:
Agency Name:	Estill County Board of Education	⊠State
Street Address:	PO Box 930, 253 Main St	□Federal
City, State, Zip:	Irvine, KY 40336	□Other:
UEI#:	Estill County Board of Education PO Box 930, 253 Main St Irvine, KY 40336 XN6CKNDLVKU6	
		Research and Development:
KDE Contact Information		Yes
Program Consultant:	Beth Engle	⊠ No
Street Address:	300 Sower Blvd, 5th Floor	Z NO
Budget Contact:	Kelsey Ruble	Method of Payment
Street Address:	300 Sower Blvd, 5th Floor	-
City, State Zip:	Frankfort, KY 40601	Federal Cash Request
		Expenditure Reimbursement
Description/Fun Source of Award		⊠ Automatic Payment
Description:		Lump Sum
Federal Award Date:	N/A	Receipt of Invoice from Vendor
Fund Source:	State Funds	
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	☐ Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	⊠Other: 50% in 2 nd quarter with balance to be
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	
Grant Authority (Source):		Financial Reporting Method:
		□ Electronic Submission CDIP
		⊠Other: MUNIS project report to be emailed t
Award Amount:		Kelsey Ruble twice yearly: by January 25, 2026
\$ 74741.00	Oui	July 25, 2026.
	Commonwoolth	July 23, 2020.
Period of Award:	Our Commonwealth	Evaluations:
7/1/25-6/30/26		N/A
		N/X
Consortia/Partnership Members:	N/A	
Special Instructions /Canditions	District will submit request to correspond 19614 finds along with auticided to	OCTE no later than July 15, 2026
special instructions/conditions: L	District will submit request to carry over 18CM funds, along with anticipated use, to	OCTE NO later than July 15, 2020.

Authorized By (Name, Title): Beth Hargis, Associate Comm

Date: 9/16/2025

Name and Address of Recipient		Fund Type:
Agency Name:	Floyd County Board of Education	⊠State
Street Address:	442 KY RT 550	□Federal
City, State, Zip:	Eastern, KY 41622	□Other:
UEI#:	VLGMA3JCUXD9	
KDE Contact Information	Floyd County Board of Education 442 KY RT 550 Eastern, KY 41622 VLGMA3JCUXD9	Research and Development:
Program Consultant:	Beth Engle	Yes
Street Address:	300 Sower Blvd, 5th Floor	⊠ No
Budget Contact:	Kelsey Ruble	
Street Address:	300 Sower Blvd, 5th Floor	Method of Payment
City, State Zip:	Frankfort, KY 40601	☐ Federal Cash Request
Δ	Training IV 18882	Expenditure Reimbursement
Description/Fun Source of Awar	d and Fiscal Year:	
Description:	d and Fiscal Year: 20% Facility Funds	□Lump Sum
Federal Award Date:	N/A	Receipt of Invoice from Vendor
Fund Source:	State Funds	
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	□Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	⊠Other: 50% in 2 nd quarter with balance to be
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	
Grant Authority (Source):		Financial Reporting Method:
		□ Electronic Submission CDIP
		⊠Other: MUNIS project report to be emailed to
Award Amount:		Kelsey Ruble twice yearly: by January 25, 2026 8
\$ 45432.00	Our	July 25, 2026.
	Commonwoolth	July 29, 2020.
Period of Award:	Our Commonwealth	Evaluations:
7/1/25-6/30/26		N/A
		14/7
Consortia/Partnership Members	∷ N/A	
,		

Special Instructions/Conditions: District will submit request to carry over 18CM funds, along with anticipated use, to OCTE no later than July 15, 2026.

Date: 9/16/2025

Authorized By (Name, Title): Beth Hargis, Associate Comm

Name and Address of Recipient		Fund Type:
Agency Name:	Fulton County Board of Education	⊠State
Street Address:	2780 Moscow Ave	□Federal
City, State, Zip:	Hickman, KY 42050	□Other:
UEI#:	Fulton County Board of Education 2780 Moscow Ave Hickman, KY 42050 TZELJNJ1RP26	
	AVS CA	Research and Development:
KDE Contact Information		Yes
Program Consultant:	Beth Engle	⊠ No
Street Address:	300 Sower Blvd, 5th Floor	
Budget Contact:	Kelsey Ruble	Method of Payment
Street Address:	300 Sower Blvd, 5th Floor	Federal Cash Request
City, State Zip:	Frankfort, KY 40601	Expenditure Reimbursement
Description/Fun Source of Award	and Fiscal Vegy 1 - 1 - 1	✓ Automatic Payment
Description:	and Fiscal Year: 20% Facility Funds	Lump Sum
Federal Award Date:	N/A	Receipt of Invoice from Vendor
Fund Source:	State Funds	Receipt of invoice from vendor
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	□ Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	
Pass-through Number:	N/A	⊘Other: 50% in 2nd quarter with balance to be
Restricted Indirect Cost Rate:	N/A	paid in fourth quarter.
Grant Authority (Source):	N/A	Financial Dancasina Basahash
Grant Additiontly (Source).		Financial Reporting Method:
		□ Electronic Submission CDIP
Award Amount:		☑Other: MUNIS project report to be emailed to
\$ 4814.00	Our Commonwealth	Kelsey Ruble twice yearly: by January 25, 2026 8
	111	July 25, 2026.
Period of Award:	Commonwealth A	
7/1/25-6/30/26		Evaluations:
		N/A
Consortia/Partnership Members:	N/A	
Special Instructions/Conditions: D	sistrict will submit request to carry over 18CM funds, along with anticipated use, to	OCTE no later than July 15, 2026.

Authorized By (Name, Title): Beth Hargis, Associate Comm

Date: 9/16/2025

Name and Address of Recipient		Fund Type:
Agency Name:	Garrard County Board of Education	⊠State
Street Address:	322 W Maple Ave	□Federal
City, State, Zip:	Lancaster, KY 40444	□Other:
UEI#:	FWP9UNQJ4FR5	
1 25.6	Garrard County Board of Education 322 W Maple Ave Lancaster, KY 40444 FWP9UNQJ4FR5	Research and Development:
KDE Contact Information		Yes
Program Consultant:	Beth Engle	⊠ No
Street Address:	300 Sower Blvd, 5th Floor	
Budget Contact:	Kelsey Ruble	Method of Payment
Street Address:	300 Sower Blvd, 5th Floor	☐ Federal Cash Request
City, State Zip:	Frankfort, KY 40601	Expenditure Reimbursement
Description / France Community	- A P - 1 V - C 1 * 1 1	Automatic Payment
Description/Fun Source of Award	and Fiscal Year: 20% Facility Funds	Lump Sum
Description:		•
Federal Award Date:	N/A	Receipt of Invoice from Vendor
Fund Source:	State Funds	
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	⊠Other: 50% in 2 nd quarter with balance to be
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	
Grant Authority (Source):		Financial Reporting Method:
		☐ Electronic Submission CDIP
Assessed Assessments		☑Other: MUNIS project report to be emailed t
Award Amount:	()11r	Kelsey Ruble twice yearly: by January 25, 2026
\$ 62692.00	Our	July 25, 2026.
Period of Award:	Our Commonwealth	
7/1/25-6/30/26	Commonwealth	Evaluations:
771723-0730720		N/A
Consortia/Partnership Members:	N/A	
•		
Special Instructions/Conditions: L	District will submit request to carry over 18CM funds, along with anticipated use, to	OCTE no later than July 15, 2026.

Authorized By (Name, Title): Beth Hargis, Associate Comm Date: 9/16/2025

Name and Address of Recipient		Fund Type:
Agency Name:	Greenup County Board of Education	⊠State
Street Address:	45 Musketeer Drive	□Federal
City, State, Zip:	Greenup, KY 41144	□Other:
UEI#:	XUXNGR6NLS43	□other.
	Greenup County Board of Education 45 Musketeer Drive Greenup, KY 41144 XUXNGR6NLS43	Research and Development:
KDE Contact Information		Yes
Program Consultant:	Beth Engle	⊠ No
Street Address:	300 Sower Blvd, 5th Floor	≥ NO
Budget Contact:	Kelsey Ruble	Mathad of Payment
Street Address:	300 Sower Blvd, 5th Floor	Method of Payment
City, State Zip:	Frankfort, KY 40601	Federal Cash Request
/ A		Expenditure Reimbursement
Description/Fun Source of Award		⊠ Automatic Payment
Description:	20,01,00	Lump Sum
Federal Award Date:	N/A	Receipt of Invoice from Vendor
Fund Source:	State Funds	
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	☐ Monthly
MUNIS Project Number:	18CM	□ Quarterly
MOA Number:	N/A	⊠Other: 50% in 2 nd quarter with balance to be
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	
Grant Authority (Source):		Financial Reporting Method:
		☐ Electronic Submission CDIP
		☑Other: MUNIS project report to be emailed to
Award Amount:	Our Commonwealth	Kelsey Ruble twice yearly: by January 25, 2026
\$ 68360.00	Oui	July 25, 2026.
Period of Award:	Commonwoolth	
7/1/25-6/30/26	Commonwealth	Evaluations:
7/1/23-0/30/20		N/A
Consortia/Partnership Members:	N/A	
coc. day i ai dicionip ivicinacio.		
Special Instructions/Conditions:	District will submit request to carry over 18CM funds, along with anticinated use, to	OCTF no later than July 15, 2026.

Date: 9/16/2025

Authorized By (Name, Title): Beth Hargis, Associate Comm

Name and Address of Recipient		Fund Type:
Agency Name:	Harrison County Board of Education	⊠State
Street Address:	308 Webster Ave	□Federal
City, State, Zip:	Cynthiana, KY 41031	□Other:
UEI#:	E5MBLEYHAFK1	
KDE Contact Information	Harrison County Board of Education 308 Webster Ave Cynthiana, KY 41031 E5MBLEYHAFK1	Research and Development:
Program Consultant:	Beth Engle	Yes
Street Address:	300 Sower Blvd, 5th Floor	⊠ No
Budget Contact:	Kelsey Ruble	
Street Address:	300 Sower Blvd, 5th Floor	Method of Payment
City, State Zip:	Frankfort, KY 40601	☐ Federal Cash Request
eity, State 21p.	Trunkfort, KT 40001	☐ Expenditure Reimbursement
Description/Fun Source of Award	and Fiscal Year:	
Description:	and Fiscal Year: 20% Facility Funds	□Lump Sum
Federal Award Date:	N/A	☐ Receipt of Invoice from Vendor
Fund Source:	State Funds	·
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	□Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	State 1.7
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	
Grant Authority (Source):		Financial Reporting Method:
		Electronic Submission CDIP
		☑Other: MUNIS project report to be emailed to
Award Amount:	\bigcap	Kelsey Ruble twice yearly: by January 25, 2026 8
\$ 85045.00	Our	July 25, 2026.
Davied of Assert	Our Commonwealth	3dly 23, 2020.
Period of Award:	Commonwealth	Evaluations:
7/1/25-6/30/26		N/A
Consortia/Partnership Members:	N/A	

Special Instructions/Conditions: District will submit request to carry over 18CM funds, along with anticipated use, to OCTE no later than July 15, 2026.

Date: 9/16/2025

Authorized By (Name, Title): Beth Hargis, Associate Comm

Agency Name: Trailblazer Early College & Career Academy Board of Education Street Address: 661 Tapp Road City, State, Zip: Harrodsburg, KY 40330 UEI#: NGWTLK4XPXT1 Research and Development:	
Street Address: 661 Tapp Road City, State, Zip: Harrodsburg, KY 40330 UEI#: NGWTLK4XPXT1 □ Federal □ Other:	
City, State, Zip: Harrodsburg, KY 40330 UEI#: NGWTLK4XPXT1 □Other:	
UEI#: NGWTLK4XPXT1	
Research and Development:	
Program Consultant: Reth Engle	
Street Address: 300 Sower Blvd, 5th Floor	
Rudget Contact: Kelsey Ruble	
Street Address: 300 Sower Blvd 5th Floor	
City, State Zip: Frankfort, KY 40601 □ Federal Cash Request	
☐ Expenditure Reimbursement	
Description/Fun Source of Award and Fiscal Year: Description: 20% Facility Funds □ Lump Sum	
Description: 20% Facility Funds □ Lump Sum	
Federal Award Date: N/A □ Receipt of Invoice from Vendor	
Fund Source: State Funds	
CFDA#: N/A Reimbursement Frequency:	
PR/AWARD NUMBER (FAIN): N/A □ Monthly	
MUNIS Project Number: 18CM □ Quarterly	
MOA Number: N/A	balance to be
Pass-through Number: paid in fourth quarter.	
Restricted Indirect Cost Rate: N/A	
Grant Authority (Source): Financial Reporting Method:	
□ Electronic Submission CDIP	
○ Other: MUNIS project report to	be emailed to
Award Amount: Kelsey Ruble twice yearly: by Janu	
\$ 66067.00 July 25, 2026.	,
Award Amount: \$ 66067.00 Kelsey Ruble twice yearly: by Janu July 25, 2026. Period of Award: 7/1/25 6/20/26 Evaluations:	
7/1/23-0/30/20	
N/A	
Consortia/Partnership Members: N/A	
Special Instructions/Conditions: District will submit request to carry over 18CM funds, along with anticipated use, to OCTE no later than July 15, 2026.	

Authorized By (Name, Title): Beth Hargis, Associate Comm
Date: 9/16/2025

Name and Address of Recipient		Fund Type:
Agency Name:	Jackson County Board of Education	⊠State
Street Address:	3331 HWY 421 S	□Federal
City, State, Zip:	McKee, KY 40447	□Other:
UEI#:	NYP8GGCWHZJ3	
VDE Courts at Information	Jackson County Board of Education 3331 HWY 421 S McKee, KY 40447 NYP8GGCWHZJ3	Research and Development:
KDE Contact Information	DATE COLUMN	Yes
Program Consultant:	Beth Engle	⊠ No
Street Address:	300 Sower Blvd, 5th Floor	
Budget Contact:	Kelsey Ruble	Method of Payment
Street Address:	300 Sower Blvd, 5th Floor	☐ Federal Cash Request
City, State Zip:	Frankfort, KY 40601	☐ Expenditure Reimbursement
Description/Fun Source of Award	and Fiscal Vear	⊠Automatic Payment
Description:	and Fiscal Year: 20% Facility Funds	□Lump Sum
Federal Award Date:	N/A	Receipt of Invoice from Vendor
Fund Source:	State Funds	Zineselpt of invoice iroin venus.
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	☐ Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	Other: 50% in 2nd quarter with balance to be
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	paid in fourth quarter.
Grant Authority (Source):		Financial Reporting Method:
, \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		Electronic Submission CDIP
Award Amount:	0.40	Other: MUNIS project report to be emailed t
\$ 48762.00	Our A	Kelsey Ruble twice yearly: by January 25, 2026 July 25, 2026.
	Our Commonwealth	July 23, 2020.
Period of Award:	Commonwealth And	Evaluations:
7/1/25-6/30/26		N/A
Consortia/Partnership Members:	N/A	
Special Instructions/Conditions: L	District will submit request to carry over 18CM funds, along with anticipated use, to	OCTE no later than July 15, 2026.

Authorized By (Name, Title): Beth Hargis, Associate Comm

Date: 9/16/2025

Name and Address of Recipient		Fund Type:
Agency Name:	Knott County Board of Education	⊠State
Street Address:	PO Box 869	□Federal
City, State, Zip:	Hindman, KY 41822	□Other:
UEI#:	Knott County Board of Education PO Box 869 Hindman, KY 41822 FLM5XFNXD6V8	
		Research and Development:
KDE Contact Information		Yes
Program Consultant:	Beth Engle	⊠ No
Street Address:	300 Sower Blvd, 5th Floor	Z NO
Budget Contact:	Kelsey Ruble	Method of Payment
Street Address:	300 Sower Blvd, 5th Floor	-
City, State Zip:	Frankfort, KY 40601	Federal Cash Request
		Expenditure Reimbursement
Description/Fun Source of Award		
Description:		□Lump Sum
Federal Award Date:	N/A	Receipt of Invoice from Vendor
Fund Source:	State Funds	
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	☐ Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	⊠Other: 50% in 2 nd quarter with balance to be
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	
Grant Authority (Source):		Financial Reporting Method:
		□ Electronic Submission CDIP
		☑Other: MUNIS project report to be emailed t
Award Amount:	Ω_{110}	Kelsey Ruble twice yearly: by January 25, 2026
\$ 67595.00	Our A	July 25, 2026.
	Commonwoolth	July 23, 2020.
Period of Award:	Our Commonwealth	Evaluations:
7/1/25-6/30/26		N/A
		N/A
Consortia/Partnership Members:	N/A	
Consortia, Farthership Wellbers.		
Special Instructions/Conditions:	District will submit request to carry over 18CM funds, along with anticipated use, to	OCTE no later than July 15, 2026.

Authorized By (Name, Title): Beth Hargis, Associate Comm Date: 9/16/2025

Name and Address of Recipient		Fund Type:
Agency Name:	Lee County Board of Education	⊠State
Street Address:	242 Lee Ave	□Federal
City, State, Zip:	Beattyville, KY 41311	□Other:
UEI#:	Lee County Board of Education 242 Lee Ave Beattyville, KY 41311 QZHDX5AX3AU4	
		Research and Development:
KDE Contact Information		Yes
Program Consultant:	Beth Engle	⊠ No
Street Address:	300 Sower Blvd, 5th Floor	
Budget Contact:	Kelsey Ruble	Method of Payment
Street Address:	300 Sower Blvd, 5th Floor	Federal Cash Request
City, State Zip:	Frankfort, KY 40601	Expenditure Reimbursement
		Automatic Payment
Description/Fun Source of Award		•
Description:		Lump Sum
Federal Award Date:	N/A	Receipt of Invoice from Vendor
Fund Source:	State Funds	
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	□ Monthly □
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	Other: 50% in 2 nd quarter with balance to be
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	
Grant Authority (Source):		Financial Reporting Method:
		☐ Electronic Submission CDIP
		☑Other: MUNIS project report to be emailed to
Award Amount:	0111	Kelsey Ruble twice yearly: by January 25, 2026 &
\$ 13633.00	Our Commonwealth	July 25, 2026.
Period of Award:	Commonwoolth A	, , ,
7/1/25-6/30/26	COMMINIONEARM	Evaluations:
7/1/25-0/30/20		N/A
Consortia/Partnership Members:	N/A	
Special Instructions/Conditions:	histrict will submit request to carry over 18CM funds, along with anticinated use to	OCTE no later than July 15, 2026

Date: 9/16/2025

Authorized By (Name, Title): Beth Hargis, Associate Comm

Name and Address of Recipient		Fund Type:
Agency Name:	Leslie County Board of Education	⊠State
Street Address:	175 Eagle Ln	□Federal
City, State, Zip:	Hyden, KY 41749	□Other:
UEI#:	FRLNGLEMBRC4	
KDE Contact Information	Leslie County Board of Education 175 Eagle Ln Hyden, KY 41749 FRLNGLEMBRC4	Research and Development:
	Dath Fagle	Yes
Program Consultant: Street Address:	Beth Engle	⊠ No
	300 Sower Blvd, 5th Floor	
Budget Contact:	Kelsey Ruble	Method of Payment
Street Address:	300 Sower Blvd, 5th Floor	☐ Federal Cash Request
City, State Zip:	Frankfort, KY 40601	Expenditure Reimbursement
Description/Fun Source of Award	and Fiscal Year:	⊠Automatic Payment
Description:	and Fiscal Year: 20% Facility Funds	□Lump Sum
Federal Award Date:	N/A	Receipt of Invoice from Vendor
Fund Source:	State Funds	The conference in the control of the
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	☐ Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	Other: 50% in 2 nd quarter with balance to be
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	paid in fourth quarter.
Grant Authority (Source):		Financial Reporting Method:
		Electronic Submission CDIP
Award Amount:	0.446	☑Other: MUNIS project report to be emailed t
\$ 53146.00	Our A	Kelsey Ruble twice yearly: by January 25, 2026
	1/1	July 25, 2026.
Period of Award:	Our Commonwealth	
7/1/25-6/30/26		Evaluations:
		N/A
Consortia/Partnership Members:	N/A	
		7
Special Instructions/Conditions:	District will submit request to carry over 18CM funds, along with anticipated use, to	OCTE no later than July 15, 2026.

Authorized By (Name, Title): Beth Hargis, Associate Comm

Date: 9/16/2025

Name and Address of Recipient		Fund Type:
Agency Name:	Letcher County Board of Education 224 Parks Street Whitesburg, KY 41858 Q23NU2943MJ3	⊠State
Street Address:	224 Parks Street	□Federal
City, State, Zip:	Whitesburg, KY 41858	□Other:
UEI#:	Q23NU2943MJ3	= other.
		Research and Development:
KDE Contact Information		Yes
Program Consultant:	Beth Engle	⊠ No
Street Address:	300 Sower Blvd, 5th Floor	
Budget Contact:	Kelsey Ruble	Method of Payment
Street Address:	300 Sower Blvd, 5th Floor	Federal Cash Request
City, State Zip:	Frankfort, KY 40601	Expenditure Reimbursement
Description/Fun Source of Award		□ Automatic Payment
Description:		Lump Sum
Federal Award Date:	N/A	Receipt of Invoice from Vendor
Fund Source:	State Funds	
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	☑ Other: 50% in 2 nd quarter with balance to be
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	
Grant Authority (Source):		Financial Reporting Method:
		☐ Electronic Submission CDIP
Award Amount:		☑Other: MUNIS project report to be emailed t
\$ 85852.00	Our Commonwealth	Kelsey Ruble twice yearly: by January 25, 2026
7 03032.00	Our	July 25, 2026.
Period of Award:	Commonwealth A	
7/1/25-6/30/26	Commonwealth	Evaluations:
		N/A
Consortia/Partnership Members:	N/A	
Special Instructions/Conditions:	District will submit request to carry over 18CM funds, along with anticipated use, to	OCTE no later than July 15, 2026.
Authorized By (Name, Title): Beth	h Hargis, Associate Comm Date: 9/16/2025	

Authorized By (Name, Title): Beth Hargis, Associate Comm Office of Career & Technical Education

Name and Address of Recipient		Fund Type:
Agency Name:	Lincoln County Board of Education	⊠State
Street Address:	305 Danville Avenue	□Federal
City, State, Zip:	Lincoln County Board of Education 305 Danville Avenue Stanford, KY 40484 CPDJWGTATCD5	□Other:
UEI#:	CPDJWGTATCD5	=other.
		Research and Development:
KDE Contact Information		Yes
Program Consultant:	Beth Engle	⊠ No
Street Address:	300 Sower Blvd, 5th Floor	≥ NO
Budget Contact:	Kelsey Ruble	Method of Payment
Street Address:	300 Sower Blvd, 5th Floor	-
City, State Zip:	Frankfort, KY 40601	Federal Cash Request
		Expenditure Reimbursement
Description/Fun Source of Award		⊠ Automatic Payment
Description:		Lump Sum
Federal Award Date:	N/A	Receipt of Invoice from Vendor
Fund Source:	State Funds	
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	☐ Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	⊠Other: 50% in 2 nd quarter with balance to be
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	
Grant Authority (Source):		Financial Reporting Method:
		□ Electronic Submission CDIP
		☑Other: MUNIS project report to be emailed to
Award Amount:		Kelsey Ruble twice yearly: by January 25, 2026 &
\$ 38236.00	Our Commonwealth	July 25, 2026.
Davie de f Assessado	Commonwoolth	341, 23, 2323.
Period of Award:	Commonwealth	Evaluations:
7/1/25-6/30/26		N/A
	N/A	
Consortia/Partnership Members:	N/A	

Special Instructions/Conditions: District will submit request to carry over 18CM funds, along with anticipated use, to OCTE no later than July 15, 2026.

Date: 9/16/2025

Authorized By (Name, Title): Beth Hargis, Associate Comm

Name and Address of Recipient		Fund Type:
Agency Name:	Marion County Board of Education 755 E Main St Lebanon, KY 40033 J21FW94LPDK3	⊠State
Street Address:	755 E Main St	□Federal
City, State, Zip:	Lebanon, KY 40033	□Other:
UEI#:	J21FW94LPDK3	= other:
		Research and Development:
KDE Contact Information		Yes
Program Consultant:	Beth Engle	⊠ No
Street Address:	300 Sower Blvd, 5th Floor	Z NO
Budget Contact:	Kelsey Ruble	Method of Payment
Street Address:	300 Sower Blvd, 5th Floor	-
City, State Zip:	Frankfort, KY 40601	Federal Cash Request
		Expenditure Reimbursement
Description/Fun Source of Award		⊠ Automatic Payment
Description:		Lump Sum
Federal Award Date:	N/A	Receipt of Invoice from Vendor
Fund Source:	State Funds	
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	☐ Monthly
MUNIS Project Number:	18CM	□ Quarterly
MOA Number:	N/A	⊠Other: 50% in 2 nd quarter with balance to be
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	
Grant Authority (Source):		Financial Reporting Method:
		☐ Electronic Submission CDIP
		⊠Other: MUNIS project report to be emailed t
Award Amount:	O11#	Kelsey Ruble twice yearly: by January 25, 2026
\$ 81033.00	Our	July 25, 2026.
Period of Award:	Our Commonwealth	, ,
7/1/25-6/30/26	Commonwealth	Evaluations:
7/1/23-0/30/20		N/A
Consortia/Partnership Members:	N/A	
Special Instructions/Conditions: D	District will submit request to carry over 18CM funds, along with anticipated use, to	OCTE no later than July 15, 2026.

Authorized By (Name, Title): Beth Hargis, Associate Comm

Date: 9/16/2025

Name and Address of Recipient		Fund Type:
Agency Name:	Martin County Board of Education	⊠State
Street Address:	Martin County Board of Education PO Box 366 Inez, KY 41224 H9J5LKGKZ7D2	□Federal
City, State, Zip:	Inez, KY 41224	□Other:
UEI#:	H9J5LKGKZ7D2	□otilei.
		Research and Development:
KDE Contact Information		Yes
Program Consultant:	Beth Engle	⊠ No
Street Address:	300 Sower Blvd, 5th Floor	△ NO
Budget Contact:	Kelsey Ruble	Maked of Downson
Street Address:	300 Sower Blvd, 5th Floor	Method of Payment
City, State Zip:	Frankfort, KY 40601	Federal Cash Request
		Expenditure Reimbursement
Description/Fun Source of Award		
Description:	2070 1 201111 1 201120	□Lump Sum
Federal Award Date:	N/A	Receipt of Invoice from Vendor
Fund Source:	State Funds	
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	☐ Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	☑Other: 50% in 2 nd quarter with balance to be
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	
Grant Authority (Source):		Financial Reporting Method:
		□ Electronic Submission CDIP
		☑Other: MUNIS project report to be emailed t
Award Amount:	0110	Kelsey Ruble twice yearly: by January 25, 2026
\$ 52495.00	Oui	July 25, 2026.
Devied of Asserts	Our Commonwealth	3.0.7
Period of Award:	Commonwealth	Evaluations:
7/1/25-6/30/26		N/A
Consortio / Doute oughin Monthous	NI/A	
Consortia/Partnership Members:	N/A	
Special Instructions/Conditions:	District will submit request to carry over 18CM funds, along with anticipated use, to	OCTE no later than July 15, 2026.
	The second secon	22.2
Authorized By (Name, Title): Beth	n Hargis, Associate Comm Date: 9/16/2025	

Authorized By (Name, Title): Beth Hargis, Associate Comm Office of Career & Technical Education

Name and Address of Recipient		Fund Type:
Agency Name:	Mason County Board of Education	⊠State
Street Address:	34 East Second Street	□Federal
City, State, Zip:	Maysville, KY 41056	□Other:
UEI#:	JKWGFLXVCDS3	
	Mason County Board of Education 34 East Second Street Maysville, KY 41056 JKWGFLXVCDS3	Research and Development:
KDE Contact Information		□ Yes
Program Consultant:	Beth Engle	⊠ No
Street Address:	300 Sower Blvd, 5th Floor	
Budget Contact:	Kelsey Ruble	Method of Payment
Street Address:	300 Sower Blvd, 5th Floor	☐ Federal Cash Request
City, State Zip:	Frankfort, KY 40601	☐ Expenditure Reimbursement
Description/Fun Source of Awa	ard and Fiscal Voors	
Description:	and Fiscal Year: 20% Facility Funds	□Lump Sum
Federal Award Date:	N/A	Receipt of Invoice from Vendor
Fund Source:	State Funds	The copy of invoice from vendor
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	□ Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	Souther: 50% in 2 nd quarter with balance to be
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	paid in fourth quarter.
Grant Authority (Source):		Financial Reporting Method:
,,		Electronic Submission CDIP
		☑Other: MUNIS project report to be emailed t
Award Amount:	0	Kalsay Bubba twisa yaarbu bu lanyary 25, 2026
\$ 88069.00	Our Our	Kelsey Ruble twice yearly: by January 25, 2026 July 25, 2026.
	Our Commonwealth	July 25, 2026.
Period of Award:	Commonwealth	Evaluations:
7/1/25-6/30/26		N/A
		14/17
Consoutio / Double suchin Marris	ma N/A	
Consortia/Partnership Member	TS: IV/A	
Special Instructions/Conditions	s: District will submit request to carry over 18CM funds, along with antic	ipated use, to OCTE no later than July 15, 2026.

Authorized By (Name, Title): Beth Hargis, Associate Comm

Date: 9/16/2025

Name and Address of Recipient		Fund Type:
-	Mayfield Independent Board of Education	
Agency Name: Street Address:		⊠ State
	914 E College St	□ Federal
City, State, Zip:	Mayfield, KY 42066	□Other:
UEI#:	NMMEWKCCDGR1	
KDE Contact Information		Research and Development:
Program Consultant:	Beth Engle	□ Yes
Street Address:	300 Sower Blvd, 5th Floor	⊠ No
Budget Contact:	Kelsey Ruble	
Street Address:	300 Sower Blvd, 5th Floor	Method of Payment
City, State Zip:	Frankfort, KY 40601	☐ Federal Cash Request
City, State Zip.	Fidikioti, KY 40001	☐ Expenditure Reimbursement
Description/Fun Source of Award	and Fiscal Year:	⊠ Automatic Payment
Description:	and Fiscal Year: 20% Facility Funds	□Lump Sum
Federal Award Date:	N/A	Receipt of Invoice from Vendor
Fund Source:	State Funds	Energy in the new vender
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	□ Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	☑ Other: 50% in 2 nd quarter with balance to be
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	paid in fourth quarter.
Grant Authority (Source):		Financial Bonosting Mothods
Grant Hatherity (Source).		Financial Reporting Method:
		□ Electronic Submission CDIP
Award Amount:		☑Other: MUNIS project report to be emailed to
\$ 69486.00	Our A	Kelsey Ruble twice yearly: by January 25, 2026 8
	111	July 25, 2026.
Period of Award:	Our Commonwealth	
7/1/25-6/30/26		Evaluations:
		N/A
Consortia/Partnership Members:	N/A	
Special Instructions/Conditions:	District will submit request to carry over 18CM funds, along with anticipated use, to	OCTE no later than July 15, 2026.
Authorized By (Name, Title): Bet	h Hargis, Associate Comm Date: 9/16/2025	

Name and Address of Recipient		Fund Type:
Agency Name:	Meade County Board of Education	⊠State
Street Address:	1155 Old Ekron Rd	□Federal
City, State, Zip:	Brandenburg, KY 40108	□Other:
UEI#:	Meade County Board of Education 1155 Old Ekron Rd Brandenburg, KY 40108 G9KMH68NZPN5	Doner.
		Research and Development:
KDE Contact Information		Yes
Program Consultant:	Beth Engle	⊠ No
Street Address:	300 Sower Blvd, 5th Floor	Z NO
Budget Contact:	Kelsey Ruble	Method of Payment
Street Address:	300 Sower Blvd, 5th Floor	Federal Cash Request
City, State Zip:	Frankfort, KY 40601	·
		Expenditure Reimbursement
Description/Fun Source of Award		□ Automatic Payment
Description:	2070 Facility Farinas	Lump Sum
Federal Award Date:	N/A	Receipt of Invoice from Vendor
Fund Source:	State Funds	
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	□Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	Other: 50% in 2 nd quarter with balance to be
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	
Grant Authority (Source):		Financial Reporting Method:
		☐ Electronic Submission CDIP
Award Amount:		☑Other: MUNIS project report to be emailed t
\$ 102438.00	()11t	Kelsey Ruble twice yearly: by January 25, 2026
\$ 102458.00	Our	July 25, 2026.
Period of Award:	Our Commonwealth	
7/1/25-6/30/26	Commonwealth	Evaluations:
		N/A
Consortia/Partnership Members:	N/A	
		7
Special Instructions /Conditions	District will submit request to sarry over 190M funds, along with anticipated use to	OCTE no later than July 15, 2026

Special Instructions/Conditions: District will submit request to carry over 18CM funds, along with anticipated use, to OCTE no later than July 15, 2026.

Date: 9/16/2025

Authorized By (Name, Title): Beth Hargis, Associate Comm

Name and Address of Recipient		Fund Type:
Agency Name:	Monroe County Board of Education	⊠State
Street Address:	309 Emberton Street	□Federal
City, State, Zip:	Tompkinsville, KY 42167	□Other:
UEI#:	GTKFHC6RE3N3	
	Monroe County Board of Education 309 Emberton Street Tompkinsville, KY 42167 GTKFHC6RE3N3	Research and Development:
KDE Contact Information		□Yes
Program Consultant:	Beth Engle	⊠ No
Street Address:	300 Sower Blvd, 5th Floor	
Budget Contact:	Kelsey Ruble	Method of Payment
Street Address:	300 Sower Blvd, 5th Floor	☐ Federal Cash Request
City, State Zip:	Frankfort, KY 40601	☐ Expenditure Reimbursement
Description/Fun Source of Award	and Fiscal Voar	
Description:	d and Fiscal Year: 20% Facility Funds	□Lump Sum
Federal Award Date:	N/A	Receipt of Invoice from Vendor
Fund Source:	State Funds	
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	□Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	Solution Solution Notes Solution Sol
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	paid in fourth quarter.
Grant Authority (Source):		Financial Reporting Method:
,		Electronic Submission CDIP
		Souther: MUNIS project report to be emailed to
Award Amount:		Kelsey Ruble twice yearly: by January 25, 2026 8
\$ 72888.00	Our Commonwealth	July 25, 2026.
	Commonwoolth	July 23, 2020.
Period of Award:		Evaluations:
7/1/25-6/30/26		N/A
		N/A
Consortia/Partnership Members	: N/A	
•		
Special Instructions/Conditions:	District will submit request to carry over 18CM funds, along with anticipated use, t	o OCTE no later than July 15, 2026.

Authorized By (Name, Title): Beth Hargis, Associate Comm

Date: 9/16/2025

Name and Address of Recipient		Fund Type:
Agency Name:	Montgomery County Board of Education	⊠State
Street Address:	3400 Indian Mound Dr	□Federal
City, State, Zip:	Mt Sterling, KY 40353	□Other:
UEI#:	KEDEUKLPQJM6	
KDE Contact Information	Montgomery County Board of Education 3400 Indian Mound Dr Mt Sterling, KY 40353 KEDEUKLPQJM6	Research and Development:
Program Consultant:	Beth Engle	Yes
Street Address:	300 Sower Blvd, 5th Floor	⊠ No
Budget Contact:	Kelsey Ruble	
Street Address:	300 Sower Blvd, 5th Floor	Method of Payment
City, State Zip:	Frankfort, KY 40601	☐ Federal Cash Request
City, State Zip.	Trankfort, KT 40001	☐ Expenditure Reimbursement
Description/Fun Source of Award	and Fiscal Year:	⊠ Automatic Payment
Description:	and Fiscal Year: 20% Facility Funds	□Lump Sum
Federal Award Date:	N/A	Receipt of Invoice from Vendor
Fund Source:	State Funds	(in the second
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	□Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	Solution Solution
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	para in routin quarter.
Grant Authority (Source):		Financial Reporting Method:
, ,		Electronic Submission CDIP
		☑Other: MUNIS project report to be emailed to
Award Amount:	Out	Kelsey Ruble twice yearly: by January 25, 2026 &
\$ 68737.00	Our Commonwealth	July 25, 2026.
	Company of 14h	July 23, 2020.
Period of Award:	Commonwealth A	Evaluations:
7/1/25-6/30/26		N/A
		19/0
Consortia/Partnership Members:	N/Δ	
Consortia/ Farthership Wembers:		
6	and the second s	0.075

Special Instructions/Conditions: District will submit request to carry over 18CM funds, along with anticipated use, to OCTE no later than July 15, 2026.

Date: 9/16/2025

Authorized By (Name, Title): Beth Hargis, Associate Comm

Name and Address of Recipient		Fund Type:
Agency Name:	Morgan County Board of Education	⊠State
Street Address:	155 University Dr	□Federal
City, State, Zip:	West Liberty, KY 41472	□Other:
UEI#:	H49MLFMXZG83	
KDE Contact Information	Morgan County Board of Education 155 University Dr West Liberty, KY 41472 H49MLFMXZG83	Research and Development:
		Yes
Program Consultant:	Beth Engle	⊠ No
Street Address:	300 Sower Blvd, 5th Floor	
Budget Contact:	Kelsey Ruble	Method of Payment
Street Address:	300 Sower Blvd, 5th Floor	☐ Federal Cash Request
City, State Zip:	Frankfort, KY 40601	Expenditure Reimbursement
Description/Fun Source of Award	and Fiscal Year:	✓ Automatic Payment
Description:	and Fiscal Year: 20% Facility Funds	□Lump Sum
Federal Award Date:	N/A	Receipt of Invoice from Vendor
Fund Source:	State Funds	
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	□Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	Other: 50% in 2 nd quarter with balance to be
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	
Grant Authority (Source):		Financial Reporting Method:
		□ Electronic Submission CDIP
		☑Other: MUNIS project report to be emailed to
Award Amount:	\bigcap	Kelsey Ruble twice yearly: by January 25, 2026 &
\$ 48848.00	Our Commonwealth	July 25, 2026.
Period of Award:	Commonwealth A	33, 23, 2323
7/1/25-6/30/26	Commonwealth	Evaluations:
1/1/23 0/30/20		N/A
Consortia/Partnership Members:	N/A	
Special Instructions/Conditions: D	sistrict will submit request to carry over 18CM funds, along with anticipated use, to	OCTE no later than July 15, 2026.

Authorized By (Name, Title): Beth Hargis, Associate Comm

Date: 9/16/2025

Name and Address of Desirious	Frank Trans.
Name and Address of Recipient Agency Name: Murray Independent Boar	Fund Type: rd of Education State
Street Address: 208 S 13th ST	
	□Federal
City, State, Zip: Murray, KY 42071 UEI#: JJ2VNB2CTH69	State Federal Other: Research and Development: Yes
OLI#. JJZVINDZCITIOS	
KDE Contact Information	Research and Development:
Program Consultant: Beth Engle	
Street Address: 300 Sower Blvd, 5th Floor	⊠ No
Budget Contact: Kelsey Ruble	
Street Address: 300 Sower Blvd, 5th Floor	Method of Payment
City, State Zip: Frankfort, KY 40601	☐ Federal Cash Request
A Manual Lip.	☐ Expenditure Reimbursement
Description/Fun Source of Award and Fiscal Year:	Automatic Payment
Description: 20% Facility Funds	□ Lump Sum
Federal Award Date: N/A	☐ Receipt of Invoice from Vendor
Fund Source: State Funds	
CFDA#: N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN): N/A	□Monthly
MUNIS Project Number: 18CM	Quarterly
MOA Number: N/A	☑ Other: 50% in 2 nd quarter with balance to be
Pass-through Number: N/A	paid in fourth quarter.
Restricted Indirect Cost Rate: N/A	
Grant Authority (Source):	Financial Reporting Method:
	Electronic Submission CDIP
	☑Other: MUNIS project report to be emailed to
Award Amount:	Kelsey Ruble twice yearly: by January 25, 2026 8
\$ 97993.00	July 25, 2026.
Partial of Assessed	Kelsey Ruble twice yearly: by January 25, 2026 & July 25, 2026.
Period of Award:	Evaluations:
7/1/25-6/30/26	N/A
	14,77
Consortie / Doute oughin Monthouse N/A	
Consortia/Partnership Members: N/A	
Special Instructions/Conditions: District will submit request t	o carry over 18CM funds, along with anticipated use, to OCTE no later than July 15, 2026.

Authorized By (Name, Title): Beth Hargis, Associate Comm

Date: 9/16/2025

Name and Address of Recipient		Fund Type:
Agency Name:	Ohio County Board of Education	⊠State
Street Address:	315 E Union Street	□Federal
City, State, Zip:	Hartford, KY 42347	□Other:
UEI#:	LA8BK54J3FU7	
	Ohio County Board of Education 315 E Union Street Hartford, KY 42347 LA8BK54J3FU7	Research and Development:
KDE Contact Information		Yes
Program Consultant:	Beth Engle	⊠ No
Street Address:	300 Sower Blvd, 5th Floor	
Budget Contact:	Kelsey Ruble	Method of Payment
Street Address:	300 Sower Blvd, 5th Floor	Federal Cash Request
City, State Zip:	Frankfort, KY 40601	Expenditure Reimbursement
Description/Fun Source of Award	and Figgs Veggs 1. 1.1	✓ Automatic Payment
Description:	and Fiscal Year: 20% Facility Funds	Lump Sum
Federal Award Date:	N/A	Receipt of Invoice from Vendor
Fund Source:	State Funds	Receipt of invoice from vehicor
CFDA#:	N/A	Daimburgament Francisco
PR/AWARD NUMBER (FAIN):	N/A N/A	Reimbursement Frequency:
MUNIS Project Number:	18CM	Monthly
MOA Number:	N/A	Quarterly
Pass-through Number:	N/A	☑Other: 50% in 2 nd quarter with balance to be
Restricted Indirect Cost Rate:	N/A	paid in fourth quarter.
Grant Authority (Source):	NA	e: 115 10 1
Grant Authority (Source).		Financial Reporting Method:
		□ Electronic Submission CDIP
Award Amount:		☑Other: MUNIS project report to be emailed to
\$ 65345.00	Our Commonwealth	Kelsey Ruble twice yearly: by January 25, 2026
	111	July 25, 2026.
Period of Award:	Commonwealth A	/
7/1/25-6/30/26		Evaluations:
		N/A
Consortia/Partnership Members:	N/A	
Special Instructions/Conditions: L	District will submit request to carry over 18CM funds, along with anticipated use, to	OCTE no later than July 15, 2026.

Authorized By (Name, Title): Beth Hargis, Associate Comm Date: 9/16/2025

Name and Address of Recipient		Fund Type:
Agency Name:	Paducah Independent Board of Education	⊠State
Street Address:	PO Box 2550	☐ Federal
City, State, Zip:	Paducah, KY 42002	
UEI#:	Paducah Independent Board of Education PO Box 2550 Paducah, KY 42002 ZNX2MSYZL2H7	□Other:
OLIII.	ZIVIZIVISIZEZITI	Bassauch and Davidson anti-
KDE Contact Information		Research and Development: Yes
Program Consultant:	Beth Engle	
Street Address:	300 Sower Blvd, 5th Floor	⊠ No
Budget Contact:	Kelsey Ruble	
Street Address:	300 Sower Blvd, 5th Floor	Method of Payment
City, State Zip:	Frankfort, KY 40601	Federal Cash Request
,, , , , , , , , , , , , , , , , , , ,		☐ Expenditure Reimbursement
Description/Fun Source of Award	and Fiscal Year:	
Description:	20% Facility Funds	□ Lump Sum
Federal Award Date:	N/A	☐ Receipt of Invoice from Vendor
Fund Source:	State Funds	
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	☐ Monthly
MUNIS Project Number:	18CM	□ Quarterly
MOA Number:	N/A	☑Other: 50% in 2 nd quarter with balance to be
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	
Grant Authority (Source):		Financial Reporting Method:
		□ Electronic Submission CDIP
		☑Other: MUNIS project report to be emailed to
Award Amount:	Our Commonwealth	Kelsey Ruble twice yearly: by January 25, 2026
\$ 61096.00	Oul	July 25, 2026.
	Commonwoolth	3d., 25, 2525.
Period of Award:	Commonwealth	Evaluations:
7/1/25-6/30/26		N/A
Consortio / Double and in RC	N/A	
Consortia/Partnership Members:	N/A	
Special Instructions/Conditions:	District will submit request to carry over 18CM funds, along with anticipated use, to	OCTE no later than July 15, 2026
Special matractions, conditions.	sistifict will subtilit request to carry over 10cm julius, along with unticipated use, to	OCIL NO later than July 13, 2020.

Authorized By (Name, Title): Beth Hargis, Associate Comm Date: 9/16/2025

Name and Address of Recipient		Fund Type:
Agency Name:	Pulaski County Board of Education	⊠State
Street Address:	501 University Dr	□Federal
City, State, Zip:	Somerset, KY 42502	□Other:
UEI#:	GM2GFQZJJ4J6	
	Pulaski County Board of Education 501 University Dr Somerset, KY 42502 GM2GFQZJJ4J6	Research and Development:
KDE Contact Information		☐ Yes
Program Consultant:	Beth Engle	⊠ No
Street Address:	300 Sower Blvd, 5th Floor	
Budget Contact:	Kelsey Ruble	Method of Payment
Street Address:	300 Sower Blvd, 5th Floor	☐ Federal Cash Request
City, State Zip:	Frankfort, KY 40601	☐ Expenditure Reimbursement
Description/Fun Source of Award	d and Fiscal Vear	
Description:	d and Fiscal Year: 20% Facility Funds	□Lump Sum
Federal Award Date:	N/A	☐ Receipt of Invoice from Vendor
Fund Source:	State Funds	
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	□Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	Solution
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	paid in fourth quarter.
Grant Authority (Source):		Financial Reporting Method:
		□ Electronic Submission CDIP
		Some Submission Con Submission S
Award Amount:	Ω_{440}	Kelsey Ruble twice yearly: by January 25, 2026 8
\$ 67757.00	Our Commonwealth	July 25, 2026.
	Commonwoolth	July 23, 2020.
Period of Award:	Commonwealth	Evaluations:
7/1/25-6/30/26		N/A
		New
Consortia/Partnership Members	: N/A	
Consider the standard of Constitutions		OCTE no later than July 15, 2025
special instructions/conditions:	District will submit request to carry over 18CM funds, along with anticipated use, t	o OCTE no later than July 15, 2026.

Authorized By (Name, Title): Beth Hargis, Associate Comm

Date: 9/16/2025

Name and Address of Recipient		Fund Type:
Agency Name:	Rockcastle County Board of Education	⊠State
Street Address:	245 Richmond St	□Federal
City, State, Zip:	Mt Vernon, KY 40456	□Other:
UEI#:	JN33NX6AN3N1	
KDE Contact Information	Rockcastle County Board of Education 245 Richmond St Mt Vernon, KY 40456 JN33NX6AN3N1	Research and Development:
	Deale French	Yes
Program Consultant:	Beth Engle	⊠ No
Street Address:	300 Sower Blvd, 5th Floor	
Budget Contact:	Kelsey Ruble	Method of Payment
Street Address:	300 Sower Blvd, 5th Floor	☐ Federal Cash Request
City, State Zip:	Frankfort, KY 40601	Expenditure Reimbursement
Description/Fun Source of Award	and Fiscal Year:	⊠Automatic Payment
Description:	and Fiscal Year: 20% Facility Funds	□Lump Sum
Federal Award Date:	N/A	☐Receipt of Invoice from Vendor
Fund Source:	State Funds	
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	□Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	State State Sta
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	
Grant Authority (Source):		Financial Reporting Method:
		Electronic Submission CDIP
		☑Other: MUNIS project report to be emailed t
Award Amount:		Kelsey Ruble twice yearly: by January 25, 2026
\$ 66298.00	Our	July 25, 2026.
Period of Award:	Our Commonwealth	• • •
7/1/25-6/30/26	Commonwealth	Evaluations:
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		N/A
Consortia/Partnership Members:	N/A	
Special Instructions/Conditions:	District will submit request to carry over 18CM funds, along with anticipated use, to	OCTE no later than July 15, 2026.

Authorized By (Name, Title): Beth Hargis, Associate Comm

Date: 9/16/2025

Name and Address of Recipient		Fund Type:
Agency Name:	Lake Cumberland ATC Board of Education	⊠State
Street Address:	2330 HWY 127 S	□Federal
City, State, Zip:	Russell Springs, KY 42642	□Other:
UEI#:	JLZPL1Q4YF83	
WD5.0	Lake Cumberland ATC Board of Education 2330 HWY 127 S Russell Springs, KY 42642 JLZPL1Q4YF83	Research and Development:
KDE Contact Information		Yes
Program Consultant:	Beth Engle	⊠ No
Street Address:	300 Sower Blvd, 5th Floor	
Budget Contact:	Kelsey Ruble	Method of Payment
Street Address:	300 Sower Blvd, 5th Floor	☐ Federal Cash Request
City, State Zip:	Frankfort, KY 40601	☐ Expenditure Reimbursement
Description/Fun Source of Award	and Fiscal Vear	
Description:	and Fiscal Year: 20% Facility Funds	□Lump Sum
Federal Award Date:	N/A	Receipt of Invoice from Vendor
Fund Source:	State Funds	Zineselpt of im once from veridor
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	□ Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	Other: 50% in 2nd quarter with balance to be
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	para in routen quarter.
Grant Authority (Source):		Financial Reporting Method:
		Electronic Submission CDIP
		☑Other: MUNIS project report to be emailed to
Award Amount:	Ω_{110}	Kelsey Ruble twice yearly: by January 25, 2026 8
\$ 75243.00	Our	July 25, 2026.
Davied of Assert	Our Commonwealth	3a., 23, 2323.
Period of Award:	Commonwealth	Evaluations:
7/1/25-6/30/26		N/A
Consortia/Partnership Members:	N/A	
Special Instructions/Conditions: D	District will submit request to carry over 18CM funds, along with anticipated use, to	OCTE no later than July 15, 2026.
Authorized By (Name, Title): Beth	Hargis, Associate Comm Date: 9/16/2025	

Authorized By (Name, Title): Beth Hargis, Associate Comm Office of Career & Technical Education

Name and Address of Recipient		Fund Type:
Agency Name:	Russell County Board of Education	⊠State
Street Address:	404 S Main St	□Federal
City, State, Zip:	Jamestown, KY 42629	□Other:
UEI#:	Russell County Board of Education 404 S Main St Jamestown, KY 42629 JLZPL1Q4YF83	
	AVS CS	Research and Development:
KDE Contact Information		Yes
Program Consultant:	Beth Engle	⊠ No
Street Address:	300 Sower Blvd, 5th Floor	
Budget Contact:	Kelsey Ruble	Method of Payment
Street Address:	300 Sower Blvd, 5th Floor	☐ Federal Cash Request
City, State Zip:	Frankfort, KY 40601	Expenditure Reimbursement
Description / France of Assert	and Floor Man O 1 1 1	Automatic Payment
Description/Fun Source of Award	and Fiscal Year: 20% Facility Funds	Lump Sum
Description: Federal Award Date:	N/A	•
Fund Source:	State Funds	Receipt of Invoice from Vendor
CFDA#:	N/A	Poimburcoment Fraguency
PR/AWARD NUMBER (FAIN):	N/A N/A	Reimbursement Frequency:
MUNIS Project Number:	18CM	Monthly
MOA Number:	N/A	Quarterly
Pass-through Number:	N/A	Other: 50% in 2 nd quarter with balance to be
Restricted Indirect Cost Rate:	N/A	paid in fourth quarter.
Grant Authority (Source):	N/A	Financial Barrania and atherds
Grant Authority (Source).		Financial Reporting Method:
		□ Electronic Submission CDIP
Award Amount:		⊠Other: MUNIS project report to be emailed t
\$ 66053.00	Our	Kelsey Ruble twice yearly: by January 25, 2026
	Our Commonwealth	July 25, 2026.
Period of Award:	Commonwealth A	
7/1/25-6/30/26		Evaluations:
		N/A
Consortia/Partnership Members:	N/A	
Special Instructions/Conditions: L	District will submit request to carry over 18CM funds, along with anticipated use, to	UCIE no later than July 15, 2026.

Authorized By (Name, Title): Beth Hargis, Associate Comm Date: 9/16/2025

Name and Address of Recipient		Fund Type:
Agency Name:	Logan Co ATC Board of Education	⊠State
Street Address:	2222 Bowling Green Road	□Federal
City, State, Zip:	Russellville, KY 42276	□Other:
UEI#:	U59KWNZ5JWC8	
	Logan Co ATC Board of Education 2222 Bowling Green Road Russellville, KY 42276 U59KWNZ5JWC8	Research and Development:
KDE Contact Information		Yes
Program Consultant:	Beth Engle	⊠ No
Street Address:	300 Sower Blvd, 5th Floor	
Budget Contact:	Kelsey Ruble	Method of Payment
Street Address:	300 Sower Blvd, 5th Floor	Federal Cash Request
City, State Zip:	Frankfort, KY 40601	Expenditure Reimbursement
	01 11 1	✓ Automatic Payment
Description/Fun Source of Award		
Description:	=576 1 0.0007 1 0.0005	Lump Sum
Federal Award Date:	N/A	Receipt of Invoice from Vendor
Fund Source:	State Funds	
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	Other: 50% in 2 nd quarter with balance to be
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	
Grant Authority (Source):		Financial Reporting Method:
		☐ Electronic Submission CDIP
Award Amount:		☑Other: MUNIS project report to be emailed t
	()11r	Kelsey Ruble twice yearly: by January 25, 2026
\$ 111637.00	Our	July 25, 2026.
Period of Award:	Our Commonwealth	
7/1/25-6/30/26	Commonwealth	Evaluations:
, , = =, = =,		N/A
Consortia/Partnership Members:	N/A	
Special Instructions/Conditions:	District will submit request to carry over 18CM funds, along with anticipated use, to	OCTE no later than July 15, 2026.

Authorized By (Name, Title): Beth Hargis, Associate Comm

Date: 9/16/2025

Name and Address of Recipient		Fund Type:
Agency Name:	Shelby County Board of Education	⊠State
Street Address:	155 West Main Street	□Federal
City, State, Zip:	Shelbyville, KY 40066	□Other:
UEI#:	MZ3EVRJQ6MD1	_ 56
	Shelby County Board of Education 155 West Main Street Shelbyville, KY 40066 MZ3EVRJQ6MD1	Research and Development:
KDE Contact Information		Yes
Program Consultant:	Beth Engle	⊠ No
Street Address:	300 Sower Blvd, 5th Floor	2110
Budget Contact:	Kelsey Ruble	Method of Payment
Street Address:	300 Sower Blvd, 5th Floor	Federal Cash Request
City, State Zip:	Frankfort, KY 40601	·
		Expenditure Reimbursement
Description/Fun Source of Award		
Description:		□Lump Sum
Federal Award Date:	N/A	Receipt of Invoice from Vendor
Fund Source:	State Funds	
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	☐ Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	⊠Other: 50% in 2 nd quarter with balance to be
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	
Grant Authority (Source):		Financial Reporting Method:
		□ Electronic Submission CDIP
		☑Other: MUNIS project report to be emailed t
Award Amount:		Kelsey Ruble twice yearly: by January 25, 2026
\$ 112151.00	Oui	July 25, 2026.
	Our Commonwealth	suly 23, 2020.
Period of Award:	Commonwealth	Evaluations:
7/1/25-6/30/26		N/A
		N/A
	11/4	
Consortia/Partnership Members:	N/A	
Special Instructions/Conditions:	District will submit request to carry over 18CM funds, along with anticipated use to	OCTE no later than July 15, 2026

Special Instructions/Conditions: District will submit request to carry over 18CM funds, along with anticipated use, to OCTE no later than July 15, 2026

Authorized By (Name, Title): Beth Hargis, Associate Comm Date: 9/16/2025

Name and Address of Recipient		Fund Type:
Agency Name:	Warren County Board of Education 303 Lovers Lane Bowling Green, KY 42103 MMVUBL3ECMX4	⊠State
Street Address:	303 Lovers Lane	□Federal
City, State, Zip:	Bowling Green, KY 42103	□Other:
UEI#:	MMVUBL3ECMX4	
		Research and Development:
KDE Contact Information		Yes
Program Consultant:	Beth Engle	⊠ No
Street Address:	300 Sower Blvd, 5th Floor	
Budget Contact:	Kelsey Ruble	Method of Payment
Street Address:	300 Sower Blvd, 5th Floor	Federal Cash Request
City, State Zip:	Frankfort, KY 40601	Expenditure Reimbursement
	01 11 1	•
Description/Fun Source of Award		☑ Automatic Payment
Description:		Lump Sum
Federal Award Date:	N/A	Receipt of Invoice from Vendor
Fund Source:	State Funds	
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	■ Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	⊠Other: 50% in 2 nd quarter with balance to be
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	
Grant Authority (Source):		Financial Reporting Method:
		☐ Electronic Submission CDIP
Award Amount:		☑Other: MUNIS project report to be emailed t
	()11r	Kelsey Ruble twice yearly: by January 25, 2026
\$ 67836.00	Oui	July 25, 2026.
Period of Award:	Our Commonwealth	
7/1/25-6/30/26	Commonwealth	Evaluations:
7,1,23 3,33,23		N/A
Consortia/Partnership Members:	N/A	
Special Instructions/Conditions: L	District will submit request to carry over 18CM funds, along with anticipated use, to	OCTE no later than July 15, 2026.

Authorized By (Name, Title): Beth Hargis, Associate Comm

Date: 9/16/2025

Name and Address of Recipient		Fund Type:
Agency Name:	Wayne County Board of Education	⊠State
Street Address:	150 Cardinal Way	□Federal
City, State, Zip:	Monticello, KY 42633	□Other:
UEI#:	NECNNZJ8J3X5	
WD5.0	Wayne County Board of Education 150 Cardinal Way Monticello, KY 42633 NECNNZJ8J3X5	Research and Development:
KDE Contact Information		☐ Yes
Program Consultant:	Beth Engle	⊠ No
Street Address:	300 Sower Blvd, 5th Floor	
Budget Contact:	Kelsey Ruble	Method of Payment
Street Address:	300 Sower Blvd, 5th Floor	☐ Federal Cash Request
City, State Zip:	Frankfort, KY 40601	Expenditure Reimbursement
Description/Fun Source of Award	and Fiscal Veary	✓ Automatic Payment
Description:	and Fiscal Year: 20% Facility Funds	Lump Sum
Federal Award Date:	N/A	Receipt of Invoice from Vendor
Fund Source:	State Funds	Zheselpt of introde from Vendor
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	□Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	Solution Solution
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	paid in fourth quarter.
Grant Authority (Source):		Financial Reporting Method:
		Electronic Submission CDIP
		☑Other: MUNIS project report to be emailed to
Award Amount:	Ω	Kelsey Ruble twice yearly: by January 25, 2026 &
\$ 86563.00	Our A	July 25, 2026.
Davie de f Assessed	Our Commonwealth	3417 23, 2020.
Period of Award:	Commonwealth	Evaluations:
7/1/25-6/30/26		N/A
Consortia/Partnership Members:	N/A	
Constitution of Constitution	District will submit request to carry over 18CM funds, along with anticipated use to	OCTS to be both the state of 2025
Special instructions // onditions /	ustrict will summit realiest to carry over 1x1 W tilnas, alona with anticinated lise. To	LILLE DO INTOLTON TOUN 15 JULYS

Date: 9/16/2025

Authorized By (Name, Title): Beth Hargis, Associate Comm

Name and Address of Recipient		Fund Type:
Agency Name:	Webster County Board of Education	⊠State
Street Address:	28 State Route 1340	□Federal
City, State, Zip:	Dixon, KY 42409	□Other:
UEI#:	NHQJCNK4FQS1	
KDE Contact Information	Webster County Board of Education 28 State Route 1340 Dixon, KY 42409 NHQJCNK4FQS1	Research and Development:
	Deale French	Yes
Program Consultant:	Beth Engle	⊠ No
Street Address:	300 Sower Blvd, 5th Floor	
Budget Contact:	Kelsey Ruble	Method of Payment
Street Address:	300 Sower Blvd, 5th Floor	☐Federal Cash Request
City, State Zip:	Frankfort, KY 40601	☐ Expenditure Reimbursement
Description/Fun Source of Award	and Fiscal Year:	⊠Automatic Payment
Description:	and Fiscal Year: 20% Facility Funds	□Lump Sum
Federal Award Date:	N/A	☐ Receipt of Invoice from Vendor
Fund Source:	State Funds	
CFDA#:	N/A	Reimbursement Frequency:
PR/AWARD NUMBER (FAIN):	N/A	□Monthly
MUNIS Project Number:	18CM	Quarterly
MOA Number:	N/A	Solution Solution
Pass-through Number:	N/A	paid in fourth quarter.
Restricted Indirect Cost Rate:	N/A	para in routin quarter.
Grant Authority (Source):		Financial Reporting Method:
		Electronic Submission CDIP
		☑Other: MUNIS project report to be emailed t
Award Amount:		Kelsey Ruble twice yearly: by January 25, 2026
\$ 60171.00	Our A	July 25, 2026.
Pariod of Assessed	Our Commonwealth	July 23, 2020.
Period of Award:	Commonwealth	Evaluations:
7/1/25-6/30/26		N/A
Consortia/Partnership Members:	N/A	
Special Instructions/Conditions:	District will submit request to carry over 18CM funds, along with anticipated use, to	OCTF no later than July 15, 2026.
-p	The second secon	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2

Authorized By (Name, Title): Beth Hargis, Associate Comm

Date: 9/16/2025