

**U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
ADMINISTRATION FOR CHILDREN AND FAMILIES**

**FORM ACF-535
LOW INCOME HOME ENERGY ASSISTANCE PROGRAM
QUARTERLY ALLOCATION ESTIMATES**

Paperwork Act Notice: This information is used by the Administration for Children and Families to determine the quarterly allocation estimates for the LIHEAP program. This is public information and is published in an annual report to Congress.

Reporting Burden Notice: The reporting burden imposed by this collection of information is estimated to average .25 hours per response. This includes time for reviewing instructions, searching data resources, gathering and maintaining the data needed, and completing and reviewing the information collected.

Note: An Agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

STATE	SUBMISSION (MARK BOX) [] New [] Revised	REPORT FOR FISCAL YEAR
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For each quarter indicated, enter the estimated percentage of the annual funding required for that quarter.

1 ST QUARTER: _____ %

2 ND QUARTER: _____ %

3 RD QUARTER: _____ %

4 TH QUARTER: _____ %

TOTAL: _____ **100** _____ %

**IF THE STATE FAILS TO SUBMIT THIS REPORT,
AWARDS WILL BE ISSUED IN FOUR EQUAL AMOUNTS**

Signature: Approving Official	Typed Name, Title, Agency Name
Date Submitted:	

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Submit Completed Reports to:

**Administration for Children and Families
Office of Administration
Office of Grants Management
Division of Mandatory Grants
Attn: Lydia Peele, Mail Stop: OA/OGM/DMG
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