



STATE OF ARKANSAS

OFFICE OF INTERGOVERNMENTAL SERVICES

Department of Finance and Administration

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State Clearinghouse
State Agency Grant Award Notification

[After project has been approved for federal grant funding:
Complete and fax or email form to State Clearinghouse for quarterly reporting to Legislative
Council (Act 742 of 2011; ACA §19-7-101; §25-1-108)]

State Clearinghouse Number Assigned Grant Application #: AR-_____**

State Agency Name: _____**

State Agency Contact Person: _____ Phone: _____

Federal Award Notification Date: _____**

Funding Agency: _____

Project Description: _____

Amount of Federal Award: _____**

Amount of In-Kind State Matching Funds, if any: _____**

Amount of Cash State Matching Funds, if any: _____**

Total: _____

Signature _____

Printed Name _____

Date _____

** Required information

FAX TO: 501-682-5206
Or EMAIL: Cherry.Cunningham@dfa.arkansas.gov