

**STATE OF ALASKA  
DEPARTMENT OF HEALTH AND SOCIAL SERVICES  
DIVISION OF PUBLIC ASSISTANCE  
CHILD CARE GRANT**

**MONITOR REPORT**

Facility Name  
Administrator Name

The State of Alaska, Child Care Program Office (CCPO) initiated a monitor of your Child Care Grant (CCG) records on (Month Day, Year). The notice requested you submit copies of receipts for items purchased and reimbursed with CCG funds and the facility's child care licensing attendance records for the month(s) of (Month Year).

This report contains information and results regarding the monitor conducted pursuant to AS 47.25.071 & 7 AAC 39.065.

**A. Cronological Actions and Events regarding the Monitor**

On (Month Day, Year) a (Notice title)notice was sent requesting attendance records and/or receipts for items purchased and reimbursed with CCG funds.

On (Month Day, Year) child care licensing attendance records were received. On (Month Day, Year) copies of receipts were received.

**B. Summary of Attendance Review**

**C. Summary of Expenditure Review**

**D. Findings**

Per 7 AAC 39. XXX

**CONCLUSION**

Based upon the aforementioned monitor, the Department does not have reasonable cause to believe the facility, Facility Name is in compliance with the requirements for participating in the CCG Program.

PLAN OF CORRECTION – List regulation citations not in compliance

INCORRECT PAYMENT

SANCTION- List regulation citations not in compliance

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Date

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Name

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Date

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Name