PROFILE NAME: SNAP NUTR ED Grant

DIVISION RESPONSIBLE: DPH

PROFILE TYPE: F – Contract Controlled

CONTRACT TYPE: Other

REIMBURSEMENT PERCENTAGE: 100.00

LIMITATIONS: N/A

EXPENSES ROLL TO THIS PROFILE FROM: N/A

EXPENSES ROLL FROM THIS PROFILE TO: 154661

EXPENSES ALLOCATE TO THIS PROFILE FROM: N/A

EXPENSES ALLOCATE FROM THIS PROFILE TO: N/A

CATALOG OF FEDERAL DOMESTIC ASSISTANCE (CFDA) NUMBER: N/A

PROFILE DESCRIPTION:

1) DHFS Financial Management Manual, allowable cost policies apply.
2) All expenses must be in compliance with the federally approved Food Stamp Nutrition Education State Plan for the time period and must be allowable costs to implement and continue breastfeeding peer counselor support to Food Stamp eligible individuals.
3) Report expenditures on DMT 855 monthly. The local agency must report allowable expenses and the State will reimburse up to the contract limit to the local agency.
4) Final expenditure reports are due November 30th.