

HCCBG Budget

DAAS-731 (Rev. 2/16)

Home and Community Care Block Grant for Older Adults

County **Mecklenburg**

County Funding Plan

July 1, 2017 through June 30, 2018

County Services Summary

	A				B	C	D	E	F	G	H	I
Services	Block Grant Funding				Required Local Match	Net Service Cost	USDA Subsidy	Total Funding	Projected HCCBG Units	Projected Reimbursement Rate	Projected HCCBG Clients	Projected Total Units
	Access	In-Home	Other	Total								
Trans 250	232269			\\\\\\\\\\\\\\\\\\\\	25808	258077	0	258077	30079	8.5800	200	118289
In-Home I Home Mgmnt 041		123539		\\\\\\\\\\\\\\\\\\\\	13727	137266	0	137266	7225	18.9988	13	7225
In-Home II - Personal Care 042		1092256		\\\\\\\\\\\\\\\\\\\\	121362	1213618	0	1213618	63874	19.0001	115	106868
In-Home III Personal Care 045		36656		\\\\\\\\\\\\\\\\\\\\	4073	40729	0	40729	2144	18.9967	5	2144
Congregate 180			434178	\\\\\\\\\\\\\\\\\\\\	48242	482420	71592	554012	31302	15.4118	1600	130477
Home Delivered 020		456936		\\\\\\\\\\\\\\\\\\\\	50771	507707	71593	579300	100033	5.0754	850	214001
CDS 501 Personal Assistant			16760	\\\\\\\\\\\\\\\\\\\\	1862	18622	0	18622	1723	10.8079	4	1723
CDS 503 GT Financial			3240	\\\\\\\\\\\\\\\\\\\\	360	3600	0	3600	48	75.0000	4	48
Adult Day Care 030			5790		643	6433	0	6433	195	32.9897	3	195
Adult Day Health 155			701323		77925	779248	0	779248	19481	39.9996	72	48362
ADH Trans			27664		3074	30738	0	30738	20492	1.5000	13	20492
SCO-170 P&R			127707	\\\\\\\\\\\\\\\\\\\\	14190	141897	0	141897	#DIV/0!	#DIV/0!	1688	#DIV/0!
SCO-170-Levine SC			53968	\\\\\\\\\\\\\\\\\\\\	5996	59964	0	59964	#DIV/0!	#DIV/0!	1688	#DIV/0!
SCO-170-Oasis-Levine			19769	\\\\\\\\\\\\\\\\\\\\	2197	21966	0	21966	#DIV/0!	#DIV/0!	570	#DIV/0!
				\\\\\\\\\\\\\\\\\\\\	0	0	0	0	0	0.0000	0	0
				\\\\\\\\\\\\\\\\\\\\	0	0	0	0	0	0.0000	0	0
				\\\\\\\\\\\\\\\\\\\\	0	0	0	0	0	0.0000	0	0
Total	232269	1709387	1390399	3,332,055	370230	3702285	143185	3845470	319978	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	6812	#DIV/0!

Signature, Chairman, Board of Commissioners

Date

DAAS-732A1 FY: 2018

INSTRUCTIONS: Under each service, provide the amount of money to be paid for the salary from the service.

AGENCY NAME:

Meck DSS and Parks & Rec

SERVICES:

Best practice is to use last 5 Columns for non-unit services

(if used for other services verify that \$ amts carry to correct funding source on 731 and 732)

[illegible]

(Should correlate with the dollars in the chart above)

Meck DSS and Parks & Rec

SERVICES:

Non Unit Svcs in These Columns

STAFF NAME	POSITION	FULL TIME PART TIME	TOTAL HOURS	ADMIN. HOURS	Trans 250	Medical Transp 033	In-Home I Home Mgmt 041	In-Home I - Respite 235	In-Home II Personal Care 042	In-Home II Respite 236	In-Home III Personal Care 045	In-Home III- Respite 237	Congregate 180	Home Delivered 020	CDS 501 Personal Assistant	CDS 503 GT Financial	Adult Day Care 030	Adult Day Health 155	ADC Trans	ADH Trans	SCO-170 P&R
Leeper, Debra D	Adm Support Asst III	FULL TIME	2080										1040	1040							
Shrewsbury, Heather G	Adm Support Asst III	FULL TIME	2080										1040	1040							
Henry, Lamar C	Social Srvc Assistant	PART TIME	1040											1040							
Patel, Kajal D	Social Srvc Manager	FULL TIME	2080										1040	1040							
Scott, Carla M	Social Srvc Prgm Coord	FULL TIME	2080										832	1248							
Griffin, Angela M.	Social Srvc Prgm Coord	FULL TIME	2080										2080								
Brown, Joi	Social Srvc Prgm Coord	FULL TIME	2080										2080								
Price-Barnes, Tracy L	Social Srvc Prgm Spec	FULL TIME	2080										1976	104							
Hood, Georgetown D	Social Srvc Prgm Spec	FULL TIME	2080										1976	104							
Moses, Delores J	Social Srvc Prgm Spec	FULL TIME	2080										1976	104							
Douglas, Shelia	Social Srvc Prgm Spec	FULL TIME	2080										1976	104							
Cheves, Kathryn G	Social Srvc Prgm Spec	FULL TIME	2080										1976	104							
Robinson, Angela L	Social Srvc Prgm Spec	FULL TIME	2080										1976	104							
Grigg, Kimberly K	Social Srvc Prgm Spec	FULL TIME	2080										1976	104							
Holshouser, Michelle H	Social Srvc Prgm Spec	FULL TIME	2080										1976	104							
Papilion, Regina M	Social Srvc Prgm Spec	FULL TIME	2080										1976	104							
Phronebarger, Shelia F	Social Srvc Prgm Spec	FULL TIME	2080										1976	104							
Belton, Stephanie R	Social Srvc Prgm Spec	FULL TIME	2080										1976	104							
Carver, Caroline W	Social Srvc Prgm Spec	FULL TIME	2080										1976	104							
Scott, Ernestine	Social Srvc Prgm Spec	FULL TIME	2080										1976	104							
Cummings, Reginald B	Social Srvc Prgm Spec	FULL TIME	2080										1976	104							
Bunting-Ford, Shanetta A.	Social Srvc Prgm Spec	FULL TIME	2080										1976	104							
Harris, Jerline A	Social Srvc Prgm Spec	FULL TIME	2080										1976	104							
Brawley, Rose M	Social Srvc Prgm Spec	FULL TIME	2080										1976	104							
Vacant	Social Srvc Prgm Tech	PART TIME	1040										1040								
Rogers, Robert L	Van Driver	FULL TIME	2080											2080							
Diggs, Jose' M	Van Driver	FULL TIME	2080											2080							
Simmons, Gary	Van Driver	FULL TIME	2080											2080							
Clawson, Antonio B	Van Driver	FULL TIME	2080											2080							
Wilson, Linda R	Sr Q & T Specialist	FULL TIME	2080										1040	1040							
Floyd, Michael L	Adm Support Asst II	FULL TIME	520	520																	
Sorenson, Ellen M	Adm Support Asst II	FULL TIME	520	520																	
Fawcett, Michael J	Adm Support Asst II	FULL TIME	520	520																	
VACANT	Adm Support Asst III	FULL TIME	520	520																	
Bost, Lakonia M	Adm Support Asst II	FULL TIME	520	520																	
La Hay, Kenneth E	Adm Support Asst II	FULL TIME	520	520																	
Graham, Betty S	Adm Support Asst III	FULL TIME	520	520																	
Haywood, Benita R	Adm Support Supervis	FULL TIME	520	520																	
Thomas, Jason	Van Driver	FULL TIME	1144	1144																	
Jones, Thomasia E	Social Srvc Manager	FULL TIME	520	520																	
Harris, Patricia A	Social Srvc Prgm Coord	FULL TIME	520	520																	
McCleave, Kirktoine	Social Srvc Prgm Coord	FULL TIME	520	520																	
Moore, Kimberly W	Sr Social Srvc Manage	FULL TIME	520	520																	
Sheppard, Dominick T	Transportation Srvc Su	FULL TIME	520	520																	
Maddix, Anthony	Transportation Srvc Su	FULL TIME	520	520																	
Stoudenmier, Bradley M	Transportation Srvc Su	FULL TIME	520	520																	
Clifton, Natasha	Van Driver	FULL TIME	1144	1144																	
Phillips, Pauline D	Van Driver	FULL TIME	1144	1144																	
Ramsey, Deborah A	Van Driver	FULL TIME	1144	1144																	
Dunn, Sharon D	Van Driver	FULL TIME	1144	1144																	
Crowder, Marvin L	Van Driver	FULL TIME	1144	1144																	
Brown, Dawn L	Van Driver	PART TIME	572	572																	
Carter, Anthony	Van Driver	FULL TIME	1144	1144																	
Young, John	Van Driver	FULL TIME	1144	1144																	
McCarter, Katrina	Van Driver	FULL TIME	1144	1144																	
White, Talika	Van Driver	FULL TIME	1144	1144																	
Warlick, Rosetta	Van Driver	FULL TIME	1144	1144																	
Davis, Perry	Van Driver	FULL TIME	1144	1144																	
Jeffries, Cynthia	Van Driver	FULL TIME	1144	1144																	
Coleman, Pamela	Van Driver	FULL TIME	1144	1144																	
Lewis, Camille Y	Van Driver	FULL TIME	1144	1144																	
Whitley, Denise K	Van Driver	FULL TIME	1144	1144																	
Dolphus, Alice R	Van Driver	FULL TIME	1144	1144																	
Gonzalez, Ricardo F	Van Driver	FULL TIME	1144	1144																	
Black, Celeste L	Van Driver	PART TIME	572	572																	
Buchanan, Thomas A	Van Driver	FULL TIME	1144	1144																	
Rodgers, J.P.	Van Driver	FULL TIME	1144	1144																	

Keams, Ebony	Van Driver	FULL TIME	1144	1144																	
Weathers, Lavern R	Social Worker	FULL TIME	2080						1352									728			
Mayhew, Patricia A	Social Srvc Prgm Coord	FULL TIME	2080						1352									728			
Glover, Penelope V	Sr Social Worker	FULL TIME	2080						1352									728			
Cottman	Fac Manager	FULL TIME	251																	251	
Soprano	Rec Spec	FULL TIME	116																	116	
Harper C	Rec Spec	FULL TIME	860																	860	
Holtman	Rec Asst	PART TIME	530																	530	
Washington M	Rec Asst	PART TIME	225																	225	
Thomas A	Rec Asst	PART TIME	829																	829	
Green M	Rec Coord/Spr	FULL TIME	872																	872	
Gonzalez M	Rec Asst	FULL TIME	1219																	1219	
Love, Pat	Rec Asst	PART TIME	1011																	1011	
Espinoza	Rec Spec	FULL TIME	611																	611	
Jones	Rec Asst	PART TIME	1186																	1186	
Ufazck	Rec Spec	PART TIME	470																	470	
Philips	Rec Spec	FULL TIME	898																	898	
Vacant	Rec Asst	PART TIME	470																	470	
Vacant	Rec Asst	PART TIME	1117																	1117	
Moore, Michael		0	0	520	520																
Young, Eric		0	0	520	520																
	0	0	0	0																	
	0	0	0	0																	
	0	0	0	0																	
	0	0	0	0																	
	0	0	0	0																	
	0	0	0	0																	
		SUBTOTAL FT	101,131	31824	0	0	0	0	4056	0	0	0	42744	15496	0	0	0	2184	0	0	4827
		SUBTOTAL PT	9,062	1144	0	0	0	0	0	0	0	0	1040	1040	0	0	0	0	0	0	5838
		TOTAL	110,193	32968	0	0	0	0	4056	0	0	0	43784	16536	0	0	0	2184	0	0	10665
		PERCENT FT:	91.78%	0.97	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	1.00	#DIV/0!	#DIV/0!	#DIV/0!	0.98	0.94	#DIV/0!	#DIV/0!	#DIV/0!	1.00	#DIV/0!	#DIV/0!	0.45
		PERCENT PT:	8.22%	0.03	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	0.00	#DIV/0!	#DIV/0!	#DIV/0!	0.02	0.06	#DIV/0!	#DIV/0!	#DIV/0!	0.00	#DIV/0!	#DIV/0!	0.55

HCCBG Budget
North Carolina Division of Aging
Service Cost Computation Worksheet c:732A.xls
Provider:
County:
Budget Period: July 1, 2017 through June 30, 2018
Revision ____yes, __no, revision date ____
USDA(NSIP) reimbursement is \$.75/meal

3/99
DAAS-732A
FY 2018

Page 1

As a Best Practice use the last 5 columns for non-unit base services
(If used for other services verify that \$ amts carry to correct funding source on 731 and 732)

Services;													(if used for other services verify that \$ amts carry to correct funding source on 731 and 732)							
	Grand Total		Trans 250	Medical Transp 033	In-Home I Home Mgmt 041	In-Home I - Respite 235	In-Home II - Personal Care 042	In-Home II Respite 236	In-Home III Personal Care 045	In-Home III- Respite 237	Congregate 180	Home Delivered 020	CDS 501 Personal Assistant	CDS 503 GT Financial	Adult Day Care 030	Adult Health 155	ADC Trans	ADH Trans	SCO-170 P&R	
I. Projected Revenues																				
A. Fed/State Funding From the Division of A	3,258,318	////////	232,269	0	123,539	0	1,092,256	0	36,656	0	434,178	456,936	16,760	3,240	5,790	701,323	0	27,664	127,707	
Required Minimum Match - Cash	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	
1) County General Fund	362,035	////////	25,808	0	13,727	0	121,362	0	4,073	0	48,242	50,771	1,862	360	643	77,925	0	3,074	14,190	
2)	0	////////																		
3)	0	////////																		
Total Required Minimum Match - Cash	362,035	////////	25,808	0	13,727	0	121,362	0	4,073	0	48,242	50,771	1,862	360	643	77,925	0	3,074	14,190	
Required Minimum Match - In-Kind	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	
1)	0	////////																		
2)	0	////////																		
3)	0	////////																		
Total Required Minimum Match - In-Kind	0	////////	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
B. Total Required Minimum Match (cash + i	362,035	////////	25,808	0	13,727	0	121,362	0	4,073	0	48,242	50,771	1,862	360	643	77,925	0	3,074	14,190	
C. Subtotal, Fed/State/Required Match Rev	3,620,353	////////	258,077	0	137,266	0	1,213,618	0	40,729	0	482,420	507,707	18,622	3,600	6,433	779,248	0	30,738	141,897	
D. USDA Cash Subsidy/Commodity Valuat	143,185	////////									71,592	71,593								
E. OAA Title V Worker Wages, Fringe Benef	0	////////																		
Local Cash, Non-Match	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	
1) County General Fund	4,034,385	////////	756,840				730,872				1,470,463	574,435				491,750			10025	
2)	0	////////																		
3)	0	////////																		
4)	0	////////																		
F. Subtotal, Local Cash, Non-Match	4,034,385	////////	756,840	0	0	0	730,872	0	0	0	1,470,463	574,435	0	0	0	491,750	0	0	10,025	
Other Revenues, Non-Match	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	
1) Donations	0	////////																		
2) State In-Home	86,027	////////					86,027													
3) Adult Day Care	662,965	////////														662,965				
G. Subtotal, Other Revenues, Non-Match	748,992	////////	0	0	0	0	86,027	0	0	0	0	0	0	0	0	662,965	0	0	0	
Local In-Kind Resources (Includes Volunteer	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	////////	
1) Adult Day Care	0	////////																		
2) Medicaid Transportation	432,435	////////	432,435																	
3)Charlotte Area Transit (CATS)	107,059	////////	107,059																	
H. Subtotal, Local In-kind Resources, Non-M	539,494	////////	539,494	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
I. Client Program Income	62,500	////////	0	0	0	0	0	0	0	0	58,000	4,000	0	0	0	500	0	0	0	
J. Total Projected Revenues (Sum I C,D,E,F,	9,148,909	////////	1,554,411	0	137,266	0	2,030,517	0	40,729	0	2,082,475	1,157,735	18,622	3,600	6,433	#####	0	30,738	151,922	
Percent of Grand Total	100%		16.99%	0.00%	1.50%	0.00%	22.19%	0.00%	0.45%	0.00%	22.76%	12.65%	0.20%	0.04%	0.07%	21.14%	0.00%	0.34%	1.66%	

[illegible]

		////	////	////	////	////	////	////	////	////	////	////	////	////	////	////	////	////	////	////
H. Total Proj. Expenses Prior to Admin. Dist	9,148,912	0	1,554,411	0	137,266	0	2,030,517	0	40,729	0	2,082,475	1,157,735	18,622	3,600	6,433	#####	0	30,738	151,922	
I. Distribution of Administrative Cost	////	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
J. Total Proj. Expenses After Admin. Distrib	9,148,912	////	1,554,411	0	137,266	0	2,030,517	0	40,729	0	2,082,475	1,157,735	18,622	3,600	6,433	#####	0	30,738	151,922	

HCCBG Budget														Page 3						
Service Cost Computation Worksheet														DOA-732A						
Division of Aging														FY 2018						
Services:																				
	Grand Total	Trans 250	Medical Transp 033	In-Home I Home Mgmnt 041	In-Home I - Respite 235	In-Home II - Personal Care 042	In-Home II - Respite 236	In-Home III Personal Care 045	In-Home III- Respite 237	Congregate 180	Home Delivered 020	CDS 501 Personal Assistant	CDS 503 GT Financial	Adult Day Care 030	Adult Day Health 155	ADC Trans	ADH Trans	SCO-170 P&R		
III. Computation of Rates																				
A. Computation of Unit Cost Rate:																				
1. Total Expenses (equals line II.J)	9,148,912	1,554,411	0	137,266	0	2,030,517	0	40,729	0	2,082,475	1,157,735	18,622	3,600	6,433	#####	0	30,738	151,922		
2. Total Projected Units		118,289	0	7,225	0	106,869	0	2,144	0	130,476	214,000	1,723	48	195	48,362	0	20,492	0		
3. Total Unit Cost Rate		13.1408	#DIV/0!	18.9988	#DIV/0!	19.0000	#DIV/0!	18.9967	#DIV/0!	15.9606	5.4100	10.8079	75.0000	33.0637	40.0000	#DIV/0!	1.5000	#DIV/0!		
B. Computation of Reimbursement Rate:																				
1. Total Revenues (equals line I.J)	9,148,909	1,554,411	0	137,266	0	2,030,517	0	40,729	0	2,082,475	1,157,735	18,622	3,600	6,433	#####	0	30,738	151,922		
2. Less: USDA (equals line I.D)	143,185	0	0	0	0	0	0	0	0	71,592	71,593	0	0	0	0	0	0	0		
Title V (equals line I.E and II.D)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Non Match In-Kind (equals line	539,494	539,494	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
3. Revenues Subject to Unit Reimburse	8,466,230	1,014,917	0	137,266	0	2,030,517	0	40,729	0	2,010,883	1,086,142	18,622	3,600	6,433	#####	0	30,738	151,922		
4. Total Projected Units (equals line III.A		118,289	0	7,225	0	106,869	0	2,144	0	130,476	214,000	1,723	48	195	48,362	0	20,492	0		
5. Total Reimbursement Rate		8.5800	#DIV/0!	18.9988	#DIV/0!	19.0001	#DIV/0!	18.9967	#DIV/0!	15.4118	5.0754	10.8079	75.0000	32.9897	39.9996	#DIV/0!	1.5000	#DIV/0!		
C. Units Reimbursed Through HCCBG	#DIV/0!	30,079	#DIV/0!	7,225	#DIV/0!	63,874	#DIV/0!	2,144	#DIV/0!	31,302	100,033	1,723	48	195	19,481	#DIV/0!	20,492	#DIV/0!		
D. Units Reimbursed Through Program In	#DIV/0!	0	#DIV/0!	0	#DIV/0!	0	#DIV/0!	0	#DIV/0!	3,763	788	0	0	0	13	#DIV/0!	0	#DIV/0!		
E. Units Reimbursed Through Remaining	#DIV/0!	88,210	#DIV/0!	0	#DIV/0!	42,994	#DIV/0!	0	#DIV/0!	95,412	113,180	0	0	0	28,868	#DIV/0!	0	#DIV/0!		
F. Total Units Reimbursed/Total Projecte	#DIV/0!	118,289	#DIV/0!	7,225	#DIV/0!	106,868	#DIV/0!	2,144	#DIV/0!	130,477	214,001	1,723	48	195	48,362	#DIV/0!	20,492	#DIV/0!		

1014917	0	137266	0	2030517	0	40729	0	2010883	1086142	18622	3600	6433	1934463	0	30738	151922
118289	0	7225	0	106869	0	2144	0	130476	214000	1723	48	195	48362	0	20492	0
8.58	#DIV/0!	18.9988	#DIV/0!	19.0001	#DIV/0!	18.9967	#DIV/0!	15.4119	5.0754	10.8079	75	32.9897	39.9996	#DIV/0!	1.5	#DIV/0!
258077	0	137266	0	1213618	0	40729	0	482420	507707	18622	3600	6433	779248	0	30738	141897
30079	#DIV/0!	7225	#DIV/0!	63874	#DIV/0!	2144	#DIV/0!	31302	100033	1723	48	195	19481	#DIV/0!	20492	#DIV/0!
8.58	#DIV/0!	18.9988	#DIV/0!	19.0002	#DIV/0!	18.9967	#DIV/0!	15.4118	5.0754	10.8079	75	32.9897	40.0004	#DIV/0!	1.5	#DIV/0!

* The Division of Aging ARMS deducts reported program income from reimbursement paid to providers. Line III.D indicates the number of units that will have to be produced in addition to those stated on line III.C in order to earn the net revenues stated on line I.C.

Information on this form (DAAS-732A) corresponds with information stated on the Provider Services Summary (DAAS-732) as follows:

DAAS-732A	DAAS-732
Block Grant Funding Line I.A	Col. A
Required Local Match-Cash & In-Kind Line I.B	Col. B
Net Service Cost Line I.C	Col. C
NSIP Subsidy Line I.D	Col. D
Total Funding L. I.C+I.D	Col. E
Projected HCCBG Reimbursed Units Line III.C	Col. F
Total Reimbursement Rate Line III.E.5	Col. G
Projected Total Service Units Line III.F	Col. I

NAME AND ADDRESS			Home and Community Care Block Grant for Older Adults								DAAS-732 (Rev. 2/16)			
COMMUNITY SERVICE PROVIDER			County Funding Plan				County				Mecklenburg			
Meck DSS and Parks & Rec											July 1, 2017 through June 30, 2018			
301 Billingsley Rd											Revision#: 1-unit rate chg Rev Date: 2/14/18			
Charlotte, NC 28211														
			A				B	C	D	E	F	G	H	I
Services	Ser. Delivery (Check One)		Block Grant Funding				Required	Net*	USDA	Total	Projected	Projected	Projected	Projected
	Direct	Purch.	Access	In-Home	Other	Total	Local Match	Serv Cost	Subsidy	Funding	HCCBG Units	Reimburse. Rate	HCCBG Clients	Total Units
Trans 250	X		232,269			//////////	25,808	258,077	-	258,077	30,079	8.5800	200	118,289
In-Home I Home Mgmt 041		X		123,539		//////////	13,727	137,266	-	137,266	7,225	18.9988	13	7,225
In-Home II - Personal Care 042		X		1,092,256		//////////	121,362	1,213,618	-	1,213,618	63,874	19.0001	115	106,868
In-Home III Personal Care 045		X		36,656		//////////	4,073	40,729	-	40,729	2,144	18.9967	5	2,144
Congregate 180	X				434,178	//////////	48,242	482,420	71,592	554,012	31,302	15.4118	1,600	130,477
Home Delivered 020	X			456,936		//////////	50,771	507,707	71,593	579,300	100,033	5.0754	850	214,001
CDS 501 Personal Assistant		X			16,760	//////////	1,862	18,622	-	18,622	1,723	10.8079	4	1,723
CDS 503 GT Financial		X			3,240	//////////	360	3,600	-	3,600	48	75.0000	4	48
Adult Day Care 030					5,790	//////////	643	6,433	-	6,433	195	32.9897	3	195
Adult Day Health 155		X			701,323	//////////	77,925	779,248	-	779,248	19,481	39.9996	72	48,362
ADH Trans		X			27,664	//////////	3,074	30,738	-	30,738	20,492	1.5000	13	20,492
SCO-170 P&R					127,707	//////////	14,190	141,897	-	141,897	-	0.0000	1,688	-
						//////////	0	0	0	0	0	0.0000		0
						//////////	0	0	0	0	0	0.0000		0
						//////////	0	0	0	0	0	0.0000		0
						//////////	0	0	0	0	0	0.0000		0
						//////////	0	0	0	0	0	0.0000		0
Total	////////	////////	232269	1709387	1,316,662	3,258,318	362037	3620355	143185	3763540	//////////	//////////	4567	649824
*Adult Day Care & Adult Day Health Care Net Service Cost														
	ADC		ADHC											
Daily Care					Certification of required minimum local match availability. Required local match will be expended simultaneously with Block Grant Funding.				Authorized Signature, Title _____ Date _____ Community Service Provider					
Transportation														
Administrative														
Net Ser. Cost Total														
					Signature, County Finance Officer _____ Date _____				Signature, Chairman, Board of Commissioners _____ Date _____					