REPORT 374

U.S. DEPARTMENT OF AGRICULTURE - FOOD AND NUTRITION SERVICE LETTER OF CREDIT

PC1 / 100

NOTICE OF REVISED PROGRAM LIMITATIONS FOR LOC NO: 52171 LOC AMENDMENT NO: 000

EFFECTIVE DATE: 10/02/2017

FOR APPORTIONMENT YEAR: 2018

FRANKFORT

KY HEALTH AND FAMILY SERVICES 5TH FLOOR WEST WING CHR B

KY 40601

TO WHOM IT MAY CONCERN:
THE ABOVE LETTER OF CREDIT, HELD IN YOUR FAVOR BY THE TREASURY REGIONAL DISBURSING OFFICE NAMED HAS BEEN REVISED TO
REFLECT THE CHANGE(S) SHOWN BELOW FOR THE PROGRAM(S) INDICATED.

ACCOUNT ID	CFDA NO.	PREVIOUS LEVEL	INCREASE/DECREASE	C	CURRENT LEVEL
201818W100345	10,557	\$0.00		\$4,792,714.00	\$4,792,714.00
201818W100645	10.557	\$10,314,441.00		\$0,00	\$10,314,441.00
201818Y860445	10 572	\$0.00		\$0.00	\$0.00
201818Y860745	10 572	\$0.00		\$0.00	\$0.00
То	Total:	\$10,314,441.00		\$4,792,714.00	S15,107,155.00
REMARKS:					

Please note that the Financial Official (FO) assigned by the above grantee organization is responsible for maintaining valid banking information for this grant. This includes certifying that correct routing and transit numbers (ABA/RTN) and bank account numbers have been entered into the ASAP gov payment system. The Food and Nutrition Service and the United States Treasury are not responsible for a misdirected payment in the event that the FO entered the incorrect ABA/RTN or bank account number information.

UNDER NO CIRCUMSTANCE SHALL FUNDS BE REQUESTED WHICH WOULD RESULT IN OVERDRAWING THE CURRENT AUTHORIZATION FOR ANY PROGRAM. IF A REQUEST FOR PAYMENT IS ISSUED IN AN AMOUNT IN EXCESS OF THE LIMITATION FOR THE SPECIFIC PROGRAM, YOU WILL BE FULLY RESPONSIBLE FOR SUCH EXCESS AMOUNT.

DATE: 10/02/2017

SIGNATURE OF AUTHORIZING OFFICIAL: Electronically Signed by - LISA BRAGG

0116-18

BUILD: 2017.06.06(24.1.0.6) | CLONE: (ASAPGov_Cluster_Clone4) | Current Cycle Date: 10/04/2017



Logan Lynn

Home Enrollments Payment Agency Reports Inquiries Help Log Off

Initiate Payment Requests (PR)

Step 2 of 4 Enter Payment Transactions Display Selection Criteria

Payment Request Type: Individual

Payment Method : FEDWIRE

Bank Relationship: 021000021*****6402

Requested Settlement Date: 10/04/2017

Your criteria matched 283 account(s)

176 accounts not shown because they are unavailable for payment or already selected

Recipient : <u>KY CABINE</u> T	FOR HEALTH SE	RVICES (2170804)			
Federal Agency : <u>FOOD</u>	AND NUTRITION	SERVICE (12350001/03)			
Cash on Hand : \$		for the second s	Total : \$		
Account ID	Account Status	Requestor Reference Numbe	r Available Balance	Amount Requested	Remittance Data
2014CY860445	Liquidated	644	\$0.00 \$		+
2014CY860745	Liquidated	644	\$0.00 \$	50 v sir Palestill – 144 1880 v 15 – 10 – 1 – 10 – 10 – 10 – 10 – 10 –	+
2015CW200145	Liquidated	644	\$0.00 \$		+
2015CY860445	Liquidated	644	\$0.00 \$		+
2015CY860745	Liquidated	644	\$0.00 \$		₽
2015IW100245	Liquidated	644	\$0.00 \$		
2015IW100345	Liquidated	644	\$0.00 \$		+
2015lW500345	Liquidated	644	\$0.00 \$		+
201616W100245	Liquidated	644	\$0.00 \$		+,
201616W100345	Liquidated	644	\$0.00 \$		+
201616W500345	Liquidated	644	\$46,448.40 \$		+
201717W100345	Open	644	\$7,572,606.19 \$		+
201717W100645	Open	644	\$22,691,101.40 \$		+
201717W500345	Open	644	\$763,843.77 \$		+
201717W541445	Open	644	\$295,707.00 \$		+
201717Y860445	Liquidated	644	\$15,628.97 \$		+
201717Y860745	Liquidated	644	\$153,850.00 \$		I
201818W100345	Open	644	116 8 \$4,792,714.00 \$		+
201818W100645	Open	644	0117-18\$10,314,441.00 \$		+
201818Y860445	Open	644	\$0.00 \$		+