



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: 560451***

**PROFILE NAME:** FOSTER GRANDPARENT GPR

**DIVISION RESPONSIBLE:** Division of Public Health

**PROFILE TYPE:** F – Contract Controlled

**CONTRACT TYPE:** Other

**REIMBURSEMENT PERCENTAGE:** 100.000

**LIMITATIONS:** Contract controlled to 6/12ths

**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:** 435-560451

**PROFILE DESCRIPTION:** Report all expenses associated with delivery of the Foster Grandparent Program