**Funding Relationship to DHS/DCF/DWD and/or another Recipient**

* Recipients may receive Federal funding through one or more State Agency to administer one or more Federal programs or activities.
* Clarifying the multiple funding streams will help the State to identify mutually funded recipients as well as to determine oversight and coordination between the State Agencies.

|  |  |  |
| --- | --- | --- |
|  | Contract or Program Name | Funding Amount ($) |
| Our agency/entity has a direct contract, direct grant, funding agreement or purchase order (PO) with DHS to receive Federal funding. | **DHS** Yes |  No |  1.No |  |
| 2. |  |
| 3. |  |
| Our agency/entity has a direct contract, direct grant funding agreement or purchase order (PO) with DCFto receive Federal funding  | **DCF**Yes | No | 1. |  |
| 2. |  |
| 3. |  |
| Our agency/entity has a direct contract, direct grant, funding agreement, or purchase order (PO) with DWD to receive Federal funding  | **DWD**Yes | No | 1. |  |
| 2. |  |
| 3. |  |
| Our agency/entity has a direct contract, grant, funding agreement, or purchase order (PO) with aCounty or Consortium that receives Federal funding from DCF/DHS/DWD.Name of County or Consortium? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Yes | No | 1. |  |
| 2. |  |
| 3. |  |
| Our agency/entity has a sub-contract with another entity that receives Federal funding from DHS/DCF/DWD.Name of the entity/entities: | Yes | No | 1. |  |
| 2. |  |
| 3. |  |

**Instructions for completing Funding Relationship to DHS, DCF or DWD**

Fill in all the blanks on the above form. Your response should identify all Federal funding you receive from each of the State Agencies or recipients.