

APPENDIX E
FLEXIBLE FUNDS DATA COLLECTION FORM

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National Evaluation Child ID _____

Consented to Share Data	Expenditure Category	Expenditure Details/Notes/Comments	Expenditure Date	Total Flexible Fund Amount Paid
<input type="checkbox"/> Yes <input type="checkbox"/> No	---		_/_/____	\$ _____.

National Evaluation Child ID _____

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<input type="checkbox"/> Yes <input type="checkbox"/> No	---		_/_/____	\$ _____.

National Evaluation Child ID _____

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<input type="checkbox"/> Yes <input type="checkbox"/> No	---		_/_/____	\$ _____.

Expenditure Category Codes

- | | | |
|--------------------------------|---|-----------------------------|
| 1 = Housing | 11 = Automobile | 21 = Training (child/youth) |
| 2 = Utilities | 12 = Transportation | 22 = Other (specify) |
| 3 = Environmental modification | 14 = Incentive | |
| 4 = Furnishings/appliances | 15 = Legal | |
| 5 = Supplies | 16 = Medical | |
| 6 = Food/groceries | 17 = Mental health services (child/youth) | |
| 7 = Clothing | 18 = Mental health services (caregiver/family member) | |
| 8 = Activities | 19 = Camp | |
| 9 = Educational support | 20 = Training (caregiver/family member) | |
| 10 = Daycare and support | | |