CONTRACTOR'S NAME

BUDGET AND EXPENDITURE REPORT

For Monterey County - Behavioral Health

				Fiscal Yea	r			
Pro	gram l	Name:				AVATAR Program(s):		
Und	luplica	nted Number of Client	s Served:			Address:		
	1	Ţ		·			I	
		Service Description	Mode of Service	Service Function Code	Total Units of Service	Amount Due from the COUNTY	Estimated Medi-Cal Units of Service	Estimated Federal Financial Participation (FFP) Revenue
								-
			A. PROGRAM REVENU	FS		Approved Budget	Actual for 6 Months	Actual Year-to-Date
Mon	terev	County Funds (Monter						
		sional Rates	, , ,					
		Estimated Federal Fina	ancial Participation (FFP))		\$ -		
	Cash	Flow Advances						
							\$ -	
Tota	l Pogu	ested Monterey Count	ty Funds				\$ -	\$ -
			ty Fullus					ъ -
		gram Revenues						
тот	AL PR	OGRAM REVENUES (equals Allowable Costs)			\$ -	\$ -	\$ -
this	Agree						d in accordance with reque to identify direct and inc	
I. D	irect (Cost Centers - a direc	t cost, as defined in ON	IB A-87, is a cost t	that can be ident	ified specifically with a p	particular final cost obje	ctive.
	A. N	lode Costs (Direct	t Services)			Approved Budget	Actual for 6 Months	Actual Year-to-Date
	Salaries and wages (please fill out Supplemental Schedule of Salaries and Wages)							
	Payroll taxes							
		Employee benefits						
4		ers Compensation ance Pay (if required b	oy law, employer-employe	ee agreement or es	tablished written			
		or associated with Co	unty's loss of funding)					
6	Temp	orary Staffing						
7	Flexible Client Spending (please provide supporting documents)							
8	Trave	I (costs incurred to care	ry out the program)					
9	Emplo	oyee Travel and Confe	rence					
10	Comn	nunication Costs						
11	Utilitie	es .						
12	Clean	ing and Janitorial						
13	Maint	enance and Repairs - E	Buildings					

EXHIBIT H

		Approved Budget	Actual for 6 Months	Actual Year-to-Date			
14	Maintenance and Repairs - Equipment						
15	Printing and Publications						
16	Memberships, Subscriptions and Dues						
17	Office Supplies						
18	Postage and Mailing						
19	Medical Records						
20	Data Processing						
	-						
	Rent and Leases - equipment Rent and Leases - building and improvements (please identify the property address and method of cost allocation)						
	Taxes and assessments (Please identify the property address and method of cost allocation)						
	Interest in Other Long-term debts (please identify the property address and method of cost allocation)						
	Other Professional and Consultant Services (allowable with prior specific approval from						
	Monterey County and must meet the criteria of a direct cost) Audit Costs and Related Services (Audits required by and conducted in accordance with the Single Audit Act (OMB Circular A-133)						
	Miscellaneous (please provide details)						
	Depreciation Expenses (please exclude assets purchased by COUNTY funds and provide Schedule of Depreciation expense.)						
	Total Mode Costs B. Administrative Costs - the allocation base must reasonably reflect the level of	\$ -	\$ -	\$ -			
	service received by the County from the program/activity and there must be a direct						
	causal relationship between the allocation based used and the service provided.						
30	Salaries and Benefits						
31	Supplies						
32	Others - please provide details. Expense must be authorized by the County and/or not prohibited under Federal, State or local law or regulations.						
33	Depreciation Expenses (please exclude assets purchased by COUNTY funds and provide Schedule of Depreciation expense.)						
34	Total Administrative Costs	\$ -	\$ -	\$ -			
35	TOTAL DIRECT COSTS	\$ -	\$ -	\$ -			
assi	I Indirect Cost Centers - include all costs that are incurred for a common or joint purpose benefitting more than one final cost objective, that are not readily assignable to the cost objective specifically benefitted without effort disproportionate to the results achieved. The indirect cost centers correspond directly with the expense accounts defined in the Accounting Standards and Procedures for Counties, which is published by the California State Controller's Office.						
	INDIRECT COSTS	Approved Budget	Actual for 6 Months	Actual Year-to-Date			
36	Equipment (purchase price of less than \$5000)						
37	Rent and Leases - equipment						
38	Rent and Leases - building and improvements						
39	Taxes and assessments						
40	Insurance and Indemnity						
41	Maintenance - equipment						
42	Maintenance - building and improvements						
43	Utilities						
44	Household Expenses						
45	Interest in Bonds						
46	Interest in Other Long-term debts						
47	Other interest and finance charges						

EXHIBIT H

		Approved Budget	Actual for 6 Months	Actual Year-to-Date
48	Contracts Administration			
49	Legal and Accounting (when required for the administration of the County Programs)			
	Audit Costs and Related Services (Audits required by and conducted in accordance with the Single Audit Act (OMB Circular A-133)			
51	Data Processing			
52	Personnel Administration			
53	Medical Records			
54	Other Professional and Specialized Services			
55	Transportation and Travel			
	Advertising (for recruitment of admin personnel, procurement of services and disposal of surplus assets)			
57	Total Indirect costs	\$ -	\$ -	\$ -
63 Total Allowable Costs		\$ -	\$ -	\$ -
COST REPORT INFORMATION:				
64	Land			
	Buildings and Improvements			
66	Equipment (purchase price of \$5000 or more)			
67	Total	0		

We hereby certify to the best of our knowledge, under penalty of perjury, that the above report is true and correct, that the amounts reported are traceable to (Contractor's Name) accounting records, and that all Monterey County funds received for the purposes of this program were spent in accordance with the Contract's program requirements, the Agreement and all applicable Federal, State and County laws and regulations. Falsification of any amount disclosed herein shall constitute a false claim pursuant to California Government Code Section 12650 et seq.

Executive Director's Signature	Date	Finance Director's Signature	Date

Supplemental Schedule of Salaries and Wages - Mode Cost (Direct Services)

TITLE OF POSITION	Annual Salary/Wage	FTE (Full Time Employee)	•	TOTAL
Sample: Social Worker	\$ 45,000	0.75	\$	33,750
			\$	-
			\$	-
			\$	-
			\$	-
			\$	-
			\$	-
			\$	-
			\$	-
			\$	-
Total Salaries and Wages			\$	-