

Submission Studio

Form Name: FNS-667 (7-08)
Form Description: Report of TEFAP Administrative Costs
Program: The Emergency Food Assistance Program
State: AR
Agency Code: 0592901 **Agency Name:** AR DEPT OF HUMAN SERVICES
Program Time: September 2018
Submission Type: Final **Revision:** 1
Submission Status: New Submission

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7. Status of Funds Remarks

7. Status of Funds	Activities/Functions				
	Transactions	I - State Level Costs	II - State Paid EFO Costs	III - Local-Paid EFO Costs	IV - Total Cost
a. Net Outlays Previously Reported					
b. Net Outlays This Quarter					
c. Net Outlays To Date (Sum of lines a and b)					
State Agency's Share Of Net Outlays, Consisting Of:					
d. Third-Party In-Kind Contributions					
e. Cash Outlays					
f. Total State Agency's Share of Net Outlays (Sum of lines d and e)					
g. Federal Share of Net Outlays (Lines c minus line f)					
h. Total Unliquidated Obligations					
i. State Agency's Share of Unliquidated Obligations					
j. Federal Share of Unliquidated Obligations (Line h minus line i)					
k. Total Federal Share (Sum of lines g and j)					
l. Total Federal Funds Authorized					
m. Unobligated Balance of Federal Funds (Line l minus k)					