



Submission Studio

Form Name: FNS-101 (12-08)  
Form Description: Participation in Food Programs-By Race  
Program: SNAP Electronic Benefits Transfer Operational Project  
State: CT  
Agency Code: 0992501 Agency Name: CT DEPT OF SOCIAL SERVICES  
Program Time: July 2019  
Submission Type: Annual Revision: 0  
Submission Status: New Submission

Analyze Save Edit Check Post Quit

Participation in Food Program by Race SA Totals Remarks

| Remarks | Remarks |
|---------|---------|
| Remarks |         |



### Submission Studio

**Form Name:** FNS-101 (CNMI) (10-17)  
**Form Description:** Participation in Food Programs - By Ethnicity  
**Program:** SNAP Territories  
**State:** MP  
**Agency Code:** 7593101      **Agency Name:** CNMI COMMUNITY & CULTURAL AFFAIRS  
**Program Time:** July 2018  
**Submission Type:** Annual      **Revision:** 0  
**Submission Status:** New Submission

Save   Edit Check   Post   Quit

Participation in Food Programs by Ethnicity   SA Totals   **Remarks**

| Remarks | Remarks |
|---------|---------|
| Remarks |         |