Hello, Ann Bracknell
(Recipient User)

Sub Recipient Reporting

Sub Recipient Data
All fields marked with an asterisk (*) are required unless otherwise noted.

Report Information
- Award Type: Grant
- Award Number: S394A090001
- Prime DUNS: 829915219
- Calendar Year / Quarter: 2009 / 3

Sub Recipient Information
- * Sub Recipient DUNS Number: 159134618
- * Sub Recipient Congressional District: 07
- Sub Recipient Type: 2F.HB.M8.OH.VW

Current Reporting Cycle

Initial Submission - Prime and Sub Recipients enter drafts and submit Initial Submission reports.

Sub Recipient Legal Name: SHELTON STATE COMMUNITY COLLEGE
Sub Recipient DBA Name
Sub Recipient Address 1: 9500 OLD GREENSBORO RD
Sub Recipient Address 2
Sub Recipient City: TUSCALOOSA
Sub Recipient State: AL
Sub Recipient ZIP Code + 4: 354058522
Sub Recipient Country: USA

Sub Award Information

Sub Award Number: 10-1327-20A
* Amount of Sub Award: $2038406.00
* Total Sub Award Funds Disbursed: $0.00
* Sub Award Date: 10/01/2009

Sub Recipient Place of Performance

Note: If your Sub Recipient Place of Performance exists outside of the United States, only City and Country Code are required.

Address 1: 9500 Old Greensboro Road
Address 2
City: Tuscaloosa
Country Code: US - United States


10/9/2009
<table>
<thead>
<tr>
<th>State</th>
<th>AL - Alabama</th>
</tr>
</thead>
<tbody>
<tr>
<td>* ZIP Code + 4</td>
<td>35405 - 8522</td>
</tr>
<tr>
<td>* Congressional District</td>
<td>07</td>
</tr>
</tbody>
</table>

**Sub Recipient Highly Compensated Officers**

More information about these fields [ ]

**Note:** If you indicate "Yes" for Sub Recipient Indication of Reporting Applicability, at least one officer name and compensation is required.

<table>
<thead>
<tr>
<th>Sub Recipient Indication of Reporting Applicability</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Officer 1 Name</td>
<td></td>
</tr>
<tr>
<td>Officer 1 Compensation</td>
<td>$</td>
</tr>
<tr>
<td>Officer 2 Name</td>
<td></td>
</tr>
<tr>
<td>Officer 2 Compensation</td>
<td>$</td>
</tr>
<tr>
<td>Officer 3 Name</td>
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<tr>
<td>Officer 3 Compensation</td>
<td>$</td>
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<tr>
<td>Officer 4 Name</td>
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<tr>
<td>Officer 4 Compensation</td>
<td>$</td>
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<tr>
<td>Officer 5 Name</td>
<td></td>
</tr>
<tr>
<td>Officer 5 Compensation</td>
<td>$</td>
</tr>
</tbody>
</table>

**Report Audit Trail**

Created By  Ann Bracknell  
Date Created 10/02/2009 11:38 AM