

CALIFORNIA DEPARTMENT OF EDUCATION
 ATTENDANCE AND FISCAL REPORT FOR
 SPECIAL PROGRAMS FOR THE
 SEVERELY HANDICAPPED
 CDNFS 1400 Page 1 of 4 (11/18)

Mail completed report to:
 California Department of Education
 Child Development and
 Nutrition Fiscal Services
 1430 N Street, Suite 2213
 Sacramento, CA 95814-5901

Report Month/Year

Fiscal Analyst

Contract Number

County

Vendor Code

Full Name of Contractor

Certified Children	Cumulative Prior Period	Current Period	Cumulative Fiscal Year
Days of Enrollment			
Days of Operation			
Days of Attendance			

Revenue	Cumulative Prior Period	Current Period	Cumulative Fiscal Year
Child Nutrition Programs			
County Maintenance of Effort (EC Section 8279)			
Other:			
Subtotal			
Transfer From Reserve			
Interest Earned on Child Development Apportionment Payments			
Total Revenue			
Unrestricted Income, Other:			

CALIFORNIA DEPARTMENT OF EDUCATION
 ATTENDANCE AND FISCAL REPORT FOR
 SPECIAL PROGRAMS FOR THE
 SEVERELY HANDICAPPED
 CDNFS 1400 Page 2 of 4 (11/18)

Report Month/Year

Fiscal Analyst

Contract Number

County

Vendor Code

Full Name of Contractor

Reimbursable Expenses	Cumulative Prior Period	Current Period	Cumulative Fiscal Year
1000 Certificated Salaries			
2000 Classified Salaries			
3000 Employee Benefits			
4000 Books and Supplies			
5000 Services and Other Operating Expenses			
6100/6200 Other Approved Capital Outlay			
6400 New Equipment (program-related)			
6500 Equipment Replacement (program-related)			
Depreciation or Use Allowance			
Start-up Expenses (service level exemption)			
Budget Impasse Credit			
Indirect Costs (Include in Administrative Cost)			
Non-Reimbursable (State Use Only)			
Total Reimbursable Expenses			
Total Administrative Cost (included in section above)			

Approved Indirect Cost Rate:

Comments:

No Supplemental Revenue check this box and omit page 3.

CALIFORNIA DEPARTMENT OF EDUCATION
 ATTENDANCE AND FISCAL REPORT FOR
 SPECIAL PROGRAMS FOR THE
 SEVERELY HANDICAPPED
 CDNFS 1400 Page 3 of 4 (11/18)

Report Month/Year Contract Number
 Fiscal Analyst County
 Vendor Code

Supplemental Revenue	Cumulative Prior Period	Current Period	Cumulative Fiscal Year
Enhancement Funding			
Other:			
Total Supplemental Revenue			
Supplemental Expenses	Cumulative Prior Period	Current Period	Cumulative Fiscal Year
1000 Certificated Salaries			
2000 Classified Salaries			
3000 Employee Benefits			
4000 Books and Supplies			
5000 Services and Other Operating Expenses			
6000 Other Approved Capital Outlay			
Depreciation or Use Allowance			
Indirect Costs			
Non-Reimbursable Expenses 6100-6500			
Total Supplemental Expenses			

CALIFORNIA DEPARTMENT OF EDUCATION
 ATTENDANCE AND FISCAL REPORT FOR
 SPECIAL PROGRAMS FOR THE
 SEVERELY HANDICAPPED
 CDNFS 1400 Page 4 of 4 (11/18)

Report Month/Year

Fiscal Analyst

Contract Number

County

Vendor Code

Full Name of Contractor

Summary	Cumulative Prior Period	Current Period	Cumulative Fiscal Year
Total Certified Days of Enrollment			
Days of Operation			
Days of Attendance			
Restricted Program Income			
Transfer from Reserve			
Interest Earned on Apportionment Payments			
Start-up Expenses (service level exemption)			
Total Reimbursable Expenses			
Total Administrative Cost			

I hereby certify that, to the best of my knowledge and belief, the information in this report is accurate and complete.

Signature of Contractor Designee (Original Signature Required) Date

Contractor Designee Email Contractor Designee Phone

Contractor Fiscal Contact Name and Title

Contractor Fiscal Contact Email Contractor Fiscal Contact Phone