



STATE OF WISCONSIN
DEPARTMENT OF HEALTH SERVICES
DIVISION OF ENTERPRISE SERVICES
BUREAU OF FISCAL SERVICES

**COMMUNITY AIDS REPORTING SYSTEM (CARS)
ACCOUNTING REPORTS MANUAL**

CARS PROFILE ID: 560359

PROFILE NAME: COVID19 C-2 HOME MEAL

FULL PROFILE NAME: n/a

DIVISION RESPONSIBLE: Division of Public Health

PROFILE TYPE: F - Contract Controlled

CONTRACT TYPE: Other

REIMBURSEMENT PERCENTAGE: 100%

LIMITATIONS: 4-month funding control

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

**CATALOG OF FEDERAL DOMESTIC ASSISTANCE
(CFDA) NUMBER:** 93.045

REPORTING INSTRUCTIONS: Report expenses to this profile for Families First Coronavirus Response Act, Older Americans Act Title III - Congregate Meals.