CHILD CARE AND DEVELOPMEN FOR SERVICES PROVIDED FROM		NUAL AGGREGA								OMB App	oroval Number Expires:		
Complete Name of Grantee		CATEGORY/TYPE OF CHILD CARE											
r									LEGALLY OPERATING PROVIDER (LICENSE CATEGORY				
Address:		PROVIDER IN A				UNAVAILABLE IN A STATE OR LOCALITY) IN A					oom		
						CHILD'S HOME BYA FAMILY HOME BY A GROUP HOME BY					\		
Contact Person, Phone & Email:	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	
Contact rerson, r none & Linan.	TOTAL	Child's Home	Family Home	Group Home	Center	Relative	Non-Relative	Relative	Non-Relative	Relative	Non- Relative	Center	
1. Number of families receiving child care services													
2. Number of children receiving													
child care services													
Payment Methods:													
3. Number of children served													
through grants or contracts										-			
4. Number of children receiving													
child care services through certificates and/or cash													
5. <u>Of children served through</u>													
certificates, number of children													
served through cash payments													
6a. Number of child care providers													
receiving CCDF funding by type of													
care													
6b. Total licensed capacity in centers													
and homes (No longer collected as of FFY 2003)													
7. Estimated number of families						ļ	•	•	•	••		•	
receiving consumer education													
How is the estimated number of					-			-					
families receiving consumer													
education determined?													
Below, Indicate Methods Used on													
a Regular Basis:													
8. Information to subsidized families	$Y \Box N \Box$												
concerning the choice of a certificate	NA 🗆												
or grant/contract 9. Resource and referral counseling	YDND	-											
10. List of legally operating child													
care providers													
11. Brochure, booklet or written	Y D N D												
material about types of care and													
quality of care													
12. Checklist of health and safety	$Y \Box N \Box$												
concerns													
13. Copies of child care regulatory information	Y 🗆 N 🗆												
14. Familiarization with child care	Y 🗆 N 🗆												
provider complaint policies (any method)													
method) 15. Mass media such as: television,	YDND												
radio, internet sites, billboards, etc.													
16. Other (Please explain in next	YDND												
field)													
If other indicated please explain.													

CHILD CARE AND DEVELOPMENT FUND ANNU FOR SERVICES PROVIDED FROM	JAL REPORT THROUGH	Page 2 - ACF-800	OMB Approval Number: 0970-0150 Expires: 11/30/2009				
Grantee: Contact Person & Phone:							
17. Is this report based on pooled CCDF and non-CCE	PF funds?	YONO					
18. If this report is based on pooled CCDF and non-CC which are CCDF?	CDF funds, what is the percent of funds	%					
19. If this report is based on pooled CCDF and non- CCDF funds, please indicate which funds are included in the pool.	CCDF Funds: Do you include Pre-K funds as part of M Y□N□ State funds u Y□N□ MOE funds?	used to match Federal funds?	Non-CCDF Funds: Y □ N □ Title XX Y □ N □ State-only child care funds Y □ N □ Welfare to Work Y □ N □ Title IV-B or Title IV-E Y □ N □ Private/donated funds Y □ N □ Food Stamp child care funds Y □ N □ Non-compulsory school funds Y □ N □ TANF funds not transferred into Discretionary Fund Y □ N □ HUD child care funds Y □ N □ HUD child care funds				
 20. State or Territory conducts routine unannounced in providers. (No longer collected as of FFY 2003) 21. Please enter explanatory comments regarding any of the statement of		(Optional)					
22. Please attach any reports, materials, information de quality funds.		(Optional)					