Sr. Ctr. Operations Cong. Nutrition Adult Day Care Inf/Options Couns. Adult Day Health In-Home Aid Home Del Meals Transportation Services Total Access 0 In-Home Block Grant Funding 577462 438871 138591 D Home and Community Care Block Grant for Older Adults Other 0 WWWWWW WWWWW HIMMINI 111111111111 HIMMINI THITINIH. 11111111111 WWWWW. WWWWWW WWWWW WWWW 111111111111 HIHIMINI 111111111111 Total 577462 County Funding Plan County Services Summary Required Local Match 64162 48763 15399 B 0 0 0 0 0 0 0 0 0 0 0 0 Net Service Cost 641624 487634 153990 C 0 0 0 0 0 0 0 Subsidy NSIP 31944 31944 Total Funding 673568 185934 487634 ш 0 0 0 0 0 0 Projected HCCBG Units County__Durham July 1, 2018 through June 30, 2019 63236 ||||||||||| 31420 31816 DAAS-731 (Rev. 2/16) Reimbursement Rate Projected 15.52 55 Projected HCCBG Clients 445 230 215 Projected Total Units 160721 112323 48398

Signature, Chairman, Board of Commissioners

Date

DAAS-733 (Rev. 2/16)

Home and Community Care Block Grant for Older Adults

County Funding Plan

July 1, 2018 through June 30, 2019

Methodology to Address Service Needs of Low Income (Including Low-Income Minority Elderly), Rural Elderly and Elderly with Limited English Proficiency (Older Americans Act, Section 305(a)(2)(E))

Commu	nity Service	e Provider L	ournam Co	ounty Dep	artment of	Social Se	ervices	
County	Durham							

The Older Americans Act requires that the service provider attempt to provide services to low-income minority individuals in accordance to their need for aging services. The community service provider shall specify how the service needs of ow income, low-income (including low income minority elderly), rural elderly and elderly with limited English proficiency will be met through the services identified on the Provider Services Summary (DAAS-732). This narrative shall address outreach and service delivery methodologies that will ensure that this target population isadequately served and conform with specific objectives established by the Area Agency on Aging, for providing services to low income minority individuals. Additional pages may be used as necessary.

The Durham County Department of Social Services (DCDSS) is a partner with many agencies throughout the County to work toward meeting the increasing need for Home Delivered Meals and In Home Aid services. As many calls for services come through Adult Protective Services, DCDSS recognizes the need to serve the low-income, minority, elderly population and places these clients as a priority when providing services. Area agencies, programs, and providers frequently rely on DCDSS to providesocial service assistance, nutritional, and in home aid services to clientsthey serve in order for these individuals to be able to remain in their homes.

	Transportation Administrative Net Ser. Cost	Daily Care	*Adult [In-Home Aid	Home-L	Services				2		* Durhan		TAILLA
	Transportation Administrative Net Ser. Cost Total	re ,	Total Pay Care & Adu													e Aid	Home-Delivered Meals					Duitidili, NC 27701	Durbon NO 27704	Durham County DSS	COMMUNITY SERVICE PROVIDER	THE THE ADDRESS
		ADC			-									-		×	×	Direct Purch.	(Check One)	Ser. Delivery					ICE PROV	33
		ADHC	*Adult Day Care & Adult Day Health Care Not Service Co.															Access]	er.		1	1	1	IDER	
		Alce COSI	577462													438871	138591	In-Home	Block Gra		Δ					
Signature, County Finance Officer	Required local match will with Block Grant Funding	Certification of	0															Other	Block Grant Funding							Hame and (
ımty Finance O	Required local match will be expended simultaneously with Block Grant Funding.	of required min	577462	111111111111111111111111111111111111111	WHITH WHITE	WATERWAY		HILLIAMANANA	MINIMAN MANAGEMENT	WHITH WHITH WITH	MANAMANA	THILL THE			THILL THILL THE THE	WWWWWWWWW	WWW.WW.WW.	Total				Provider Services Summary		County I	Community Care Diock Chaill for Older Adults	ammunity (
fficer	expended si		64162	0	0	0	0	0	0	0	0	0	0	0	0	48763	15399	Local Match	Required	8		vices Sumr		County Funding Plan	ALC DIOCK C	and Diani.
Date	multaneously	ngich availabi	641624	0	0	0	0	0	0	0	0	0	0	0	0	487634	153990	Se	Net*			nary		'n	Tallt for Olde	LIO J.
	T	7	31944														31944	Subsidy	NSIP		,				r Adults	00 T 10 T
Signature, Ch	Authorized S Community S	1	673568	0	0	0	0	0	0	0	0	0	0	0	0	487634	185934	Funding	Total	(1,						
Signature. Chairman, Board of Commissioners	Authorized Signature, Title Community Service Provider		63236													31420	31816	Units	Projected HCCBG	. 7		REVISION #	July 1, 2018	County	DAAS-732 (Rev. 2/16)	
d of Commis	e	Mala nisoche II	63236 \\\\\\\\\\\\													15.52	5.5	Rate	Projected Projected Reimburse HCCBG	G		# ,DATE:	July 1, 2018 through June 30, 2019		Rev 2/16)	
1 1	10000	25/8/20	445													230	215	Clients	Projected HCCBG	H			ne 30, 2019			
Date	Date Date	8/1/8	160721													112323	48398	Units	Projected Total	-			-			

North Carolina Division of Aging and Adult Services
Service Cost Computation Worksheet c:732A.xls
Provider: Durham County Department of Social Service
County: Durham
Budget Period: July 1, 2018 through June 30, 2019
Revision ___yes, _X_no, revision date

0		0	0	0	0	1,743,244	266,199	2,009,443	Sum I C,D,E,F,G,H, & I)
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0.5							31,344	01,044	E OAA Title V Worker Wages Frings Benefits and Costs
0		0	0	c		407,000	34 044	31 944 ///////////	D. NSIP Cash Subsidy/Commodity Valuation
						187 635	153 000	641 624 ///////////	C. Subtotal, Fed/State/Required Match Revenues
						18 763	15 300	64 162 ///////////////////////////////////	B. Total Required Minimum Match (cash + in-kind)
				0	0	0	0	0 /////////////////////////////////////	Total Required Minimum Match - In-Kind
								HHHHHHHH O	3)
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4			_	_				0 /////////////////////////////////////	
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+								0 /////////////////////////////////////	3)
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MANAMAN	HHHHHHH	HHHHHHH	HHHHHHH	IIIIIIIIIIIIIIIII	THITHIHH I		_	THEFT THEFT	Required Minimum Match - Cash
						438,871	138,591	577,462 ////////////////////////////////////	A. Fed/State Funding From the Division of Aging
						IHA	HDM	Total	I. Projected Revenues
Service	Service	Service	Service	Service	Service	Service	Service	Grand	
									Revisionyes, _X_no, revision date
									U
	3/99								County: Durham
32A	DAAS-732A								Provider: Durham County Department of Social Service
									Service Cost Computation Worksheet 6-7324 Vis

Division of Aging Service Cost Computation Worksheet

The rest of Expenses Alter Admill. Distribution	Total Proj Evponsos After Admir Division	- 1	H Total Proj Evnenses Prior to Admin District	III cilies III.A ulfough F		- 1	F. Subtotal, General Operating Expenses	8)		0)		ת א	4)	ω)	2)		General Operating Expenses	C. Subtotal, Havel	Subtotal Travel	2) Other Translocations	2) Mileage Reimhursement	1) Per Diem	Travel	D. OAA Title V Worker Wages, Fringe Benefits and Costs	C. Subtotal, Local In-Kind Resources Non-Match	3)	2)	1)	Local In-Kind Resources, Non-Match	B. Subtotal, Fringe Benefits			4) Unemployment Insurance	3) Retirement @		-107 @		Fringe Benefits	A. Subtotal, Staff Salary	Part-time staff (do not include Title V workers)		Starry From Labor Distribution Schedule	ii. Line item Expense		
2,009,443	HIHIHIHIHI	0		IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII				0	0	0				0	0	IIIIIIIIIIII	0	0	C		пинини			0	0	0	0	HHHHHHH	0	0	0	0	0	0	0	THITHIHIHI					HHHHHHH	Total	Grand	
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_	_	_	_	_	_	7	_	_	_	_	-	_	_	_	_		_	_		
- Town office Relinibulsed/Total Projected Units	F Total Units Reimbursed Inrough Remaining Revenues	E Units Deimburged Through Program Income	Inite Deimhursed Through Drown In	C Units Reimbursed Through HCCBC	Total Reimbursement Rate	4. Total Projected Units (equals line III.A.2)			lille v (equals line I.E and II.D)	Z. Less. Noir (equals line I.D)		1 Total Revenues (carrolle line 1)	B. Computation of Reimbursement Pate:	3 Total Unit Cost Rate	2 Total Projected Unite 11.0)	1. Total Expenses (equals line II I)	A. Computation of Unit Cost Rate:	III. Computation of Rates		
HILIHIHIHI	HILIHIHIHI	IIIIIIIIIIIIIIIII	THILITINI III		HHHHHHHH	//////////////////////////////////////	1,977,499	0	0	31,944	2,009,443 ///////////////////////////////////	THITITITITITITITITITITITITITITITITITITI	THE PERSON NAMED IN COLUMN 1	THI HILLIHIN	2,009,443		HHHHHHH	Total	Grand	
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48,398	16,558	24	31,816	4.0400	4 8 4 00	48 400	234,255	0	0	31,944	266,199	THE HITCHING THE PROPERTY OF THE PARTY OF TH	5.5000	48,400	266,199	minimum minimum	HIHHHHHH	HDM		Service
112,323	80,903	0	31,420	10.0188	15 5100	112 322	234,255 1,743,244	0	0	0	266,199 1,743,244	THILITINI .	15.5200	112,322	266,199 1,743,244	THE PERSON NAMED IN COLUMN NAM	THAT THAT I	HA		Service
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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:

	Projected Total Service Units	Total Reimbursement Rate	Projected HCCBG Reimbursed Units	Total Funding	NSIP Subsidy	Net Service Cost	Required Local Match-Cash & In-Kind	Block Grant Funding		
2077222240000 40002000	Line III.F	Line III.B.5	Line III.C	L. I.C+I.D	Line I.D	Line I.C	Line I.B	Line I.A	DAAS-732A DAAS-732	
	Col. I	Col. G	Col. F	Col. E	Col. D	Col. C	Col. B	Col. A	DAAS-732	

	Supplemen	nt to Provider Services Summary
		In-Home Services Detail
Name of Community Service Provider	DAAS-	732 Supplement (Effective: 7/08)
	July 1,	through June 30,
Revision #		

						and the second second
	A	В	С	F	G	Н
	HCCBG	Required	Net	Projected	Projected	Projected
	In-Home	Local	Service	HCCBG	Reimbursement	HCCBG
In-Home Services	Funding	Match	Cost	Units	Rate	Clients
Level I - 235 Respite		0	0			
Level I - 041 H Mgmt		0	0			
Subtotal Level I	0	0	0	0		0
Level II - 236 Respite		0	0			
Level II - 042 PC	438871	48763	487634	31420	15.52	230
Level II - 043 H Mgmt		0	0			
Subtotal Level II	2633226	292578	2925804	157100		690
Level III - 237 Respite		0	0			
Level III - 044 H Mgmt		0	0			
Level III - 045 PC		0	0			
Subtotal Level III	0	0	0	0		0
Level IV - 238 Respite		0	0			
Level IV - 046 H Mgmt		0	0			
Subtotal Level IV	0	0	0	0		0
Total	2633226	292578	2925804	157100		

Title Director 5-16-1V Authorized Signature

Community Service Provider

Area Agency On Aging

Triangle J Council of Governments

CERTIFICATION OF REQUIRED MINIMUM LOCAL MATCH AVAILABILITY

Fiscal Year: 2019

Date:

Agency: <u>Durham Cou</u>	nty Department of Social Ser	rvices
Service: In Home Aid a	and Home Delivered Meals	
Itemization of Commitr	nent:	
Required Local	l Match (total must agree to	amount in the Funding Plan)
1.	Cash of: \$15,399	provided by: <u>Durham County</u>
	Cash of: \$48,763	provided by: <u>Durham County</u>
	Cash of:	provided by:
	Cash of:	provided by:
2.	Total Local Match: \$64,162	
t is understood that funds Community Care Block Gran the contractual period.	committed as required min t appropriation and will not	imum local match will be used to match the Home and be used to match any other federal or state funds during
Print Name and Title: Willian	n "Ben" Rose, Director	
ignature:////	MEDE	
,		

Date		f Commissior	Signature, Chairman, Board of Commissioners	Signature, Cha		Date	Officer	Signature, County Finance Officer	Signature, (
5/14/2018 Date		Executivie Director	14	Authorized Signature, Title Community Service Provide	lity.	match availab imultaneousl	Certification of required minimum local match availability. Required local match will be expended simultaneously with Block Grant Funding.	Certification of required n Required local match will with Block Grant Funding	Certification Required lo with Block (
31,873	6,258	111111111111	19,029	764,836	11,625	753,211	75,320	677,891	439,460	41,620	196,811		Total \\\\\\	1
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14,077	200	11.46	13,193	162,776	11,625	151,151	15,115	11111111111111	136,036				tion	Congregate
8,000	43	26.62	4,470	118,988		118,988	11,899	111111111111111111111111111111111111111			107,089		tion	Transportation
na	1,500	na	na	337,137		337,137	33,713	1111111111111	303,424				nter	Sr. Center Operations
na	4,500	na	na	99,691		99,691	9,969	1111111111111			89,722		and	Information and Options Counseling
6,775	7	33.07	1,209	39,978		39,978	3,998			35,980			are	Adult Day Care
3,021	8	40.00	157	6,267		6,267	627			5,640			=	Adult Day Health
Units	Clients	Rate	Units	Funding	Subsidy	Serv Cost	Local Match	Total	Other	In-Home	Access	ect Purch.	Direct	Services
Total	НССВС	Reimburse.		Total	NSIP	Net	Required		Block Grant Funding	Block Gra		(Check One)	(Ch	
Point	Projected	-	Projected	п	-	(c					Ser. Delivery		102
				,	7		D			A			-	
		00	FY 2017-2018				es Summary	Provider Services Summary					701	Durham, NC 27701
		16	Date: 4/6/2016								1.0.0		nue	406 Rigsbee Avenue
		Durham	1				nding Plan	County Funding Plan				ior Life	for Seni	Durham Center for Senior Life
			DOA-732		aci nadica	9						PROVIDER	RVICE P	COMMUNITY SERVICE PROVIDER
					dar Adulte	k Grant for O	Home and Community Care Block Grant for Older Adults	e and Commu	Hom				RESS	NAME AND ADDRESS

FY: 2018	Durham Center for Senior Life, Labor Distribution Schedule	e, Labor Distributio	n Schedule	TOTAL	100%	Sr Centers		la fo	Congregate	Congregate	Congregate
Employee Lekisha	POSITION Little River Coordinator/CNA Coordinator	PART TIME	Pay Period	SALARY	A CHILLIAN	or. Centers		Into OC	_	_	Nutrition Transportation
Tiketha	ADH Manager	FULL TIME	2192.31	\$27,040		5,070	0	0	11,830		11,830
Gloria	Program Assistant	FULL TIME	952.80	\$24,773			-				22,800
Grecia	Program Assistant	PART TIME	615.00	\$15,990			_				6.30K
Patricia	Program Assistant	FULL TIME	824.00	\$21,424			_				8 570
Shirley	ADH Care Coordinator/Program Coordinator	FULL TIME	1288.80	\$33,509							13 404
Vacant	Certifed Nursing Assistant	PART TIME	420.00	\$10,920							7 358 7 358
Vacant	Certifed Nursing Assistant	PART TIME	420.00	\$10,920							7,300
Alba	Program Assistant	FULL TIME	921.60	\$23,962							4,300 0 585
Carolyn	ADH Receptionist - PM	PART TIME	480.00	\$12,480							4,000
Mary	Health Care Coordinator	PART TIME	500.00	\$13,000							4,992
Janet	Health Care Coordinator	PART TIME	200.00	\$5,200							2,200
Carol	Health Care Coordinator	PART TIME	300.00	\$7,800							3 120
Trish	Director of Finance	FULL TIME	2500.00	\$58,500	37,050		7,800	7,800 6.500		6.500	6.500 1 950
Avonia	Center Director	FULL TIME	2500.00	\$63,050			51,350			11,700	11,700
Crystal	Serior Center Coordinator	FULL TIME	1730.77	\$45,000			37,350	37,350			
Risha	Advancement Director	FULL TIME	1923.08	\$45,000	21,000		11,000			7,500	7,500
Charity	Contracts Coordinator	PART TIME	680.00	\$14.144			1 507		3,000	3 133 3 653	3,000
Judy	Executive Director	FULL TIME	2961.54	\$60,060	15.400		28 490	28,490 7,700		7 700	7 700 2,032 1,768 1
awanda	WD Hill Coordinator	PART TIME	600.00	\$13,728			2,808			7,700	10.920
Louise	JFK Coordintor	PART TIME	600.00	\$15,600			4,680	4,680			
Maggie	Transporation Coordinator	FULL TIME	1923.08	\$37,500			2,500	2,500 25,000	25,000	25,000	25,000
Barbara	Receptionist	FULL TIME	720.00	\$18,720		_	13,104	13,104 5,616			5,616
							0			0	0 0
		SUBTOTAL FT:		\$567,777	\$73,450	\$16	\$169,464	59,464 \$64,056		\$64,056	\$64,056 \$37,130
		SUBTOTAL PT:		119,782	0		12,085		2,122	2,122 24,492	2,122 24,492 1,768
		TOTAL		\$687,559	73,450	18	181,549	81,549 66,178		66,178 61,622 2	66,178 61,622 48,878 1
		PERCENT FT:		82.6%	100.0%		93.3%		96.8%	96.8%	96.8% 60.3% 96.4%
		- FINCEIN		78.6%	0.0%	٥	6.7%		3.2%	3.2% 39.7%	3.2% 39.7% 3.6%
				/0.0%	9.4%	7	23.2%	3.2% 8.5%		8.5%	8.5% 7.9%
	Allocation of net administrative costs:	e costs:					29.6%	29.6% 10.8%	10.8%	10.8% 10.0%	

Cheracus Expenses	1								
	Total								
	Operating Expenses	Admin	Sr. Centers	Info & OC	Cong. Nutr.	Trans.	Adult Day Health	Adult Day Care	
Contractor Services - General	\$ 46.831	21.852	18.051	1 228			3 300		
Caregiver Contract In-Home Respite				4,1110			2,200	3,500	46,831
Advertising		3 000					T,600	2,400	4,000
Dues and Subscriptions		3,000	2 7//	700					3,000
Program Materials	_	3,000	2,744	7000	100	4			7,444
Participant Transportation		2,000	OTC	0,000	0,000	1,200	T,/00	2,200	19,510
Participant Meals						55,000			55,000
Participant Meal Delivery					61,285		18,442	27,663	107,390
Office Supplies					20,633		6,270	9,406	36,309
Telephone		4,000	1,600	889	485	1,008	657	1,803	10,442
Post-pro and Shin-in-		3,000	8,000	1,300			1,155	3,465	16,920
Postage and Snipping	\$ 1,500	1,000	500						1.500
Insurance - Liability (Property)	\$ 8,483	1,469	4,627	321			826	1 240	8 483
Insurance - Directors & Officers	\$ 1,815	1,815						2/1	1 815
Equipment (Purchase & Maint.)	\$ 6,255	2,000	2,500				700	1 053	575.3
Equipment Rental	\$ 3,785	867	2,721	197				1,000	3 785
Printing and Copying	\$ 6,540	880	2,760	900			200	1 200	5,700
Networking	\$ 1,500	1,500					000	7,200	1 500
Training, Travel & Lodging		0		0					, T, 200
Travel and mileage (non-training)	\$ 7,091	2,141	720	860	1 000	800	000	770	1 1
Conferences (non-training)	\$ -				-/	000	000	770	150'/
Utilities- Agency	\$ 89,754	15.129	47.646	3 303	2 400		10.630	10.000	00 37
Maintenance (Building, grounds etc.)		4.205	13,227	917	1,100		2 261	10,036	69,754
Payroll Processing		9.200					100,2	3,341	24,251
Other Operating Expense									9,200
Total Operating Expenses	\$ 467,020	\$ 78,058	\$ 107,006	\$ 15,615	\$ 91,303	\$ 58.008	\$ 48.152	\$ 68 878	000 757 \$ 878 83
	\$ 467,020	68,858		1		١			4 101,020
	\$ 125,000								
	\$ 592,020								

44.76%

13.24%

20.07%

15.80%

0.83%

5.31%

DETAIL for AGENCY BUDGET

Durham Center for Senior Life County: Durham

FY 2019 Date: 5/14/18

Revision: Y or N N Budget Period: 2018-2019

677,891.00

296,391 -33,823	189,034 ADS/H & ADS/C:	212,974	176,652	110,609	362,410	67,207	1,348,069	1
			2,200		7,500		1 415 276	J. Total Projected Revenues (Sum I C.D.E.F.G.H. & I)
	0	90			4 700		6 000	I. Consumer Contributions/Client Cost Sharing
		20,000			0	0	90.000	H. Subtotal, Local In-kind Resources, Non-Match
170,000 /////////////////////////////////		000 000				- 1	90,000	1) EdTap FY'15 (non-cash)
HILLIAN		THITITITITITITITITITITITITITITITITITITI	HIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	HHHHHH	HIHHHH	HILITARIA MANAGANIA	IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	Local In-Kind Resources (Includes Volunteer Resources)
129 680	140 523	3.786	1,553	8,868	23,772	36,842	345,024	G. Subtotal, Other Revenues, Non-Match
		0						
	4,200	3,700	1,000	-/		500	500	11) Interest
		3 786	1 553	1.668	2.107		42,937	10) Funding to supplement shortfall
				7,200	1,500		8,700	9) Other funding, Maplewood, Resources for Seniors
	0,200						0	8) Fundraising - Board, Individual, Corporate
18 750	6 250						25,000	7) Grants /Foundations
					8,000		8,000	8) Special Events
					12,165	36,342	48,507	3) Rent revenue - Leases
81 315	27.105						108,420	2) Private Pay- ADS/H & ADS/C
	102.960						102,960	1) Veterans Administration
HILITARIAN III	//////////////////////////////////////	$\overline{}$	HHHHHHHH	HIHHHH	HHHHHH	HITHININ VIIIIIIII	MANIMANIA	Other Revenues, Non-Match
124 484	41.495	0	10,123	2,050	0	30,365	208,516	F. Subtotal, Local Cash, Non-Match
124,484	41,495						165,978	5) Dept. Social Services: contract
				2,050			2,050	4) Triangle J: Fan Program
						30,365	30,365	3) Durham County
			700				700	2) Triangle United Way - Designation
111111111111111111111111111111111111111		\perp					9,423	1) Triangle United Way
HILLIAN HILL	MAMMAM	HIMINIMINI	HHHHHHHH	IIIIIIIIIII	HHHHHH	HIHITINI MINIMINI	IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	Local Cash, Non-Match
)00				0	E. OAA Title V Worker Wages, Fringe Benefits and Costs
	0,20,	0	11.625	0	0		11,625	D. NSIP Cash Subsidy/Commodity Valuation
	6 267	118 988	_		337,137	0	753,211	C. Subtotal, Fed/State/Required Match Revenues
	627	11.899	15.11	9,96	33,713		75,320	B. Total Required Minimum Match (cash + in-kind)
		0	0		0		0	Total Required Minimum Match - In-Kind
	627	11 899	15.115	9,969	33,713	0	75,320	Total Required Minimum Match - Cash
	027						0	Other grants & support- Gen Purp 25% match
111111111111111111111111111111111111111	627	11 899	15 115	969	33,713		75,320	1) Durham County
THITTHINITH	HHHHHHH	HIHHHHHHH	MAMMAM		IIIIIIIIII	HILLIAN HILLIAN	HHHHH	Required Minimum Match - Cash
	5,640	107.089	136,036	89,722	303,424		\$ 677,891	A. Fed/State Funding From the Division of Aging & Adult Serv
Unit Based Sv	Unit Based Sv	Unit Based Sv	Unit Based Sv	Non Unit Sv	Non Unit Sv			
Adult Day Care	Adult Day Health	Transportation	Congregate Nutrition	Counseling	or, center Operations	Admin	Grand Total	I. Projected Revenues
					2			

0	0	(0)	0	0	(0)			Net Surplus/Deficit:
296,391	189,034	21	176,652	110,609	362,410	1,348,068 ///////////		J. Total Proj. Expenses
27,618	18,412		11,085		32,658		110,470	I. Distribution of Net Admin Expenses
268.773	170.622	204,181	165,567	98,704	329,752	177,677	1,415,275	H. Total Project Expenses Prior to Admin Distribution
							0	Lines II.A through F
68,878	48,152	38,008	21,303	20,020	201,000			G. Subtotal, Other Administrative Cost Not Allocated in
00000	20 173	50,000	91 202	15,615	107.006	78.058	467,020	F. Subtotal, General Operating Expenses
68,878	48,152	20,008	27,20	10,010	201,000			
THILLIH THE	,	111111111111111111111111111111111111111		615	107 006	78.058	467.020	Please see attached
THILL THILL THE		THITINITINITINITINITINITINITINITINITINIT	HIHIMIMIMI		MIMMIN	MINIMIN	HHHHHHHH	General Operating Expenses
	0	0	0	0	0	0	0	E. Subtotal, Travel
							0	3) Other Travel Cost:
							0	2) Mileage Reimbursement
							0	1) Per Diem
THIRITINI THE	MINIMINI	MAMMAMAM	HHHHHHHH	HHHHHH	HHHHHH	HILLIAN HILLIAN	HHHHHHHH	Travel
							0	D. OAA Title V Worker Wages, Fringe Benefits and Costs
0	0	90,000	0	0	0	0	90,000	C. Subtotal, Local In-Kind Resources
							0	2) Interfaith FoodShuttle (non-cash)
0	0	90,000					90,000	1) EdTap FY 15 (non-cash)
MANAMAN	\rightarrow	//////////////////////////////////////	HHHHHHH	HHHHHH	HHHHHH	HILLIAN HILLIAN	HHHHHHHH	Local In-Kind Resources
46.365	20,117	7,295	12,642	16,912	41,197	26,168	183,114	B. Subtotal, Fringe Benefits
1.382	921	440	555	596	1,634	661	6,188	5) Worker's Compensation
97	61	29	37	40	109	44	413	4) Unemployment Insurance
768	512	244	808	331	908	367	3,438	3) Retirement @
2,230	743	196	484	750	1,698	1,342	8,298	3) Dental & Life Insurance
30.148	10.049	2,647	6,544	10,134	22,959	18,136	112,179	2) Health Insurance
11 745	7.830	3,739		5,063	13,888	5,619	52,598	1) FICA @ %
THITHIHIHI	HHHHHHHH	HHHHHH	HHHHHHHH	//////////////////////////////////////	HIHIHI	HITHININ MINIMIN	IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	efit
153 530	1		61,622	66,178	181,549	73,450	687,559	A. Subtotal, Staff Salary
47.589			24,492	2,122	12,085	0	119,782	2) Part-time staff (do not include Title V workers)
105.940	70,627	-	37,130	64,056	169,464	_	567,777	1
HIHHHHHHHH	HHHHHHH	MANAMANAN	HHHHHHHH	MIMMIM	IIIIIIIIII	HITHININ MINIMINI	MINIMINIMI	Staff Salary From Labor Distribution Schedule
Unit Rased Sv	Unit Based Sv	Unit Based Sv	Unit Based Sv	Non Unit Sv	Not Unit Sv			
Adult Day Care	Adult Day Health	Transportation	Congregate Nutrition	Info & Options Counseling	Sr. Centers	Admin	Grand Total	II. Projected Expenses

III. Computation of Rates	Grand Total	Admin	Sr. Centers	Info & Options Counseling	Congregate Nutrition	Transportation	Adult Day Health	Adult Day Care
			Not Unit Sv	Non Unit Sv	Unit Based Sv	Unit Based Sv	Unit Based Sv	I Init Based Su
A. Computation of Unit Cost Rate:	MIMMIMM	111111111111111111111111111111111111111	HIHHHH	- 1	HIHHHH		Other pased 24	Ollit pased SA
1 Total Evanance (ample lime II I)		+	THITTINITY I		THILLIAN THE	THINITINI I		
T. Total expelles (equals line II.J)	1,348,068	1,348,068 ///////////	362,410	110,609	176,652	212,974	189,034	296,391
2. Total Projected Units	HHIIIIIIIIII	HILITARIA MARIANIA	1111111111	HHHHHH	12,385	8,000	3.021	6 775
3. Total Unit Cost Rate	HHHHHHHH	VIIIIIIIIII		THE THE PROPERTY OF THE PROPER	14.26	26.62	62 57	43 75
B. Computation of Reimbursement Rate:	HHHHHHHH	HITHININ HITHININ	MIMIMI		MANAMAN			111111111111111111111111111111111111111
1. Total Revenues (equals line I.J)	70	1,348,070 /////////	362410	609		7	3	200 201
2. Less: NSIP (equals line I.D)	11,625	11,625 ////////////////////////////////////	MIMIMI	IIIIIIIIIII.	11625	11625 //////////	_	111111111111111111111111111111111111111
Title V (equals line I.E and II.D)	0	0////////////////////////////			0	0	0	
Non Match In-Kind (equals line I.H and II.C)	0	0 ////////////////////////////			0	0	0	
Revenues Subject to Unit Reimbursement	420,492	420,492 ////////////////////////////////////	1111111111	MIMIMI	161.274	212.974	6 267	39 978
4. Total Projected Units (equals line III.A.2)	HIHHHHHHH	HIMININI	IIIIIIIIII	IIIIIIIIII	14,077	8,000	3,021	6.775
5. Total Reimbursement Rate	MAMMAMM	HITHINITA MINITURE	IIIIIIII	1111111111	11.46	26.62	40.00	33.07
C. Units Reimbursed Through HCCBG	THITHIHIHIHI	HILLIHIN VIRTURAL	111111111	HHHHHH	13,193	4.470	157	1 209
D. Units Reimbursed Through Consumer Contributions	HHHHHHHH	HINIHIN VIIIIIIII	111111111		192	20	0	2,200
E. Units Reimbursed Through Remaining Revenues	IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	HITHININ VIIIIIIIII	IIIIIIIII	IIIIIIIIII	692	3,523	2.864	5.566
F. Total Units Reimbursed/Total Projected Units	IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	HITHITITY VITITITITI		HHHHHH	14,077	8,000	3,021	6,775