FORM OCSE-396: CHILD SUPPORT ENFORCEMENT PROGRAM QUARTERLY FINANCIAL REPORT PART 1: EXPENDITURES and ESTIMATES

Stat	te:	Current (Claiming) Quarter Ended:		Next (Estimating) Quarter Ending:			Mark Initial Report Box: Rev'd Report	
	66% FFP rate for all cost	Current Qua	arter Claims	Prior Quarter Adjustments		Next Qua	Next Quarter Estimate	
ca	tegories, except where noted	(A) Total	(B) Federal Share	(C) Tota	al (D) Federal Sha		(F) Federal Share	
SE	CTION A. EXPENDITU	RES					•	
1a.	Admin. Costs w/ Incentive Payments (No FFP)	\$	\$	\$	\$	\$	\$	
1b.	Administrative Costs: Regular	\$	\$	\$	\$	\$	\$	
1c	Administrative Costs: Non-IV-D:	\$	\$	\$	\$	\$	\$	
1d	Admin Costs w/ Incentives Under Waiver (No FFP):	\$		\$		\$		
2a.	Program Income: Fees, Costs Recovered:	\$	\$	\$	\$			
2b.	Program Income: Interest, Other	\$	\$	\$	\$			
3.	Net Administrative Costs:	\$	\$	\$	\$	\$	\$	
4.	ADP Development Costs with APD Required:	\$	\$	\$	\$	\$	\$	
5.	ADP Operational Costs with APD Required	\$	\$	\$	\$	\$	\$	
6.	(Reserved)							
7.	Total Costs Claimed:	\$	\$	\$	\$	\$	\$	
SE	CTION B. FEES FOR	SERVICES / FEDE	RAL & STATE S	HARES of (COSTS			
8.	(Reserved)							
9.	Federal Share of Title IV-A Child Support Collections:	From Form OCSE-34 Line 10b, Col G ==>	\$				\$	
10.	Fees - Federal FPLS:	Enter Total Fee in Column B ===>	\$					
11.	Fees - CSENet:	Enter Total Fee in Column B ===>	\$					
12.	Fees - Pre-Offset Service:	Enter Total Fee in Column B ===>	\$					
13.	Adjustments:	Enter Total Amount in Column B ===>	\$					
14.	Net Federal Share of Expenditures:		\$		\$		\$	
	State Share of Expenditures:	Enter State Share Only in Column B ===>	\$	Enter State Sha in Column D ==:			\$	
SECTION C. INCENTIVE PAYMENTS								
	Estimate of Earned entive Payments:						\$	
T1.	This certifies that the information on this form is accurate and true to the best of my knowledge and belief. This also certifies that the State share of expenditures							
esti	mated for the Next Quarter are			St OT MY KNOW		o certifies that the State s	mare of expenditures	
Sigr	Signature, IV-D Agency Director Signature, Approving Official Date: Date:				joignature, Approving Official			

Typed Name, Title, Agency	Typed Name, Title, Agency

Form OCSE-396 - Part 1 (06/01/2021)

Unchanged from 10/01/2017 version

	U.S. DEPARTMENT OF HEALTH and HUMAN SERVICES Office of Child Support Enforcement						OMB APPROVED Control No. 0970-0181 Expires: XX/XX/XXXX
	FORM OCSE-396: CHILD SUPPORT ENFORCEMENT PROGRAM QUARTERLY FINANCIAL REPORT PART 2: PRIOR QUARTER EXPENDITURE ADJUSTMENTS						
	State:		Current (Quarter I	Claiming) Ended:	Ma	lark Box:	Initial Report Revised Report
	(A) Total Adjustment	(B) Federal Share of Adjustments	(C) Funding Category	(D) Applicable to Fiscal Quarter Ended		ntification ar applicable)	nd Explanation

		Quarter En	rteviseu rteport				
(A) Total Adjustment	(B) Federal Share of Adjustments	(C) Funding Category	(D) Applicable to Fiscal Quarter Ended	(E) Adjustment Id (i	entification and Explanation f applicable)		
SECTION A: INCR	SECTION A: INCREASING ADJUSTMENTS						
\$	\$						
\$	\$						
\$	\$						
\$	\$						
\$	\$						
\$	\$						
\$	\$						
\$	\$						
\$	\$						
\$	\$	<=== TOTAL INCREASIN	NG ADJUSTMENTS				
SECTION B: DEC	SECTION B: DECREASING ADJUSTMENTS						
\$	\$						
\$	\$						
\$	\$						
\$	\$						
\$	\$						
\$	\$						
\$	\$						
\$	\$						
\$	\$						
\$	\$ <=== TOTAL DECREASING ADJUSTMENTS						

* Funding Categories: (with equivalent line numbers from Part 1):
CEN - Administrative Costs Using Incentive Payments (66% FFP Rate: FY 2009-2010, Otherwise 0% FFP Rate): Line 1a.
ADM - Administrative Costs (66% FFP Rate): Lines 1b and 1c
CENW - Administrative Costs Using Incentive Payments Under Waiver (0% FFP Rate): Line 1d.
INC - Program Income from fees, interest, etc. (66% FFP Rate): Lines 2a and 2b
DEV - CSES Developmental Costs with an Approved Advanced Planning Document (APD) (66% FFP Rate): Line 4
OPN - CSES Operational Costs with an Approved Advanced Planning Document (APD) (66% FFP Rate): Line 5
ADP - CSES Costs where an Approved Advanced Planning Document (APD) is not required (66% FFP Rate): Line 6

Form OCSE-396 - Part 2 (06/01/2021)

Unchanged from 10/01/2014 version