General Informati		2. Lead LEA NCES ID#: 2100108	
 PR/Award #: Project Title: 	B416A130210 kid-FRIENDLy	Z. Lead LEA NCES ID#. 2100100	
4. Grantee Name: Green River Regional Educational Cooperative			
5. Grantee Address: 230 Technology Way			
City:	Bowling Green		
		7::- 40404	
State	Kentucky	Zip: 42104	
6. Project Director	Name: Sandra Baker		
Title: Project D	Pirector		
Phone #: (270) 904	4-0910 Ext.: 107	Fax #: (270) 904-0921	
Email: sandra.b	aker@grrec.ky.gov		
Reporting Period 7. Reporting Period	Information I: From: 01/01/2013 To: 06/30/2014	4	
Budget Expenditu	res		
8. Budget Expendit	ures (Complete the budget table and	narrative sections in the accompanying forms.)	
Indirect Cost Infor 9. Indirect Costs a. Are you claim	mation ing indirect costs under this grant?	Yes (No	
b. If yes, do you	have an Indirect Cost Rate Agreemer	nt approved by the Federal Government?	
c. If yes, provide the following information:			
Period Covered by the Indirect Cost Rate Agreement: From: 07/01/2013 To: 06/30/2015			
Approving Federal agency:			
10. Performance Me a. Are complete submission?	data on performance measures through	ugh June 30, 2014 included in the APR	
11. To the best of r discloses all known	ny knowledge and belief, all data in the weaknesses concerning the accuracy	his performance report are true and correct and the report fully y, reliability, and completeness of the data.	
Sandra Baker		Project Director	
Name of Authorized	Representative	Title	
Signature-Field		$\frac{9-22-14}{\text{Date}}$	

General information	11 EA NOTO ID#, 2400409		
	ead LEA NCES ID#: 2100108		
3. Project Title: kid-FRIENDLy	ativo		
4. Grantee Name: Green River Regional Educational Cooperative			
5. Grantee Address: 230 Technology Way			
City: Bowling Green			
State: Kentucky Zip: 42104			
6. Project Director Name: Sandra Baker			
Title: Project Director			
Phone #: (270) 904-0910 Ext.: 107	Fax #: (270) 904-0921		
Email: sandra.baker@grrec.ky.gov			
Reporting Period Information 7. Reporting Period: From: 01/01/2013 To: 06/30/2014 Budget Expenditures			
8. Budget Expenditures (Complete the budget table and narrative sections in the accompanying forms.)			
Indirect Cost Information 9. Indirect Costs a. Are you claiming indirect costs under this grant? Yes No b. If yes, do you have an Indirect Cost Rate Agreement approved by the Federal Government? Yes No c. If yes, provide the following information:			
Period Covered by the Indirect Cost Rate Agreement: From: 07/01/2013 To: 06/30/2015			
Approving Federal agency:			
Performance Measures Status and Certification			
10. Performance Measures Status a. Are complete data on performance measures through June 30, 2014 included in the APR Submission?			
b. If no, when will the remainder of the data be available and submitted to the Department?			
11. To the best of my knowledge and belief, all data in this performance report are true and correct and the report fully discloses all known weaknesses concerning the accuracy, reliability, and completeness of the data.			
George Wilson	Executive Director		
Name of Authorized Representative	Title		
George Wilson	September 19, 2014		
Signature Field	Date		