

**HUMAN SERVICES AGENCY BUDGET SUMMARY
BY PROGRAM**

Grantee/Contractor: Vendor Name										Full Term:		7/1/24 - 6/30/28	
Program: Program Name										Effective Date:			
New <input type="checkbox"/> Modification <input type="checkbox"/> Revision <input type="checkbox"/> Check One										Modification #			
	7/1/24 - 6/30/25	7/1/24 - 6/30/25	7/1/24 - 6/30/25	7/1/25 - 6/30/26	7/1/25 - 6/30/26	7/1/25 - 6/30/26	7/1/26 - 6/30/27	7/1/26 - 6/30/27	7/1/26 - 6/30/27	7/1/27 - 6/30/28	7/1/27 - 6/30/28	7/1/27 - 6/30/28	7/1/24 - 6/30/28
Expenses	Original	MOD/Revision	Revised	Original	MOD/Revision	Revised	Original	MOD/Revision	Revised	Original	MOD/Revision	Revised	Total
Salaries & Benefits													
Operating-Direct													
Subtotal													
Indirect Percentage (%)	15%		15%	15%		15%	15%		15%	15%		15%	15%
Indirect Costs (Line 16 X Line 15)													
CODB Eligible Expenses													
Consultant/Subcontractor (\$25,000+)													
Direct Client Pass-Through													
Capital Expenses													
Total Expenses													
HSA / DAS Revenues													
General Fund	\$50,000		\$50,000	\$50,000		\$50,000	\$50,000		\$50,000	\$50,000		\$50,000	\$200,000
State													
Federal													
Addback 1													
Addback 2													
Addback 3													
CODB FY 1	\$1,250		\$1,250	\$1,250		\$1,250	\$1,250		\$1,250	\$1,250		\$1,250	\$5,000
CODB FY 2													
CODB FY 3													
CODB FY 4													
OTO 1													
OTO 2													
OTO 3													
OTO 4													
Total HSA / DAS Revenues	\$51,250		\$51,250	\$51,250		\$51,250	\$51,250		\$51,250	\$51,250		\$51,250	\$205,000
Grantee/Contractor Revenues													
Total Grantee/Contractor Revenues													
Total Revenues	\$51,250		\$51,250	\$51,250		\$51,250	\$51,250		\$51,250	\$51,250		\$51,250	\$205,000
Prepared by:													
Telephone No. & Email:													

Salaries & Benefits Detail

POSITION TITLE	Agency Totals			HSA Program			7/1/24 - 6/30/25			7/1/24 - 6/30/25			Agency Totals			HSA Program			7/1/25 - 6/30/26			7/1/25 - 6/30/26			Agency Totals			HSA Program			7/1/26 - 6/30/27			7/1/26 - 6/30/27			Agency Totals			HSA Program			7/1/27 - 6/30/28			7/1/27 - 6/30/28			7/1/27 - 6/30/28			7/1/27 - 6/30/28		
	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Original	MOD/Revision	Revised	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Original	MOD/Revision	Revised	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Original	MOD/Revision	Revised	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Original	MOD/Revision	Revised	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Original	MOD/Revision	Revised	Total																		
Employee A (example)	1.00	1.00	100%	1.00				1.00	1.00	100%	1.00				1.00	1.00	100%	1.00																																				
Employee B (example)	0.50	0.50	80%	0.40				0.50	0.50	80%	0.40				0.50	0.50	80%	0.40																																				
Employee C (example)	0.50	0.50	100%	0.50				0.50	0.50	100%	0.50				0.50	0.50	100%	0.50																																				
TOTALS	2.00	2.80	1.90				2.00	2.80	1.90					2.00	2.80	1.90																																						
FRINGE BENEFIT RATE	25%						25%						25%						25%						25%						25%						25%																	
EMPLOYEE FRINGE BENEFITS																																																						
TOTAL SALARIES & BENEFITS																																																						

