

***CARS #: 234***

**PROFILE ID TITLE:** FSET Transp 50% local match to fed

**FULL TITLE:** FSET Transportation –50% Local Match to Federal funds

**REPORTING INSTRUCTIONS:** Report FSET expenses funded with 50% local funds matched with 50% federal funds based on your approved plan. Approved expenses are any participant reimbursement and transportation costs that directly relate to the FSET program. Report 100% of your expenses and you will be reimbursed with the 50% federal match.

**PROFILE TYPE:** Contract Controlled (F)

**EXPENSES ROLL TO THIS PROFILE FROM:** N/A

**EXPENSES ROLL FROM THIS PROFILE TO:** N/A

**EXPENSES ALLOCATE TO THIS PROFILE FROM:** N/A

**EXPENSES ALLOCATE FROM THIS PROFILE TO:** N/A

**REIMBURSEMENT %:** 50

**PREPAYMENTS:** 0

**LIMITATIONS:** N/A

**FEDERAL CATALOG (CFDA) NUMBER:** 10.561

**DIVISION RESPONSIBLE:** Division of Health Care Access and Accountability