

## Data Collection Form for the Grant Information Management System (GIMS)

Date Prepared:		
	OER Representative:	
A. Agency Information:		
Project Name:	Mailing Address:	
Subrecipient:	Physical Address:	
Award Amount: \$	City, State, Zip:	
Agreement #: OER-	Phone Number:	
Authorized Representative:	Fax Number:	
Position / Title:	Email Address:	
Agency Classification:  State Agency County Government Local Government	ment   Education   Tribal   Faith Based   Other	
Employer Identification Number:	Have you previously conducted business with the State using this EIN? Yes No	
In NO, please go to <a href="http://www.gao.az.gov/onlineforms/forms/AZForm">http://www.gao.az.gov/onlineforms/forms/AZForm</a> . Please return the completed W-9 with this submittal.	Z subw-9 010410.pdf and download the State of Arizona Substitute W-9	
DUNS:	CCR #:	
In which Congressional (Federal) District is your agency? District Number:  To verify districts, go to <a href="http://www.azredistricting.org">http://www.azredistricting.org</a> and click on Final Maps.		
In which Legislative (State) District is your agency?  District Number:		
B. Financial Information:		
Approximately how much Federal funding will your agency expend in this current fiscal year? \$		
What is your agency's fiscal year-end date?	Accounting Method: Cash Accrual	
Does your agency undergo an annual independent audit in accor	rdance with OMB Circular A-133? Yes No	
Please provide contact information for your auditing firm:		
Agency Name:	Mailing Address:	
Contact Name:	City, State, Zip:	
Phone Number:	Fax Number:	



## Data Collection Form for the Grant Management Information System (GIMS)

## **C.** Contact Information:

Who will be the grant administrator from your agency?	
Name:	Mailing Address:
Position / Title:	Physical Address:
Phone Number:	City, State, Zip:
Fax Number:	Email Address:
Who will be the financial representative from your agency?	
Name:	Mailing Address:
Position / Title:	Physical Address:
Phone Number:	City, State, Zip:
Fax Number:	Email Address: