FORM	APPROVED	ONED NO	0040	000

FINANCIAL STATUS REPORT									NUMBER Let	FEDERAL GRANT OR OTHER NUMBER  Letter of Credit  No. 12-35-		2a. FISCAL YEAR		
	ANIZATION (Name and complete	e address, including	4. UNIVERSAL IDEN	ΓIFIER NUME	BER		ENT ACCOUNT NUMBE	R OR	6. FINAL RE	PORT	7. BASI	S		
ZIP code. Also en	ter assigned State code.)					IDENTI	FYING NUMBER					CASH	ACCRUAL	
					8. P	ROJECT/GRANT	PERIOD			9. PERIOD CO	VERED BY TH	_		
							-							
10. STATUS OF	F FUNDS		ı				FOOD STAME	PROGRAM						
PROGRAMS	S/FUNCTIONS/ACTIVITIES	1 CERTIFICATION	2 COUPON ISSUANCE	PERFO	3 RMANCE CNTL.	4 REPORTING MGT.EVAL.	5 50% FUNDING FRAUD CNTL.	6 75% FUNDING FRAUD CNTL.	7 ADP OPER	8 FAIR HEARINGS	9 OTHE ACTIVIT		10 TOTAL	
a. Net outlays previou	usly reported													
b. Total outlays this re	eport period													
c. Less: Program Inc	ome credits													
d. Net outlays this rep (Line b minus line o														
e. Net outlays to date (Line a plus line d)	•													
f. Less: Non-Federal	share of outlays													
g. Total Federal shar (Line e minus line f														
h. Total unliquidated	obligations													
i. Less: Non-Federal obligations shown of	share of unliquidated on line h													
j. Federal share of un	nliquidated obligations													
k. Total Federal share and unliquidated ob														
Total cumulative an funds authorized	mount of Federal													
m. Unobligated balan	nce of Federal funds													
11. INDIRECT	a. TYPE OF RATEPROVISIONAL	PREDETERMINED	FINAL	FIXED			13. CERTIFICATION		SIGNATURE OFFICIAL	OF AUTHORIZED CE	RTIFYING	DATE RE	PORT SUBMITTED	
EXPENSE	b. RATE	c. BASE	d. TOTAL AMO	UNT	e. FEDERAL	. SHARE	this report is correct and	y knowledge and belief that I complete and that all outla						
12. REMARKS: Attac compliance with gove	ch any explanation deemed nece erning legislation.	ssary or information require	ed by Federal sponsori	ng agency in			and unliquidated obligat forth in the award docur	ions are for the purposes se nents.	t					
STAMP DATE		LAST UPDATED BY		LAST UP	DATED ON				NAME	TITLE		TE	LEPHONE NO.	
												AREA CC	DDE NUMBER	
							1						-	

FORM	APPROVED	OMB NO.	0348-	-003
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FINANCIAL STATUS REPORT									FEDERAL GRANT OR OTHER NUMBER  Letter of Credit No. 12-35-		2a. FISCAL YEAR		
	NIZATION (Name and complet	te address, including	4. UNIVERSAL IDENT	IFIER NUMBER		IENT ACCOUNT NUMBER	R OR	6. FINAL RE		7. BAS	IS		
ZIP code. Also ente	er assigned State code.)				IDENT	IFYING NUMBER					CASH	ACCRUAL	
					8. PROJECT/GRAN	T PERIOD			9. PERIOD COVE	RED BY T		_ACCROAL	
10. STATUS OF	FUNDS					FOOD STAMP	PROGRAM						
		11	12	13	14	15	16	17	18	19		20	
PROGRAMS/	FUNCTIONS/ACTIVITIES	E&T 100% GRANT	E&T 50% GRANT	E&T DEPENDENT CARE	E&T TRANS. & OTHER	OPTIONAL WORKFARE	OUTREACH	NUTRITION EDUCATION	REINVESTMENT	SAVI	E	PAGE 2 SUBTOTAL	
a. Net outlays previous	sly reported												
b. Total outlays this re	port period												
c. Less: Program Inco	me credits												
d. Net outlays this rep (Line b minus line c)													
e. Net outlays to date (Line a plus line d)													
f. Less: Non-Federal s	hare of outlays												
g. Total Federal share (Line e minus line f)	of outlays												
h. Total unliquidated o	bligations												
i. Less: Non-Federal s obligations shown or													
j. Federal share of unli	iquidated obligations												
k. Total Federal share and unliquidated obl													
I. Total cumulative am funds authorized	ount of Federal												
m. Unobligated balanc	e of Federal funds												
11. INDIRECT	a. TYPE OF RATEPROVISIONAL	PREDETERMINED	FINAL	FIXED		13. CERTIFICATION		SIGNATURE OFFICIAL	OF AUTHORIZED CEF	RTIFYING	DATE REPOR	T SUBMITTED	
EXPENSE	b. RATE	c. BASE	d. TOTAL AMOU	NT e. FEDEI	RAL SHARE	this report is correct and	knowledge and belief that complete and that all outlay						
12. REMARKS: Attach compliance with gover	n any explanation deemed nece rning legislation.	essary or information requi	red by Federal sponsoring	g agency in		and unliquidated obligati forth in the award docum	ons are for the purposes set nents.						
STAMP DATE		LAST UPDATED BY		LAST UPDATED ON				NAME	TITLE		TELEPH	HONE NO.	
											AREA CODE		
											-		

FORM	APPROVED	OMB NO.	0348-	-003
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FINANCIAL STATUS REPORT									NUMBER Let	FEDERAL GRANT OR OTHER NUMBER  Letter of Credit  No. 12-35-		2a. FISCAL YEAR		
	NIZATION (Name and complet	e address, including	4. UNIVERSAL IDENTI	FIER NUMB	ER		ENT ACCOUNT NUMBER	R OR	6. FINAL RE	PORT	7. BAS	ilS		
ZIP code. Also ent	er assigned State code.)					IDENTI	FYING NUMBER					CASH	ACCRUAL	
					8. PRO	JECT/GRANT	PERIOD			9. PERIOD COVE	ERED BY T		_/ICONO/IL	
10. STATUS OF	FUNDS						FOOD STAMP	PROGRAM						
PROGRAMS/	/FUNCTIONS/ACTIVITIES	21 50% FUNDING ADP DEV.	22 63% FUNDING ADP DEV.	75% FU ADP	JNDING	24 EBT ISSUANCE	25 ISSUANCE INDIRECT	26 EBT STARTUP	27 UNSPECIFIED PORTION OF OTHER	28 E&T ABAWD GRANT	29		30 PAGE 3 SUBTOTAL	
a. Net outlays previou	sly reported													
b. Total outlays this re	port period													
c. Less: Program Inco	me credits													
d. Net outlays this rep (Line b minus line c)														
e. Net outlays to date (Line a plus line d)														
f. Less: Non-Federal s	share of outlays													
g. Total Federal share (Line e minus line f)														
h. Total unliquidated o	bligations													
i. Less: Non-Federal s obligations shown o														
j. Federal share of unl	iquidated obligations													
k. Total Federal share and unliquidated ob														
I. Total cumulative am funds authorized	ount of Federal													
m. Unobligated baland	ce of Federal funds													
11. INDIRECT	a. TYPE OF RATEPROVISIONAL	PREDETERMINED	FINAL	_FIXED			13. CERTIFICATION		SIGNATURE OFFICIAL	OF AUTHORIZED CEF	RTIFYING	DATE REPOR	T SUBMITTED	
EXPENSE	b. RATE	c. BASE	d. TOTAL AMOU	NT	e. FEDERAL SH	HARE	I certify to the best of my knowledge and belief that this report is correct and complete and that all outlays		ys					
12. REMARKS: Attach compliance with gover	n any explanation deemed nece rning legislation.	ssary or information requi	red by Federal sponsorinç	g agency in			forth in the award docum	ons are for the purposes so nents.	PL					
STAMP DATE		LAST UPDATED BY		LAST UPI	DATED ON				NAME	TITLE		TELEPH	HONE NO.	
												AREA CODE		
												-		

FORM	APPROVED	ONED NO	0040 000

									ORIVI APPROVED DIV	ID NO. 0346-0039	
FINANCIAL STATUS REPORT			1. FEDERAL AGENCY			O WHICH REPORT IS SUBMITTED TION SERVICE, USDA	NUMBER <b>Lett</b>	RANT OR OTHER ter of Credit No. 12-35-	2a. FISCAL YEAR		
	NIZATION (Name and complete a er assigned State code.)	address, including	IDENTIF			RECIPIENT ACCOUNT NUMBER OR DENTIFYING NUMBER	6. FINAL REP	PORT	7. BASIS		
									CASH	_ ACCRUAL	
					8. PROJECT/	GRANT PERIOD		9. PERIOD COVERE	D BY THIS REPORT		
10. STATUS OF	FUNDS					FOOD STAMP PROGRAM					
PROGRAMS/	/FUNCTIONS/ACTIVITIES	31 BENEFIT DATA	32 ENHANCED FUND-QC	_							
a. Net outlays previous	sly reported			_							
b. Total outlays this re	port period			_							
c. Less: Program Inco	me credits										
d. Net outlays this rep (Line b minus line c)	ort period )										
e. Net outlays to date (Line a plus line d)											
f. Less: Non-Federal s	share of outlays			_							
g. Total Federal share (Line e minus line f)	e of outlays			_							
h. Total unliquidated o	obligations			_							
i. Less: Non-Federal s obligations shown or				_							
j. Federal share of unli	iquidated obligations			_							
k. Total Federal share and unliquidated obl											
I. Total cumulative am funds authorized	ount of Federal										
m. Unobligated balanc	ce of Federal funds										
11. INDIRECT	a. TYPE OF RATEPROVISIONAL	PREDETERMINED	FINAL	_FIXED		13. CERTIFICATION	SIGNATURE OFFICIAL	OF AUTHORIZED CERTIF	YING DATE REPOR	T SUBMITTED	
		d. TOTAL AMOUI	d. TOTAL AMOUNT e. FEDERAL SHARE		I certify to the best of my knowledge and belief that this report is correct and complete and that all outla	ys					
12. REMARKS: Attach compliance with gover	n any explanation deemed necess rning legislation.	ary or information requir	red by Federal sponsoring	agency in		and unliquidated obligations are for the purposes so forth in the award documents.	et				
STAMP DATE		LAST UPDATED BY		LAST UPI	DATED ON		NAME	TITLE	TELEP	HONE NO.	
								,,,,,,,	AREA CODE		
									-		