Fund Type:

⊠State

□Federal

□Other:

Method of Payment

□Federal Cash Request

⊠Automatic Payment

□Lump Sum

Expenditure Reimbursement

Name and Address of Recipient

Agency Name: Street Address: City, State, Zip:

KDE Contact Information

Program Consultant: Street Address: **Budget Contact:** Street Address: City, State Zip:

Erin Chavez 300 Sower Blvd Shelby Clontz 300 Sower Blvd. Frankfort, KY 40601

1204 Greensburg St

Columbia, KY 42728

Adair County

Description/Fund Source of Award and Fiscal Year:

Description:	FY26 Reading Diagnostic & Intervention	
Fund Source:	General Funds	Reimbursement Frequency
MUNIS Project Number:	15RM	□Monthly
MOA Number:	2500002028	□Quarterly
Grant Authority (Source):	KRS 158.792	⊠Other: 1 st & 3 rd Quarters
		Financial Reporting Metho
Award Amount:	40000	Electronic Submission -
Pariod of Award: July 1, 2025		Dother:

cy:

□Receipt of Invoice from Vendor

od:

- CDIP Report rtmer Period of Award: July 1, 2025 – June 30, 2026

Special Instructions/Conditions: 1st quarter payment is held until district assurance statements are completed correctly and submitted to KDE. 3rd quarter payment should be held until completion of the mid-year survey.

Authorized By (Name, Title): Micki Ray, Chief Academic Officer

Name and Address of Recipient

Agency Name: Street Address: City, State, Zip:

Anderson County 1160 By Pass North Lawrenceburg, KY 40342

KDE Contact Information

Program Consultant: Street Address: **Budget Contact:** Street Address: City, State Zip:

Erin Chavez 300 Sower Blvd Shelby Clontz 300 Sower Blvd. Frankfort, KY 40601

Description/Fund Source of Award and Fiscal Year:

Description:	FY26 Reading Diagnostic & Intervention	
Fund Source:	General Funds	Reimbursement I
MUNIS Project Number:	15RM	□Monthly
MOA Number:	2500001925	□Quarterly
Grant Authority (Source):	KRS 158.792	⊠Other: 1 st & 3 rd
Award Amount:	160000	Financial Reporting
Period of Award: July 1, 2025 – Ju	ne 30, 2026 NTUCKV	Dother:

Fund Type: ⊠State □Federal □Other:

Method of Payment

□Federal Cash Request Expenditure Reimbursement ⊠Automatic Payment □Lump Sum □Receipt of Invoice from Vendor

Frequency:

^d Quarters

ting Method:

mission - CDIP Report

Special Instructions/Conditions: 1st quarter payment is held until district assurance statements are completed correctly and submitted to KDE. 3rd quarter payment should be held until completion of the mid-year survey.

Authorized By (Name, Title): Micki Ray, Chief Academic Officer

Name and Address of Recipient

Agency Name: Street Address: City, State, Zip:

KDE Contact Information

Program Consultant: Street Address: **Budget Contact:** Street Address: City, State Zip:

Erin Chavez 300 Sower Blvd Shelby Clontz 300 Sower Blvd.

Frankfort, KY 40601

Glasgow, KY 42141

Barren County

600 Trojan Way

Description/Fund Source of Award and Fiscal Year:

Description:	FY26 Reading Diagnostic & Intervention	
Fund Source:	General Funds	Reimbursement Freque
MUNIS Project Number:	15RM	□Monthly
MOA Number:	2500002030	□Quarterly
Grant Authority (Source):	KRS 158.792	⊠Other: 1 st & 3 rd Quarte
Award Amount:	280000	Financial Reporting Me
Period of Award: July 1, 2025 – Ju	ne 30, 2026 NTUCKV	Deter Da

Fund Type: ⊠State □Federal □Other:

Method of Payment

□Federal Cash Request Expenditure Reimbursement ⊠Automatic Payment □Lump Sum □Receipt of Invoice from Vendor

ency:

ters

ethod:

on - CDIP Report artmen レビ

Special Instructions/Conditions: 1st quarter payment is held until district assurance statements are completed correctly and submitted to KDE. 3rd quarter payment should be held until completion of the mid-year survey.

Authorized By (Name, Title): Micki Ray, Chief Academic Officer

Name and Address of Recipient

Agency Name: Street Address: City, State, Zip: Bowling Green Independent 1211 Center St Bowling Green, KY 42101

KDE Contact Information

Program Consultant: Street Address: **Budget Contact:** Street Address: City, State Zip:

Erin Chavez 300 Sower Blvd Shelby Clontz 300 Sower Blvd. Frankfort, KY 40601

Description/Fund Source of Award and Fiscal Year:

Description:	FY26 Reading Diagnostic & Intervention	
Fund Source:	General Funds	Reimburse
MUNIS Project Number:	15RM	□Monthly
MOA Number:	2500002031	□Quarterl
Grant Authority (Source):	KRS 158.792	⊠Other: 1 ^s
Award Amount:	80000	Financial R
Period of Award: July 1, 2025	– June 30, 2026 DTUCKV	□Other:

Fund Type: ⊠State □Federal □Other:

Method of Payment

□Federal Cash Request Expenditure Reimbursement ⊠Automatic Payment □Lump Sum □Receipt of Invoice from Vendor

sement Frequency:

v ١y 1st & 3rd Quarters

Reporting Method:

nic Submission - CDIP Report

Special Instructions/Conditions: 1st quarter payment is held until district assurance statements are completed correctly and submitted to KDE. 3rd quarter payment should be held until completion of the mid-year survey.

Authorized By (Name, Title): Micki Ray, Chief Academic Officer

Name and Address of Recipient

Agency Name: Street Address: City, State, Zip: Bullitt County 1040 Hwy 44 E Shepherdsville, KY 40165

KDE Contact Information

Program Consultant: Street Address: Budget Contact: Street Address: City, State Zip: Erin Chavez 300 Sower Blvd Shelby Clontz 300 Sower Blvd. Frankfort, KY 40601

Description/Fund Source of Award and Fiscal Year:

Description: Fund Source:	FY26 Reading Diagnostic & Intervention General Funds Reimbursem	
MUNIS Project Number:	15RM	□Monthly
MOA Number:	2500002032	□Quarterly
Grant Authority (Source):	KRS 158.792	⊠Other: 1 st 8
Award Amount:	40000	Financial Re

Period of Award: July 1, 2025 – June 30, 2026

Fund Type: ⊠State □Federal □Other:

Method of Payment

□Federal Cash Request □Expenditure Reimbursement ⊠Automatic Payment □Lump Sum □Receipt of Invoice from Vendor

leimbursement Frequency:

□Monthly □Quarterly ⊠Other: 1st & 3rd Quarters

Financial Reporting Method:

Electronic Submission - CDIP Report

Special Instructions/Conditions: 1st quarter payment is held until district assurance statements are completed correctly and submitted to KDE. 3rd quarter payment should be held until completion of the mid-year survey.

Authorized By (Name, Title): Micki Ray, Chief Academic Officer

Name and Address of Recipient

Agency Name: Street Address: City, State, Zip: Butler County 203 N Tyler St Morgantown, KY 42261

KDE Contact Information

Program Consultant: Street Address: Budget Contact: Street Address: City, State Zip: Erin Chavez 300 Sower Blvd Shelby Clontz 300 Sower Blvd. Frankfort, KY 40601

Description/Fund Source of Award and Fiscal Year:

Description:	FY26 Reading Diagnostic & Intervention	
Fund Source:	General Funds	Reimburseme
MUNIS Project Number:	15RM	□Monthly
MOA Number:	2500002033	□Quarterly
Grant Authority (Source):	KRS 158.792	⊠Other: 1 st &
		Financial Repo
Award Amount:	80000	⊠Electronic S
	V o o tri o lo r	

Period of Award: July 1, 2025 – June 30, 2026

Fund Type: ⊠State □Federal

 \Box Other:

Method of Payment

□Federal Cash Request □Expenditure Reimbursement ⊠Automatic Payment □Lump Sum □Receipt of Invoice from Vendor

Reimbursement Frequency:

□Monthly □Quarterly ⊠Other: 1st & 3rd Quarters

Financial Reporting Method:

IElectronic Submission → CDIP Report

Special Instructions/Conditions: 1st quarter payment is held until district assurance statements are completed correctly and submitted to KDE. 3rd quarter payment should be held until completion of the mid-year survey.

Authorized By (Name, Title): Micki Ray, Chief Academic Officer

Name and Address of Recipient

Agency Name: Street Address: City, State, Zip:

KDE Contact Information

Program Consultant: Street Address: **Budget Contact:** Street Address: City, State Zip:

Grayson, KY 41143 Erin Chavez 300 Sower Blvd Shelby Clontz

300 Sower Blvd.

Frankfort, KY 40601

228 S Carol Malone Blvd

Carter County

Fund Type: ⊠State □Federal

□Other:

Method of Payment

□Federal Cash Request □Expenditure Reimbursement ⊠Automatic Payment Lump Sum □Receipt of Invoice from Vendor

Description/Fund Source of Award and Fiscal Year:

Description:	FY26 Reading Diagnostic & Intervention	
Fund Source:	General Funds	Reimbursement Frequency:
MUNIS Project Number:	15RM	□Monthly
MOA Number:	2500002034	□Quarterly
		⊠Other: 1 st & 3 rd Quarters
Grant Authority (Source):	KRS 158.792	
		Financial Departing Mathed

Award Amount:

240000

Period of Award: July 1, 2025 – June 30, 2026

Financial Reporting Method: ⊠Electronic Submission - CDIP Report

rtment of □Other:

Special Instructions/Conditions: 1st quarter payment is held until district assurance statements are completed correctly and submitted to KDE. 3rd quarter payment should be held until completion of the mid-year survey.

Authorized By (Name, Title): Micki Ray, Chief Academic Officer

Name and Address of Recipient

Agency Name: Street Address: City, State, Zip:

KDE Contact Information

Program Consultant: Street Address: **Budget Contact:** Street Address: City, State Zip:

Winchester, KY 40391 Erin Chavez 300 Sower Blvd Shelby Clontz 300 Sower Blvd.

Frankfort, KY 40601

1600 W Lexington Ave

Clark County

Method of Payment

Fund Type:

⊠State

□Federal

□Other:

□Federal Cash Request □Expenditure Reimbursement ⊠Automatic Payment Lump Sum □Receipt of Invoice from Vendor

Description/Fund Source of Award and Fiscal Year:

Period of Award: July 1, 2025 – June 30, 2026

Description:	FY26 Reading Diagnostic & Intervention	
Fund Source:	General Funds	Reimbursement Frequency:
MUNIS Project Number:	15RM	□Monthly
MOA Number:	2500002035	□Quarterly
		⊠Other: 1 st & 3 rd Quarters
Grant Authority (Source):	KRS 158.792	
		Financial Reporting Method:

Award Amount:

160000

⊠Electronic Submission - CDIP Report

rtment of □Other:

Special Instructions/Conditions: 1st quarter payment is held until district assurance statements are completed correctly and submitted to KDE. 3rd quarter payment should be held until completion of the mid-year survey.

Authorized By (Name, Title): Micki Ray, Chief Academic Officer

Name and Address of Recipient

Agency Name: Street Address: City, State, Zip:

KDE Contact Information

Program Consultant: Street Address: **Budget Contact:** Street Address: City, State Zip:

Erin Chavez 300 Sower Blvd Shelby Clontz 300 Sower Blvd.

Frankfort, KY 40601

Lexington, KY 40511

Fayette County

450 Park Place

Description/Fund Source of Award and Fiscal Year:

Description: Fund Source: MUNIS Project Number: MOA Number:	FY26 Reading Diagnostic & Intervention General Funds 15RM 2500002036	Reimbursement Frequer □Monthly □Quarterly
Grant Authority (Source):	KRS 158.792	⊠Other: 1 st & 3 rd Quarte
Award Amount:	360000	Financial Reporting Met
Period of Award: July 1, 2025 – Ju	ne 30, 2026 NTUCKV	Dep pa

Fund Type: ⊠State □Federal □Other:

Method of Payment

□Federal Cash Request Expenditure Reimbursement ⊠Automatic Payment □Lump Sum □Receipt of Invoice from Vendor

ency:

ers

thod:

n - CDIP Report her

Special Instructions/Conditions: 1st quarter payment is held until district assurance statements are completed correctly and submitted to KDE. 3rd quarter payment should be held until completion of the mid-year survey.

Authorized By (Name, Title): Micki Ray, Chief Academic Officer

Name and Address of Recipient

Agency Name: Street Address: City, State, Zip: Fleming County 211 W Water St Flemingsburg, KY 41041

KDE Contact Information

Program Consultant: Street Address: **Budget Contact:** Street Address: City, State Zip:

Erin Chavez 300 Sower Blvd Shelby Clontz 300 Sower Blvd.

Frankfort, KY 40601

Description/Fund Source of Award and Fiscal Year:

Description	EV26 Booding Diagnostic & Intervention	
Description:	FY26 Reading Diagnostic & Intervention	
Fund Source:	General Funds	Reimbursement
MUNIS Project Number:	15RM	□Monthly
MOA Number:	2500002037	□Quarterly
		⊠Other: 1 st & 3 rd
Grant Authority (Source):	KRS 158.792	
		Financial Report
Award Amount:	40000	Electronic Sub
	Kontucky	□Other:

Period of Award: July 1, 2025 – June 30, 2026

Fund Type: ⊠State

□Federal □Other:

Method of Payment

□Federal Cash Request Expenditure Reimbursement ⊠Automatic Payment □Lump Sum □Receipt of Invoice from Vendor

t Frequency:

rd Quarters

rting Method:

bmission - CDIP Report

Special Instructions/Conditions: 1st quarter payment is held until district assurance statements are completed correctly and submitted to KDE. 3rd quarter payment should be held until completion of the mid-year survey.

Authorized By (Name, Title): Micki Ray, Chief Academic Officer

Name and Address of Recipient

Agency Name: Street Address: City, State, Zip:

KDE Contact Information

Program Consultant: Street Address: **Budget Contact:** Street Address: City, State Zip:

Frankfort, KY 40601 Erin Chavez 300 Sower Blvd Shelby Clontz 300 Sower Blvd.

Frankfort, KY 40601

652 Chamberlin Ave

Franklin County

Description/Fund Source of Award and Fiscal Year:

Description/Fund Source of Awan		
Description:	FY26 Reading Diagnostic & Intervention	
Fund Source:	General Funds	Reimbursement Fr
MUNIS Project Number:	15RM	□Monthly
MOA Number:	2500002038	□Quarterly
Grant Authority (Source):	KRS 158.792	⊠Other: 1 st & 3 rd Q
Award Amount:	120000	Financial Reporting
Period of Award: July 1, 2025 – Ju	ne 30, 2026 NTUCKV	Dother:

Fund Type: ⊠State □Federal □Other:

Method of Payment

□Federal Cash Request Expenditure Reimbursement ⊠Automatic Payment □Lump Sum □ Receipt of Invoice from Vendor

requency:

Quarters

ng Method:

nission - CDIP Report

Special Instructions/Conditions: 1st quarter payment is held until district assurance statements are completed correctly and submitted to KDE. 3rd quarter payment should be held until completion of the mid-year survey.

Authorized By (Name, Title): Micki Ray, Chief Academic Officer

Name and Address of Recipient

Agency Name: Street Address: City, State, Zip:

KDE Contact Information

Program Consultant: Street Address: **Budget Contact:** Street Address: City, State Zip:

Garrard County 322 West Maple Avenue Lancaster, KY 40444

Erin Chavez

300 Sower Blvd

300 Sower Blvd.

Frankfort, KY 40601

Shelby Clontz

Method of Payment

Fund Type:

⊠State

□Federal

□Other:

□Federal Cash Request □Expenditure Reimbursement ⊠Automatic Payment Lump Sum □Receipt of Invoice from Vendor

Description/Fund Source of Award and Fiscal Year:

Description:	FY26 Reading Diagnostic & Intervention	
Fund Source:	General Funds	Reimbursement Frequency:
MUNIS Project Number:	15RM	□Monthly
MOA Number:	2500002039	□Quarterly
		⊠Other: 1 st & 3 rd Quarters
Grant Authority (Source):	KRS 158.792	
		Einancial Paparting Mathad

Award Amount:

120000

Period of Award: July 1, 2025 – June 30, 2026

Financial Reporting Method:

⊠Electronic Submission - CDIP Report rtment of □Other:

Special Instructions/Conditions: 1st quarter payment is held until district assurance statements are completed correctly and submitted to KDE. 3rd quarter payment should be held until completion of the mid-year survey.

Authorized By (Name, Title): Micki Ray, Chief Academic Officer

Name and Address of Recipient

Agency Name: Street Address: City, State, Zip: Grant County 820 Arnie Risen Boulevard Williamstown, KY 41097

KDE Contact Information

Program Consultant: Street Address: **Budget Contact:** Street Address: City, State Zip:

Erin Chavez 300 Sower Blvd Shelby Clontz 300 Sower Blvd. Frankfort, KY 40601

Description/Fund Source of Award and Fiscal Year:

Description:	FY26 Reading Diagnostic & Intervention	
Fund Source:	General Funds	Reimbursemen
MUNIS Project Number:	15RM	□Monthly
MOA Number:	2500002040	□Quarterly
Grant Authority (Source):	KRS 158.792	⊠Other: 1 st & 3
Award Amount:	120000	Financial Repor
Period of Award: July 1, 2025 – Jur	ne 30, 2026 NTUCKV	□Other:

Fund Type: ⊠State

□Federal □Other:

Method of Payment

□Federal Cash Request Expenditure Reimbursement ⊠Automatic Payment □Lump Sum □Receipt of Invoice from Vendor

ent Frequency:

3rd Quarters

orting Method:

ubmission - CDIP Report

Special Instructions/Conditions: 1st quarter payment is held until district assurance statements are completed correctly and submitted to KDE. 3rd quarter payment should be held until completion of the mid-year survey.

Authorized By (Name, Title): Micki Ray, Chief Academic Officer

Name and Address of Recipient

Agency Name: Street Address: City, State, Zip:

KDE Contact Information

Program Consultant: Street Address: **Budget Contact:** Street Address: City, State Zip:

Erin Chavez 300 Sower Blvd Shelby Clontz 300 Sower Blvd.

Frankfort, KY 40601

2290 State Rt 121 N

Mayfield, KY 42066

Graves County

Description/Fund Source of Award and Fiscal Year:

Description:	FY26 Reading Diagnostic & Intervention	
Fund Source:	General Funds	Reimbursement Frequence
MUNIS Project Number:	15RM	□Monthly
MOA Number:	2500002041	□Quarterly
		⊠Other: 1 st & 3 rd Quarters
Grant Authority (Source):	KRS 158.792	
		Financial Reporting Methe
Award Amount:	240000	Electronic Submission
Period of Award: July 1, 2025 – Ju	ne 30, 2026 NTUCKV	Dother: Dal

Fund Type: ⊠State □Federal □Other:

Method of Payment

□Federal Cash Request Expenditure Reimbursement ⊠Automatic Payment □Lump Sum □Receipt of Invoice from Vendor

ncy:

hod:

Department Por Report

Special Instructions/Conditions: 1st quarter payment is held until district assurance statements are completed correctly and submitted to KDE. 3rd quarter payment should be held until completion of the mid-year survey.

Authorized By (Name, Title): Micki Ray, Chief Academic Officer

Name and Address of Recipient

Agency Name: Street Address: City, State, Zip:

KDE Contact Information

Program Consultant: Street Address: **Budget Contact:** Street Address: City, State Zip:

Erin Chavez 300 Sower Blvd Shelby Clontz 300 Sower Blvd. Frankfort, KY 40601

Hancock County

83 State Route 3543

Hawesville, KY 42348

Description/Fund Source of Award and Fiscal Year:

Description:	FY26 Reading Diagnostic & Intervention	
Fund Source:	General Funds	Reimbursement Freq
MUNIS Project Number:	15RM	□Monthly
MOA Number:	2500002042	□Quarterly
Grant Authority (Source):	KRS 158.792	⊠Other: 1 st & 3 rd Qua
		Financial Reporting N
Award Amount:	80000	Electronic Submissi
Deviad of Auronda July 1, 2025	Image and DELICZY	□Other:

Period of Award: July 1, 2025 – June 30, 2026

Fund Type: ⊠State □Federal □Other:

Method of Payment

□Federal Cash Request Expenditure Reimbursement ⊠Automatic Payment □Lump Sum □Receipt of Invoice from Vendor

equency:

arters

Method:

sion - CDIP Report

Special Instructions/Conditions: 1st quarter payment is held until district assurance statements are completed correctly and submitted to KDE. 3rd quarter payment should be held until completion of the mid-year survey.

Authorized By (Name, Title): Micki Ray, Chief Academic Officer

Name and Address of Recipient

Agency Name: Street Address: City, State, Zip: Henry County 326 S Main St New Castle, KY 40050

KDE Contact Information

Program Consultant: Street Address: Budget Contact: Street Address: City, State Zip: Erin Chavez 300 Sower Blvd Shelby Clontz 300 Sower Blvd. Frankfort, KY 40601

Description/Fund Source of Award and Fiscal Year:

Description:	FY26 Reading Diagnostic & Intervention	
Fund Source:	General Funds	Reimbursen
MUNIS Project Number:	15RM	□Monthly
MOA Number:	2500002043	□Quarterly
Grant Authority (Source):	KRS 158.792	⊠Other: 1 st
Award Amount:	80000	Financial Re Electronic

Period of Award: July 1, 2025 – June 30, 2026

Fund Type: ⊠State □Federal □Other:

Method of Payment

□Federal Cash Request □Expenditure Reimbursement ⊠Automatic Payment □Lump Sum □Receipt of Invoice from Vendor

leimbursement Frequency:

□Monthly □Quarterly ⊠Other: 1st & 3rd Quarters

Financial Reporting Method:

IElectronic Submission - CDIP Report
Other:

Special Instructions/Conditions: 1st quarter payment is held until district assurance statements are completed correctly and submitted to KDE. 3rd quarter payment should be held until completion of the mid-year survey.

Authorized By (Name, Title): Micki Ray, Chief Academic Officer

Name and Address of Recipient

Agency Name: Street Address: City, State, Zip:

KDE Contact Information

Program Consultant: Street Address: Budget Contact: Street Address: City, State Zip: Erin Chavez 300 Sower Blvd Shelby Clontz 300 Sower Blvd.

Frankfort, KY 40601

Jefferson County

3332 Newburg Rd

Louisville, KY 40218

Description/Fund Source of Award and Fiscal Year:

Description:	FY26 Reading Diagnostic & Intervention	
Fund Source:	General Funds	Reimbursement Frequency:
MUNIS Project Number:	15RM	□Monthly
MOA Number:	2500002029	□Quarterly
Grant Authority (Source):	KRS 158.792	⊠Other: 1 st & 3 rd Quarters
Award Amount:	160000	Financial Reporting Method:
Period of Award: July 1, 2025 – Jur	ne 30, 2026 NTUCKV	Depart

Fund Type: ⊠State □Federal □Other:

Method of Payment

□Federal Cash Request □Expenditure Reimbursement ⊠Automatic Payment □Lump Sum □Receipt of Invoice from Vendor

Electronic Submission - CDIP Report

Special Instructions/Conditions: 1st quarter payment is held until district assurance statements are completed correctly and submitted to KDE. 3rd quarter payment should be held until completion of the mid-year survey.

Authorized By (Name, Title): Micki Ray, Chief Academic Officer

Name and Address of Recipient

Agency Name: Street Address: City, State, Zip:

Jessamine County 871 Wilmore Rd Nicholasville, KY 40356

KDE Contact Information

Program Consultant: Street Address: Budget Contact: Street Address: City, State Zip: Erin Chavez 300 Sower Blvd Shelby Clontz 300 Sower Blvd.

Frankfort, KY 40601

Description/Fund Source of Award and Fiscal Year:

· ·		
Description:	FY26 Reading Diagnostic & Intervention	
Fund Source:	General Funds	Reimbursem
MUNIS Project Number:	15RM	□Monthly
MOA Number:	2500002044	□Quarterly
		⊠Other: 1 st &
Grant Authority (Source):	KRS 158.792	
		Financial Rep
Award Amount:	40000	⊠Electronic :
	Kontucky	□Other:

Period of Award: July 1, 2025 – June 30, 2026

Fund Type: ⊠State □Federal □Other:

Method of Payment

□Federal Cash Request □Expenditure Reimbursement ⊠Automatic Payment □Lump Sum □Receipt of Invoice from Vendor

leimbursement Frequency:

□Monthly □Quarterly ⊠Other: 1st & 3rd Quarters

Financial Reporting Method:

IElectronic Submission → CDIP Report

Special Instructions/Conditions: 1st quarter payment is held until district assurance statements are completed correctly and submitted to KDE. 3rd quarter payment should be held until completion of the mid-year survey.

Authorized By (Name, Title): Micki Ray, Chief Academic Officer

Name and Address of Recipient

Agency Name: Street Address: City, State, Zip:

Kenton County 1055 Eaton Dr Fort Wright, KY 41017

KDE Contact Information

Program Consultant: Street Address: **Budget Contact:** Street Address: City, State Zip:

Erin Chavez 300 Sower Blvd Shelby Clontz 300 Sower Blvd. Frankfort, KY 40601

Description/Fund Source of Award and Fiscal Year:

Description:	FY26 Reading Diagnostic & Intervention	
Fund Source:	General Funds	Reimbursement F
MUNIS Project Number:	15RM	□Monthly
MOA Number:	2500002045	□Quarterly
Grant Authority (Source):	KRS 158.792	⊠Other: 1 st & 3 rd
Grant Additionity (Source).	KKS 130.752	Financial Reportir
Award Amount:	80000	

Period of Award: July 1, 2025 – June 30, 2026

Fund Type: ⊠State □Federal

□Other:

Method of Payment

□Federal Cash Request Expenditure Reimbursement ⊠Automatic Payment □Lump Sum □Receipt of Invoice from Vendor

Frequency:

Quarters

ing Method:

mission - CDIP Report

Special Instructions/Conditions: 1st quarter payment is held until district assurance statements are completed correctly and submitted to KDE. 3rd quarter payment should be held until completion of the mid-year survey.

Authorized By (Name, Title): Micki Ray, Chief Academic Officer

Name and Address of Recipient

Agency Name: Street Address: City, State, Zip:

KDE Contact Information

Program Consultant: Street Address: **Budget Contact:** Street Address: City, State Zip:

Erin Chavez 300 Sower Blvd Shelby Clontz 300 Sower Blvd. Frankfort, KY 40601

Lawrence County

Louisa, KY 41230

Hwy 644

Description/Fund Source of Award and Fiscal Year:

Description:	FY26 Reading Diagnostic & Intervention	
Fund Source:	General Funds	Reimbursement Frequency:
MUNIS Project Number:	15RM	□Monthly
MOA Number:	2500002046	□Quarterly
		⊠Other: 1 st & 3 rd Quarters
Grant Authority (Source):	KRS 158.792	
		Financial Reporting Method:
Award Amount:	40000	Electronic Submission - CDIP Report
Period of Award: July 1, 2025 – Ju	ine 30, 2026 NTUCKY	Department (

Fund Type: ⊠State □Federal □Other:

Method of Payment

□Federal Cash Request □Expenditure Reimbursement ⊠Automatic Payment □Lump Sum □Receipt of Invoice from Vendor

y:

d:

Special Instructions/Conditions: 1st quarter payment is held until district assurance statements are completed correctly and submitted to KDE. 3rd quarter payment should be held until completion of the mid-year survey.

Authorized By (Name, Title): Micki Ray, Chief Academic Officer

Name and Address of Recipient

Agency Name: Street Address: City, State, Zip:

KDE Contact Information

Program Consultant: Street Address: Budget Contact: Street Address: City, State Zip: Russellville, KY 42276 Erin Chavez 300 Sower Blvd Shelby Clontz

300 Sower Blvd.

Frankfort, KY 40601

2222 Bowling Green Rd

Logan County

Fund Type: ⊠State

□Federal □Other:

Method of Payment

□Federal Cash Request □Expenditure Reimbursement ⊠Automatic Payment □Lump Sum □Receipt of Invoice from Vendor

Description/Fund Source of Award and Fiscal Year:

Description:	FY26 Reading Diagnostic & Intervention	
Fund Source:	General Funds	Reimbursement Frequency:
MUNIS Project Number:	15RM	□Monthly
MOA Number:	2500002047	□Quarterly
		⊠Other: 1 st & 3 rd Quarters
Grant Authority (Source):	KRS 158.792	
		Financial Danautina Mathadu

Award Amount:

200000

Period of Award: July 1, 2025 – June 30, 2026

Financial Reporting Method: ⊠Electronic Submission - CDIP Report

Dother: Dartment of

Special Instructions/Conditions: 1st quarter payment is held until district assurance statements are completed correctly and submitted to KDE. 3rd quarter payment should be held until completion of the mid-year survey.

Authorized By (Name, Title): Micki Ray, Chief Academic Officer

Name and Address of Recipient

Agency Name: Street Address: City, State, Zip:

KDE Contact Information

Program Consultant: Street Address: **Budget Contact:** Street Address: City, State Zip:

Madison County 301 Highland Park Dr. Richmond, KY 40475

Erin Chavez

300 Sower Blvd

300 Sower Blvd.

Frankfort, KY 40601

Shelby Clontz

Fund Type: ⊠State □Federal □Other:

Method of Payment

□Federal Cash Request □Expenditure Reimbursement ⊠Automatic Payment Lump Sum □Receipt of Invoice from Vendor

Description/Fund Source of Award and Fiscal Year:

Description:	FY26 Reading Diagnostic & Intervention	
Fund Source:	General Funds	Reimbursement Frequency:
MUNIS Project Number:	15RM	□Monthly
MOA Number:	2500002048	□Quarterly
		⊠Other: 1 st & 3 rd Quarters
Grant Authority (Source):	KRS 158.792	
		Einancial Reporting Method:

Award Amount:

240000

Period of Award: July 1, 2025 – June 30, 2026

Financial Reporting Method: ⊠Electronic Submission - CDIP Report

rtment of □Other:

Special Instructions/Conditions: 1st quarter payment is held until district assurance statements are completed correctly and submitted to KDE. 3rd quarter payment should be held until completion of the mid-year survey.

Authorized By (Name, Title): Micki Ray, Chief Academic Officer

Fund Type:

⊠State

□Federal

□Other:

Method of Payment

□Federal Cash Request

⊠Automatic Payment

□Lump Sum

□Expenditure Reimbursement

□Receipt of Invoice from Vendor

Name and Address of Recipient

Agency Name: Street Address: City, State, Zip:

KDE Contact Information

Program Consultant: Street Address: **Budget Contact:** Street Address: City, State Zip:

Erin Chavez 300 Sower Blvd Shelby Clontz 300 Sower Blvd.

Frankfort, KY 40601

Salyersville, KY 41465

Magoffin County

109 Gardner Trail

Description/Fund Source of Award and Fiscal Year:

Description:	FY26 Reading Diagnostic & Intervention	
Fund Source:	General Funds	Reimbursement Frequency
		• •
MUNIS Project Number:	15RM	□Monthly
MOA Number:	2500002049	□Quarterly
		⊠Other: 1 st & 3 rd Quarters
Grant Authority (Source):	KRS 158.792	
		Financial Reporting Method
Award Amount:	80000	Electronic Submission - C
	Kontucky	□Other:
Period of Award: July 1, 2025 – Ju	une 30, 2026	DEDal
	i voi i coloi vy	

:y:

od:

CDIP Report rtment

Special Instructions/Conditions: 1st quarter payment is held until district assurance statements are completed correctly and submitted to KDE. 3rd quarter payment should be held until completion of the mid-year survey.

Authorized By (Name, Title): Micki Ray, Chief Academic Officer

Name and Address of Recipient

Agency Name: Street Address: City, State, Zip:

KDE Contact Information

Program Consultant: Street Address: **Budget Contact:** Street Address: City, State Zip:

Erin Chavez 300 Sower Blvd Shelby Clontz 300 Sower Blvd.

Frankfort, KY 40601

McCreary County

Stearns, KY 42647

120 Raider Way

Description/Fund Source of Award and Fiscal Year:

Description: Fund Source: MUNIS Project Number:	FY26 Reading Diagnostic & Intervention General Funds 15RM	Reimbursement Frequ Monthly
MOA Number:	2500002050	Quarterly
Grant Authority (Source):	KRS 158.792	⊠Other: 1 st & 3 rd Quart
Award Amount:	40000	Financial Reporting Mo
	Kontucky	□Other:

Period of Award: July 1, 2025 – June 30, 2026

Fund Type: ⊠State

□Federal □Other:

Method of Payment

□Federal Cash Request Expenditure Reimbursement ⊠Automatic Payment □Lump Sum □Receipt of Invoice from Vendor

uency:

rters

/lethod:

on - CDIP Report artment

Special Instructions/Conditions: 1st quarter payment is held until district assurance statements are completed correctly and submitted to KDE. 3rd quarter payment should be held until completion of the mid-year survey.

Authorized By (Name, Title): Micki Ray, Chief Academic Officer

Name and Address of Recipient

Agency Name: Street Address: City, State, Zip:

KDE Contact Information

Program Consultant: Street Address: **Budget Contact:** Street Address: City, State Zip:

Menifee County 440 Wynn Flat Rd. Frenchburg, KY 40322

Erin Chavez

300 Sower Blvd

300 Sower Blvd.

Frankfort, KY 40601

Shelby Clontz

Fund Type: ⊠State □Federal □Other:

Method of Payment

□Federal Cash Request □Expenditure Reimbursement ⊠Automatic Payment Lump Sum □Receipt of Invoice from Vendor

Description/Fund Source of Award and Fiscal Year:

Description:	FY26 Reading Diagnostic & Intervention	
Fund Source:	General Funds	Reimbursement Frequency:
MUNIS Project Number:	15RM	□Monthly
MOA Number:	2500002051	□Quarterly
		⊠Other: 1 st & 3 rd Quarters
Grant Authority (Source):	KRS 158.792	
		Einancial Reporting Method:

Award Amount:

40000

Period of Award: July 1, 2025 – June 30, 2026

Financial Reporting Method:

⊠Electronic Submission - CDIP Report rtment of □Other:

Special Instructions/Conditions: 1st quarter payment is held until district assurance statements are completed correctly and submitted to KDE. 3rd quarter payment should be held until completion of the mid-year survey.

ntucl

Authorized By (Name, Title): Micki Ray, Chief Academic Officer

Name and Address of Recipient

Agency Name: Street Address: City, State, Zip: Monroe County 309 Emberton St Tompkinsville, KY 42167

KDE Contact Information

Program Consultant: Street Address: **Budget Contact:** Street Address: City, State Zip:

Erin Chavez 300 Sower Blvd Shelby Clontz 300 Sower Blvd. Frankfort, KY 40601

Description/Fund Source of Award and Fiscal Year:

Description:	FY26 Reading Diagnostic & Intervention	
Fund Source:	General Funds	Reimbursement
MUNIS Project Number:	15RM	□Monthly
MOA Number:	2500002052	□Quarterly
Grant Authority (Source):	KRS 158.792	⊠Other: 1 st & 3 rd
Award Amount:	120000	Financial Report ⊠Electronic Sub
Period of Award: July 1, 2025 – Jur	e 30, 2026 NTUCKV	DOther:

Fund Type:

⊠State □Federal □Other:

Method of Payment

□Federal Cash Request Expenditure Reimbursement ⊠Automatic Payment □Lump Sum □Receipt of Invoice from Vendor

t Frequency:

rd Quarters

rting Method:

bmission - CDIP Report

Special Instructions/Conditions: 1st quarter payment is held until district assurance statements are completed correctly and submitted to KDE. 3rd quarter payment should be held until completion of the mid-year survey.

Authorized By (Name, Title): Micki Ray, Chief Academic Officer

Name and Address of Recipient

Agency Name: Street Address: City, State, Zip:

Nelson County 288 Wildcat Ln Bardstown, KY 40004

KDE Contact Information

Program Consultant: Street Address: **Budget Contact:** Street Address: City, State Zip:

Erin Chavez 300 Sower Blvd Shelby Clontz 300 Sower Blvd. Frankfort, KY 40601

Description/Fund Source of Award and Fiscal Year:

Description: Fund Source: MUNIS Project Number: MOA Number:	FY26 Reading Diagnostic & Intervention General Funds 15RM 2500002053	Reimbursement Freque □Monthly □Quarterly
Grant Authority (Source):	KRS 158.792	⊠Other: 1 st & 3 rd Quart Financial Reporting Me
Award Amount:	160000	⊠Electronic Submission
Period of Award: July 1, 2025 – Jun	ne 30, 2026 NTUCKV	Dep Da

Fund Type: ⊠State □Federal □Other:

Method of Payment

□Federal Cash Request Expenditure Reimbursement ⊠Automatic Payment □Lump Sum □Receipt of Invoice from Vendor

ency:

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on - CDIP Report

Special Instructions/Conditions: 1st quarter payment is held until district assurance statements are completed correctly and submitted to KDE. 3rd quarter payment should be held until completion of the mid-year survey.

Authorized By (Name, Title): Micki Ray, Chief Academic Officer

Name and Address of Recipient

Agency Name: Street Address: City, State, Zip:

KDE Contact Information

Program Consultant: Street Address: **Budget Contact:** Street Address: City, State Zip:

Erin Chavez 300 Sower Blvd Shelby Clontz 300 Sower Blvd.

Frankfort, KY 40601

Nicholas County

395 West Main St.

Carlisle, KY 40311

Description/Fund Source of Award and Fiscal Year:

Description:	FY26 Reading Diagnostic & Intervention		
Fund Source:	General Funds	Reimbursement Frequency:	
MUNIS Project Number:	15RM	□Monthly	
MOA Number:	2500002054	□Quarterly	
		⊠Other: 1 st & 3 rd Quarters	
Grant Authority (Source):	KRS 158.792		
		Financial Reporting Method:	
Award Amount:	40000	■Electronic Submission - CDIP Report	
Period of Award: July 1, 2025 – J	une 30, 2026 NTUCKY	Department	

Fund Type: ⊠State □Federal □Other:

Method of Payment

□Federal Cash Request Expenditure Reimbursement ⊠Automatic Payment □Lump Sum □Receipt of Invoice from Vendor

y:

od:

Special Instructions/Conditions: 1st quarter payment is held until district assurance statements are completed correctly and submitted to KDE. 3rd quarter payment should be held until completion of the mid-year survey.

Authorized By (Name, Title): Micki Ray, Chief Academic Officer

Name and Address of Recipient

Agency Name: Street Address: City, State, Zip:

KDE Contact Information

Program Consultant: Street Address: **Budget Contact:** Street Address: City, State Zip:

Paducah, KY 42003 Erin Chavez 300 Sower Blvd Shelby Clontz

300 Sower Blvd.

Frankfort, KY 40601

Paducah Independent

500 South 25th Street

Fund Type: ⊠State

□Federal □Other:

Method of Payment

□Federal Cash Request □Expenditure Reimbursement ⊠Automatic Payment Lump Sum □Receipt of Invoice from Vendor

Description/Fund Source of Award and Fiscal Year:

Description:	FY26 Reading Diagnostic & Intervention	
Fund Source:	General Funds	Reimbursement Frequency:
MUNIS Project Number:	15RM	□Monthly
MOA Number:	2500002055	□Quarterly
		⊠Other: 1 st & 3 rd Quarters
Grant Authority (Source):	KRS 158.792	
		Financial Departing Mathed

Award Amount:

120000

Period of Award: July 1, 2025 – June 30, 2026

Financial Reporting Method:

⊠Electronic Submission - CDIP Report rtment of □Other:

Special Instructions/Conditions: 1st quarter payment is held until district assurance statements are completed correctly and submitted to KDE. 3rd quarter payment should be held until completion of the mid-year survey.

Authorized By (Name, Title): Micki Ray, Chief Academic Officer

Name and Address of Recipient

Agency Name: Street Address: City, State, Zip:

KDE Contact Information

Program Consultant: Street Address: **Budget Contact:** Street Address: City, State Zip:

Erin Chavez 300 Sower Blvd Shelby Clontz 300 Sower Blvd.

Frankfort, KY 40601

Russell Independent

Flatwoods, KY 41139

908 Powell Lane

Description/Fund Source of Award and Fiscal Year:

Description:	FY26 Reading Diagnostic & Intervention		
Fund Source:	General Funds	Reimbursement Frequency:	
MUNIS Project Number:	15RM	□Monthly	
MOA Number:	2500002056	□Quarterly	
		⊠Other: 1 st & 3 rd Quarters	
Grant Authority (Source):	KRS 158.792		
		Financial Reporting Method:	
Award Amount:	40000	Electronic Submission - CDIP Report	
Period of Award: July 1, 2025 -	- June 30, 2026 DTUCKY	Department	

Fund Type: ⊠State □Federal □Other:

Method of Payment

□Federal Cash Request Expenditure Reimbursement ⊠Automatic Payment □Lump Sum □Receipt of Invoice from Vendor

ency:

thod:

Special Instructions/Conditions: 1st quarter payment is held until district assurance statements are completed correctly and submitted to KDE. 3rd quarter payment should be held until completion of the mid-year survey.

Authorized By (Name, Title): Micki Ray, Chief Academic Officer

Name and Address of Recipient

Agency Name: Street Address: City, State, Zip:

KDE Contact Information

Program Consultant: Street Address: **Budget Contact:** Street Address: City, State Zip:

Shelbyville, KY 40066 Erin Chavez 300 Sower Blvd Shelby Clontz

300 Sower Blvd.

Frankfort, KY 40601

Shelby County

1155 Main Street

Fund Type: ⊠State □Federal

□Other:

Method of Payment

□Federal Cash Request □Expenditure Reimbursement ⊠Automatic Payment Lump Sum □Receipt of Invoice from Vendor

Description/Fund Source of Award and Fiscal Year:

Description:	FY26 Reading Diagnostic & Intervention	
Fund Source:	General Funds	Reimbursement Frequency:
MUNIS Project Number:	15RM	□Monthly
MOA Number:	2500002057	□Quarterly
		⊠Other: 1 st & 3 rd Quarters
Grant Authority (Source):	KRS 158.792	
		Einancial Reporting Mathed

Award Amount:

40000

Period of Award: July 1, 2025 – June 30, 2026

Financial Reporting Method:

⊠Electronic Submission - CDIP Report rtment of □Other:

Special Instructions/Conditions: 1st quarter payment is held until district assurance statements are completed correctly and submitted to KDE. 3rd quarter payment should be held until completion of the mid-year survey.

ntucl

Authorized By (Name, Title): Micki Ray, Chief Academic Officer

Name and Address of Recipient

Agency Name: Street Address: City, State, Zip:

KDE Contact Information

Program Consultant: Street Address: **Budget Contact:** Street Address: City, State Zip:

Erin Chavez 300 Sower Blvd Shelby Clontz 300 Sower Blvd.

Frankfort, KY 40601

Simpson County

430 S College St

Franklin, KY 42135

Description/Fund Source of Award and Fiscal Year:

Description:	FY26 Reading Diagnostic & Intervention	
Fund Source:	General Funds	Reimbursement Freq
MUNIS Project Number:	15RM	□Monthly
MOA Number:	2500002058	□Quarterly
		⊠Other: 1 st & 3 rd Qua
Grant Authority (Source):	KRS 158.792	
		Financial Reporting N
Award Amount:	80000	Electronic Submissi
Period of Award: July 1, 2025 –	June 30, 2026 DTUCKV	Dother: D

Fund Type: ⊠State □Federal □Other:

Method of Payment

□Federal Cash Request Expenditure Reimbursement ⊠Automatic Payment □Lump Sum □Receipt of Invoice from Vendor

equency:

arters

Method:

sion - CDIP Report

Special Instructions/Conditions: 1st quarter payment is held until district assurance statements are completed correctly and submitted to KDE. 3rd quarter payment should be held until completion of the mid-year survey.

Authorized By (Name, Title): Micki Ray, Chief Academic Officer

Name and Address of Recipient

Agency Name: Street Address: City, State, Zip:

KDE Contact Information

Program Consultant: Street Address: Budget Contact: Street Address: City, State Zip: Taylorsville, KY 40071 Erin Chavez 300 Sower Blvd Shelby Clontz 300 Sower Blvd.

Frankfort, KY 40601

Spencer County

110 Reasor Ave.

Fund Type:

⊠State □Federal □Other:

Method of Payment

□Federal Cash Request □Expenditure Reimbursement ⊠Automatic Payment □Lump Sum □Receipt of Invoice from Vendor

Description/Fund Source of Award and Fiscal Year:

Description:	FY26 Reading Diagnostic & Intervention	
Fund Source:	General Funds	Reimbursement Frequency:
MUNIS Project Number:	15RM	□Monthly
MOA Number:	2500002059	□Quarterly
		⊠Other: 1 st & 3 rd Quarters
Grant Authority (Source):	KRS 158.792	
		Einancial Panarting Mathad

Award Amount:

80000

Period of Award: July 1, 2025 – June 30, 2026

Financial Reporting Method: Electronic Submission - CDIP Report Other:

Special Instructions/Conditions: 1st quarter payment is held until district assurance statements are completed correctly and submitted to KDE. 3rd quarter payment should be held until completion of the mid-year survey.

ntuc

Authorized By (Name, Title): Micki Ray, Chief Academic Officer

Name and Address of Recipient

Agency Name: Street Address: City, State, Zip:

KDE Contact Information

Program Consultant: Street Address: Budget Contact: Street Address: City, State Zip: Morganfield, KY 42437 Erin Chavez 300 Sower Blvd Shelby Clontz 300 Sower Blvd.

Frankfort, KY 40601

4500 US Highway - 60 W

Union County

Method of Payment

Fund Type:

⊠State

□Federal

□Other:

□Federal Cash Request
 □Expenditure Reimbursement
 ⊠Automatic Payment
 □Lump Sum
 □Receipt of Invoice from Vendor

Description/Fund Source of Award and Fiscal Year:

Description:	FY26 Reading Diagnostic & Intervention	
Fund Source:	General Funds	Reimbursement Frequency:
MUNIS Project Number:	15RM	□Monthly
MOA Number:	2500002060	□Quarterly
		⊠Other: 1 st & 3 rd Quarters
Grant Authority (Source):	KRS 158.792	
		Einancial Paparting Mathod

Award Amount:

80000

Period of Award: July 1, 2025 – June 30, 2026

Financial Reporting Method: ⊠Electronic Submission - CDIP Report

Dother: Darment of

Special Instructions/Conditions: 1st quarter payment is held until district assurance statements are completed correctly and submitted to KDE. 3rd quarter payment should be held until completion of the mid-year survey.

ntucl

Authorized By (Name, Title): Micki Ray, Chief Academic Officer

Fund Type:

⊠State

□Federal

□Other:

Method of Payment

□Federal Cash Request

⊠Automatic Payment

□Lump Sum

Expenditure Reimbursement

□Receipt of Invoice from Vendor

Name and Address of Recipient

Agency Name:	
Street Address:	
City, State, Zip:	

KDE Contact Information

Program Consultant: Street Address: **Budget Contact:** Street Address: City, State Zip:

Erin Chavez 300 Sower Blvd Shelby Clontz 300 Sower Blvd. Frankfort, KY 40601

Webster County

28 State Rt 1340

Dixon, KY 42409

Description/Fund Source of Award and Fiscal Year:

D	escription:	FY26 Reading Diagnostic & Intervention		
F	und Source:	General Funds	Reimbursement Frequency:	
N	1UNIS Project Number:	15RM	□Monthly	
N	1OA Number:	2500002061	□Quarterly	
			⊠Other: 1 st & 3 rd Quarters	
G	irant Authority (Source):	KRS 158.792		
			Financial Reporting Method:	
A	ward Amount:	80000	Electronic Submission - CDIP Report	
P	eriod of Award: July 1, 2025 – Ju	ne 30, 2026 NTUCKY	Department	

Special Instructions/Conditions: 1st quarter payment is held until district assurance statements are completed correctly and submitted to KDE. 3rd quarter payment should be held until completion of the mid-year survey.

Authorized By (Name, Title): Micki Ray, Chief Academic Officer