ATTACHMENT A

CHILD SUPPORT ENFORCEMENT ADMINISTRATION
FEDERAL PROGRAM EMPLOYEE CERTIFICATION REPORTING FORM

Instructions Employees working entirely on the Cooperative Reimbursement Agreement (CRA) with the Maryland Department of Human Resources/Child Support Enforcement Administration (CSEA), during the report period, should complete this certification form immediately following the end of each six-month reporting period and submit the original to CSEA Contract Manager. A copy (original at CSEA) of the form must be made available to state and federal auditors upon request.

Purpose of Form: To comply with OMB Circular A-87, employees that are expected to work solely on a single federal award or cost objective are required to periodically certify that they worked solely on that program for the period covered by the certification (See Terms and Conditions for clarification).

Jurisdiction:	***CRA Contract #:***
Check one Box Master's Office ☐ State's Attorney's Office ☐ Sheriff's Office ☐ Administrative Office of the Courts ☐	**Time Reporting Period (check one box)** ☐ **October 1 through March 31, _____** ☐ **April 1 through September 30, _____**

I certify that while employed during this time period, I worked solely on the Maryland Department of Human Resources, Child Support Enforcement Administration, and Cooperative Reimbursement Agreement.

Date	Printed Employee Name	Employee Signature	Supervisor's Initials
	Project Supervisor's Name & Signature		