

VENDOR INFORMATION QUOTE SHEET

In order to expedite Child Care Services to applicants/clients, the Vendor Information Quote Sheet must be completed by the Child Care Provider. The child care weekly rate quote is written confirmation of the rate charged by the provider you have chosen. This is to be completed by the Provider and brought with you to your interview.

Please visit the Child Care Provider **before** your interview and make sure you are comfortable and satisfied with your choice. Ask the Provider if they are listed with Maximus. If the Provider is not listed with Maximus, a child care certificate can not be produced and you must choose another Provider.

To request more information about Child Care Providers in your area, call Child Care Resource and Referral at (404) 479-4240

NOTE: IF YOU CHOOSE A PROVIDER WHO CHARGES MORE THAN THE MAXIMUM WEEKLY RATE, YOU WILL BE RESPONSIBLE FOR ARRANGING AND PAYING THE DIFFERENCE WITH THE PROVIDER. THIS INCLUDES TRANSPORTATION, ACTIVITY FEES, ETC.

Parent's Name _____

SSN EP SSN not needed

Children's Name(s)	Age	Weekly Rate	Registration Fee	School Closing	Summer Care	Part-Time Care	After-School Care

Provider/Vendor's Name _____ Maximus # _____ Federal ID Number or SSN _____

Provider's Address _____ City/State/Zip Code _____ Provider's Telephone Number _____ Vendor Status _____
 Licensed/Registered with State DHR

One Sokere Provider's Signature _____ Date _____
~~6885 985102-10~~ One Sokere 720-6437
 GOBB FAX DFCS: 770-528-5203