## DEPARTMENT OF HEALTH AND HUMAN SERVICES ADMINISTRATION FOR CHILDREN AND FAMILIES NOTICE OF AWARD

SAI NUMBER:

PMS DOCUMENT NUMBER:

1. AWARDING OFFICE:			1			3. AWARD NO.:			4. AMEND. NO.
Office of Head Start							06CH010172-02-02 2		
			PE OF ACTION: 7. AWARD AU					:	
Service Supple			plement 42 USC 9871 E				JSC 9871 ET SE	EQ.	
8. BUDGET PERIOD: 9. PROJ			JECT PERIOD: 10. CAT NO.:						
08/01/2016 THRU 07/3	1/2017	08/01/	2015	THRU 07/3	1/202	0	93.600		
11. RECIPIENT ORGANIZATION: WEST ORANGE-COVE CONSOLIDATED INDEPENDENT S 801 Cordrey St Orange, TX 77630-3420 Grantee Authorizing Official: Rickie Harris, Superintendent						PROJE ad Star	CT / PROGRAM t	A TIT	LE:
13. COUNTY:	14. CONGI	R. DIST:				/ESTIC	SATOR OR PRO	GRA	M DIRECTOR:
Orange	36			Sherry Hard	lin		Head	Star	Director
16. APPROVED BUD	GET:			1	7. AV	/ARD (	COMPUTATION	:	
Personnel	\$ 1,082,5	559.00	A. NON-F	EDERAL SHAR	RE	\$	398,		
Fringe Benefits	\$ 290,1	90,193.00 B. FEDERAL SHARE\$				1,595,	739.	00 80%	
Travel	\$ 18,9	00.00					ARE COMPUTA		•
Equipment	\$	0.00							1,595,739.00
Supplies	\$ 38,0	00.00					AL SHARE DGET PERIOD.	,	0.00 1,552,585.00
Contractual	\$ 30,2	217.00	19. AMOL	JNT AWARDED	THIS	ACTIO	ON:	\$	43,154.00
Facilities/Construction	\$	0.00	20. FEDE	RAL \$ AWARD	ED TI	HIS PR	OJECT		10,101100
Other	\$ 93,7	80.00	PERIOD:					\$	3,121,306.00
Direct Costs	\$ 1,553,6	49.00							
Indirect CostsAt % of \$	\$ 42,0	90.00	21. AUTH Deductiv		TMEN	T OF F	PROGRAM INC	OME:	
In Kind Contributions	\$	0.00	22. APPLI	CANT EIN:		23.	PAYEE EIN:	24	. OBJECT CLASS:
Total Approved Budget	\$ 1,595,7	39.00	7460018	37		174	6001837A1	4	1.51
		25. FIN	ANCIAL IN	IFORMATION:			DUNS	82	5391659
ORGN DOCUMENT NO.	APPROPRIAT		CAN		NE	EW AM			NONFED %
06CH01017202	75-16-1	536	6-G06	4122	;	\$43,1	54.00		
						,			

26. REMARKS: (Continued on separate sheets)

27. SIGNATURE - ACF GRANTS OFFICER	DATE:	28. SIGNATURE(S) CERTIFYING I	FUND AVAILABILITY	
Ray Bishop	08/26/2016	Mr. Omar Barrett	08/26/2016	
29. SIGNATURE AND TITLE - PROGRAM OFFI	CIAL(S)	DATE:		
Mrs. Kimberly K Chalk - Regional Program N	Manager	08/26/2016		

SAI NUMBER:

### DEPARTMENT OF HEALTH AND HUMAN SERVICES ADMINISTRATION FOR CHILDREN AND FAMILIES NOTICE OF AWARD

PMS DOCUMENT NUMBER:

1. AWARDING OFFICE: Office of Head Start						<b>AWARD NO.:</b> 06CH010172-02-02 2 <b>4. AMEND. NO.</b> 2			
			TYPE OF ACTION: pplement			7. AWARD AUTHORITY: 42 USC 9871 ET SEQ.			
8. BUDGET PERIO 08/01/2016		7/31/2017		IECT PERI 1/2015	IOD: THRU	07/31/202	20	<b>10. CAT NO.:</b> 93.600	

#### 11. RECIPIENT ORGANIZATION:

WEST ORANGE-COVE CONSOLIDATED INDEPENDENT SCHOOL

#### STANDARD TERMS

Paid by DHHS Payment Management System (PMS), see attached for payment information. This
award is subject to the requirements of the HHS Grants Policy Statement (HHS GPS) thatare
applicable to you based on your recipient type and the purpose of this award.

This includes requirements in Parts I and II (available at http://www.hhs.gov/grants/policies-regulations/index.html of the HHS GPS. Although consistent with the HHS GPS, any applicable statutory or regulatory requirements, including 45 CFR Part 75, directly apply to this award apart from any coverage in the HHS GPS. This award is subject to requirements or limitations in any applicable Appropriations Act. This award is subject to the requirements of Section 106 (g) of the trafficking VictimsProtection Act of 2000, as amended (22 U.S.C. 7104). For the full text of the award term, go to http://www.acf.hhs.gov/discretionary-post-award-requirements.

This award is subject to the Federal Financial Accountability and Transparency Act (FFATA or Transparency) of 2006 subaward and executive componentian requirements.

This award is subject to the Federal Financial Accountability and Transparency Act (FFATA or Transparency) of 2006 subaward and executive compensation reporting requirements. For the full text of the award term, go to http://www.acf.hhs.gov/discretionary-post-award-requirements. This award is subject to requirements as set forth in 2 CFR 25.110 Central Contractor Registration (CCR) and DATA Universal Number System (DUNS). For full text go to http://www.acf.hhs.gov/discretionary-post-award-requirements.

Consistent with 45 CFR 75.113, applicants and recipients must disclose in a timely manner, in writing to the HHS awarding agency, with a copy to the HHS Office of Inspector General (OIG), all information related to violations of federal criminal law involving fraud, bribery, or gratuityviolations potentially affecting the federal award. Subrecipients must disclose, in a timelymanner, in writing to the prime recipient (pass through entity) and the HHS OIG, all information related to violations of federal criminal law involving fraud, bribery, or gratuity violationspotentially affecting the federal award. Disclosures must be sent in writing to the awarding agency and to the HHS OIG at the following addresses:

The Administration for Children for Children and Families U.S. Department of Health and Human Services Office of Grants Management ATTN: Grants Management Specialist 330 C Street, SW., Switzer Building Corridor 3200 Washington, DC 20201

U.S. Department of Health and Human ServicesOffice of Inspector GeneralATTN: Mandatory Grant Disclosures, Intake Coordinator330 Independence Avenue, SW, Cohen BuildingRoom 5527Washington, DC 20201Fax: (202) 205-0604 (Include "Mandatory Grant Disclosures" in subject line) or Email: MandatoryGranteeDisclosures@oig.hhs.gov

Failure to make required disclosures can result in any of the remedies described in 45 CFR75.371 Remedies for noncompliance, including suspension or debarment (See 2 CFR parts 180& 376 and 31 U.S.C. 3321).

This award is subject to the requirements as set forth in 45 CFR Part 87. This grant is subject to the requirements as set forth in 45 CFR Part 75. This award is subject to HHS regulations codified at 45 CFR 1301, 1302, 1303, 1304, 1305, 1306, 1307, 1308, 1309, and 1310. Attached are terms and conditions, reporting requirements, and payment instructions. Initial expenditure of funds by the grantee constitutes acceptance of this award.

# **AWARD ATTACHMENTS**

WEST ORANGE-COVE CONSOLIDATED INDEPENDENT SCHOOL

06CH010172-02-02

1. Remarks

## 26. REMARKS (Continued from previous page)

This action awards a one-time supplement in the amount of \$43,154 in Common Accounting Number (CAN) G064122 to be used to repair the playground area damaged by flooding at the North Early Learning Center, 801 Cordrey St, Orange TX 77630.

Head Start population: 239 children.

Designated Head Start service area: Orange County: Cities of Orange; West Orange; Bridge

City; Vidor; Mauriceville; Pinehurst; and unincorporated of Orange County, Texas.

Approved program options: Center-based.

## DEPARTMENT OF HEALTH AND HUMAN SERVICES ADMINISTRATION FOR CHILDREN AND FAMILIES NOTICE OF AWARD

SAI NUMBER:

PMS DOCUMENT NUMBER:

1. AWARDING OFFICE:			2. ASSISTANCE TYPE: 3. AWARD NO.:			.:	4	4. AMEND. NO.				
Office of Head Start			Discretionary Grant 06CH010172			1010172-0	02-01		1			
				PE OF ACTION: 7. AWARD AUTHORITY:								
Service Supp			pple	plement 42 USC 9871 ET SEQ.								
8. BUDGET PERIOD: 9. PRO			DJECT PERIOD: 10. CAT NO.:									
08/01/2016 THRU	07/3	1/201	7 08	′01/:	2015	THRU 07/3	1/202	0	93.600	)		
11. RECIPIENT ORGANIZATION: WEST ORANGE-COVE CONSOLIDATED INDEPENDENT 801 Cordrey St				IT S	SCHOOL			PROJE ad Star	CT / PRO t	OGRAN	1 TITLE	E:
Orange, TX 77630-3420	ا ا داداد		O	_1								
Grantee Authorizing Official: F	искіе н	iarris ,	, Superintende	11								
		1										
13. COUNTY:			. CONGR. DIS	T:		15. PRINCIPA Sherry Hard		/ESTIC				<b>I DIRECTOR:</b> Director
Orange		3	О			Onony nara	(111			Heau	Otarti	Director
16. APPROVE	D BUD	GET:		T		1	7. AV	VARD (	COMPUT	ATION	:	
Personnel		\$	φ B. FEDI			EDERAL SHAR	RE	\$		388,	147.00	0 20%
Fringe Benefits		\$				B. FEDERAL SHARE \$ 1,552,585.00 80%						
			290,193.0	49 FEDERAL CHART COMPUTATION.								
Travel		\$	18,900.0	A. TOTAL FEDERAL SHARE\$ 1,552,				1,552,585.00				
Equipment		\$	0.00	0.00 B. UNOBLIGATED BALANCE FEDERAL SHARE \$				0.00				
Supplies		\$	38,000.00	0.00 C. FED. SHARE AWARDED THIS BUDGET PERIOD\$ 1,525,567.0					1,525,567.00			
Contractual	******	\$	30,217.00	19. AMOUNT AWARDED THIS ACTION: \$ 27,01				27,018.00				
Facilities/Construction.		\$	0.00									
Other		\$	50,626.00	)	PERIOD: \$ 3,078,152.00						3,078,152.00	
Direct Costs		\$	1,510,495.00	<u> </u>								
Indirect Costs		\$	42,090.00	21. AUTHORIZED TREATMENT OF PROGRAM INCOME:								
At % of \$		•	12,000.00	`	Deductiv	ve						
In Kind Contributions		\$	0.00		22. APPLI	CANT EIN:		23.	PAYEE E	IN:	24. 0	OBJECT CLASS:
Total Approved Budget		\$	1,552,585.00		7460018	37		174	6001837	7A1	41.	.51
					ANCIAL IN	FORMATION:		1		DUNS	8253	391659
ORGN DOCUMENT NO.		APPR	ROPRIATION		CAN NO. NE		EW AM	IT.	UNOB	LIG.	NONFED %	
06CH01017202		7	5-16-1536		6-G06	4122	;	\$27,0	18.00			

26. REMARKS: (Continued on separate sheets)

SEP 13 2016

27. SIGNATURE - ACF GRANTS OFFICER	DATE:	28. SIGNATURE(S) CERTIFYING FUND AVAILABILITY				
Ray Bishop	08/05/2016	Mr. Omar Barrett	08/05/2016			
29. SIGNATURE AND TITLE - PROGRAM OFF	ICIAL(S)	DATE:				
Mrs. Kimberly K Chalk - Regional Program N	Manager	08/05/2016				

SAI NUMBER:

## DEPARTMENT OF HEALTH AND HUMAN SERVICES ADMINISTRATION FOR CHILDREN AND FAMILIES NOTICE OF AWARD

PMS DOCUMENT NUMBER:

AWARDING OFFICE: Office of Head Start		2. ASSISTANCE TYPE: Discretionary Grant	<b>3. AWARD NO.:</b> 06CH010172-02-01 1 <b>4. AMEND. NO.</b> 1
		6. TYPE OF ACTION: Supplement	7. AWARD AUTHORITY: 42 USC 9871 ET SEQ.
8. BUDGET PERIO 08/01/2016	DD: THRU 07/31/2017	9. PROJECT PERIOD: 08/01/2015 THRU 07/31/	10. CAT NO.: 93.600

#### 11. RECIPIENT ORGANIZATION:

WEST ORANGE-COVE CONSOLIDATED INDEPENDENT SCHOOL

#### STANDARD TERMS

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The Administration for Children for Children and Families U.S. Department of Health and Human Services Office of Grants Management ATTN: Grants Management Specialist 330 C Street, SW., Switzer Building Corridor 3200 Washington, DC 20201 AND

U.S. Department of Health and Human ServicesOffice of Inspector GeneralATTN: Mandatory Grant Disclosures, Intake Coordinator330 Independence Avenue, SW, Cohen BuildingRoom 5527Washington, DC 20201Fax: (202) 205-0604 (Include "Mandatory Grant Disclosures" in subject line) or Email: MandatoryGranteeDisclosures@oig.hhs.gov

Failure to make required disclosures can result in any of the remedies described in 45 CFR75.371 Remedies for noncompliance, including suspension or debarment (See 2 CFR parts 180& 376 and 31 U.S.C. 3321).

This award is subject to the requirements as set forth in 45 CFR Part 87. This grant is subject to the requirements as set forth in 45 CFR Part 75. This award is subject to HHS regulations codified at 45 CFR 1301, 1302, 1303, 1304, 1305, 1306, 1307, 1308, 1309, and 1310. Attached are terms and conditions, reporting requirements, and payment instructions. Initial expenditure of funds by the grantee constitutes acceptance of this award.

# 26. REMARKS (Continued from previous page)

This grant action awards supplemental funds for the cost-of-living adjustment increase for the Head Start program for Fiscal Year 2016.

Head Start population: 239 children.

Designated Head Start service area: Orange County: Cities of Orange; West Orange; Bridge

City; Vidor; Mauriceville; Pinehurst; and unincorporated of Orange County, Texas.

Approved program options: Center-based.