

**CHILD SUPPORT ENFORCEMENT PROGRAM EXPENDITURE REPORT  
PART 1: QUARTERLY REPORT OF EXPENDITURES and ESTIMATES**

<b>State:</b>	<b>Current (Claiming) Quarter Ended:</b>	<b>Next (Estimating) Quarter Ending:</b>	<b>Mark Box:</b>	Initial Report Rev'd Report
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	Current Quarter Claims		Prior Quarter Adjustments		Next Qtr. Est.
	(A) Total	(B) Federal Share	(C) Total	(D) Federal Share	(E) Total

**SECTION A. EXPENDITURES**

<b>1a.</b> Admin Costs: IV-D (0% FFP)	\$		\$		
<b>1b.</b> Admin Costs: IV-D (66% FFP)	\$	\$	\$	\$	\$
<b>1c.</b> Adm Costs: Non IV-D (66% FFP).....	\$	\$	\$	\$	\$
<b>2a.</b> Fees and Costs Recov'd (66% FFP)	\$	\$	\$	\$	
<b>2b.</b> Interest, Other Income (66% FFP)	\$	\$	\$	\$	
<b>3.</b> Net Admin. Costs	\$	\$	\$	\$	\$
<b>4.</b> ADP Developm't with APD Req'd	\$	\$	\$	\$	\$
<b>5.</b> ADP Operational with APD Req'd	\$	\$	\$	\$	\$
<b>6.</b> Other ADP w/o APD Req'd	\$	\$	\$	\$	\$
<b>7.</b> Total Costs Claimed.....	\$	\$	\$	\$	\$

**SECTION B. INCENTIVE PAYMENTS / FEDERAL SHARE / FEES FOR SERVICES**

<b>8.</b> Est. Incentive Payment					\$
<b>9.</b> Fed Share of IV-A Collect.	Amt. from OCSE-34A Line 10b, Col G ==>	\$			\$
<b>10.</b> Fees: Federal FPLS...	Enter Total Fee in Column B ==>	\$			
<b>11.</b> Fees: CSENet.....	Enter Total Fee in Column B ==>	\$			
<b>12.</b> Fees: Pre-Offset Svc..	Enter Total Fee in Column B ==>	\$			
<b>13.</b> Adjustments	Enter Total Amount in Column B ==>	\$			
<b>14.</b> Net Fed Share of Expenditures..		\$		\$	\$
<b>15.</b> State Share of Expenditures..	Enter State Share Only in Column B ==>	\$	Enter State Share Only in Column D ==>	\$	\$

This certifies that the information on this form is accurate and true to the best of my knowledge and belief. This also certifies that the State share of expenditures estimated for the Next Quarter are, or will be, available as required by law.

Signature, IV-D Agency Director  <div style="text-align: right;">Date:</div>	Signature, Approving State Official  <div style="text-align: right;">Date:</div>
Typed Name, Title, Agency	Typed Name, Title, Agency

**CHILD SUPPORT ENFORCEMENT PROGRAM EXPENDITURE REPORT  
PART 2: PRIOR QUARTER EXPENDITURE ADJUSTMENTS**

State:	Current (Claiming) Quarter Ended:	Mark Box:	<input type="checkbox"/> Initial Report <input type="checkbox"/> Revised Report
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(A) Total Adjustment	(B) Federal Share of Adjustments	(C) Funding Category *	(D) Applicable to Fiscal Quarter Ended	(E) Federal Audit Number (if any) Other Comments
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**SECTION A: INCREASING ADJUSTMENTS**

\$	\$			
\$	\$			
\$	\$			
\$	\$			
\$	\$			
\$	\$			
\$	\$			
\$	\$			
\$	\$			
\$	\$			
\$	\$	<b>&lt;=== TOTAL INCREASING ADJUSTMENTS</b>		

**SECTION A: DECREASING ADJUSTMENTS**

\$	\$			
\$	\$			
\$	\$			
\$	\$			
\$	\$			
\$	\$			
\$	\$			
\$	\$			
\$	\$			
\$	\$			
\$	\$	<b>&lt;=== TOTAL DECREASING ADJUSTMENTS</b>		

\$	\$	<b>&lt;=== NET ADJUSTMENTS (Section A minus Section B)</b>		
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\* Funding Categories: (with equivalent line numbers from Part 1):  
 CEN - Administrative Costs Using Incentive Payments (0% FFP Rate): Line 1a.  
 LAB - Laboratory Costs (90% FFP Rate - Pre FY 2007 costs only): Line 1b  
 ADM - Administrative Costs (66% FFP Rate): Lines 1b and 1c  
 INC - Program Income from fees, interest, etc. (66% FFP Rate): Lines 2a and 2b  
 DEV - CSES Developmental Costs with an Approved Advanced Planning Document (APD) (66% FFP Rate): Line 4  
 OPN - CSES Operational Costs with an Approved Advanced Planning Document (APD) (66% FFP Rate): Line 5  
 ADP - CSES Costs where an Approved Advanced Planning Document (APD) is not required (66% FFP Rate): Line 6