California Department of Public Health CDPH Maternal, Child and Adolescent Health Division

GUIDE

Version 4.6 - 50 Quarterly

BUDGET | INVOICES | BUDGET REVISIONS | SUBK | SHORTCUTS | FILE NAME

This guide is intended to provide basic instructions for completing the Block Grant budget/invoice template.
If you need additional assistance please contact your Contract Manager.

All data entry fields are shaded yellow.

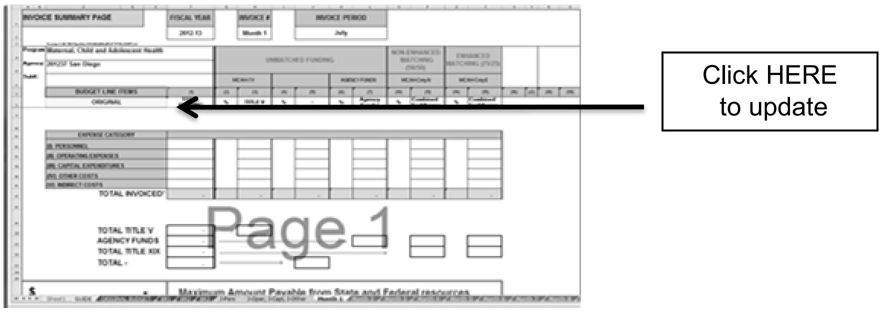
To ensure that all steps are completed, it is recommended that you click on step 1 and move the cursor down as you complete each step below:

ORIGINAL BUDGET

1 In cell C4, select the applicable program budget from the drop down menu.
2 In cell C5, select your Agency from the drop down menu.
3 In cell C6, enter the name of the subcontract (if applicable).
You may need to change the view settings and zoom out in order to see the remaining steps clearly.
4 In cell H9, the current allocation for Title V will automatically populate.
You can access the current fiscal year allocation tables by using the following weblink: MCAH Fiscal Documents
5 In cell J9 the current allocation for SIDS will automatically populate.
6 In the Personnel Detail section enter the initials, title or classification, FTE, and annual salary for all staff. For agencies drawing down Title XIX, you can use time study averages from prior years to complete the matchable columns (10,14) for personnel. Enter the average Fringe Benefit Rate that will be applied to all staff in cell D129.
7 In the Operating Expense Detail section enter all operating expense data for each applicable program. Please note, column 10 will automatically calculate your maximum matchable percentage once the personnel section has been completed. However, for non-matchable items, make sure to delete the formula.
8 In the Capital Expenditures Detail section enter the total for any capital expenditures ($5,000+).
9 In the Other Costs Detail section, enter the budget totals for any subcontracts or other charges. You must use a new template for each subcontract. The total funding and percentages from row 17 of the Subcontract Original Budget must be copied and pasted into the Subcontract section of the Agency's Original Budget. Please note, column 10 will automatically calculate your maximum matchable percentage once the personnel section has been completed. Make sure to remove the formula for all non-matchable items.
10 In the Indirect Costs Detail section, the agency's indirect cost rate that was approved by CDPH will autopopulate with the maximum rate approved by CDPH. A lower rate if justified is allowable. ICR will be capped at no more than 25% of personnel salary and benefits costs or 15% of total allowable direct costs.
11 Click on the (I) Justification worksheet and enter the Program (column I), MCF Type (column J), MCF% (column K) and justifications for each personnel line item. If you are claiming a MCF higher than the Base MCF you must meet the MCF Requirements.
12 Click on the (II-V) Justifications worksheet and enter justifications for Operating Expenses, Capital Expenditures, and Other Costs.
13 Click on the Original Budget worksheet. Make sure the balances in row 18 are less than $10.
14 Save the file using the File Name formats.

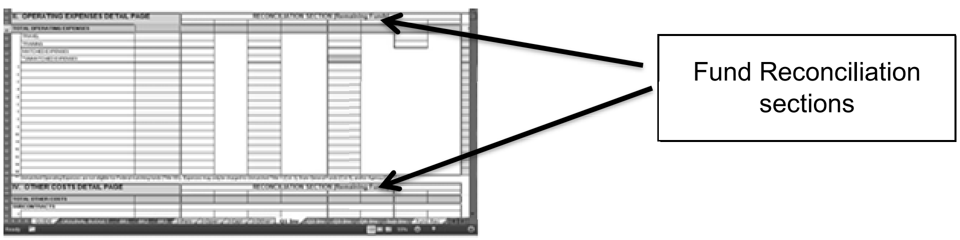
INVOICES

The template automatically populates the operating and personnel line items from the “ACTIVE” budget and displays them in the current invoice. It is important that you indicate which budget the invoice is being paid from in order to display the correct line items in the personnel and operating expense sections. To update, click on cell C8 and select the current budget from the drop down menu.



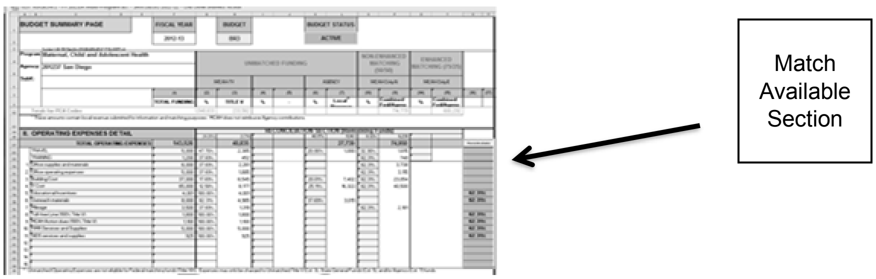
Invoice Fund Reconciliation

Invoices are now equipped with fund reconciliations above each expense category. The fund reconciliation section shows the remaining balance of each funding source up to the current invoice only. Keep in mind, if there are any negatives in the fund reconciliation section they will automatically be deducted from your total reimbursement.



Invoice Match Available

Located on the right side of the Operating Expenses Detail Page and the Other Costs Detail Page is the Match Available section. Only line items that were budgeted in the Enhanced and Non-Enhanced columns of the Active budget can be invoiced in the Enhanced and Non-Enhanced columns. If a line item has not been budgeted in the matchable columns but is being invoiced in the matchable columns, the cell will turn orange and the word "CHECK" will appear in the Match Available column. Please be sure to make any corrections, if necessary.



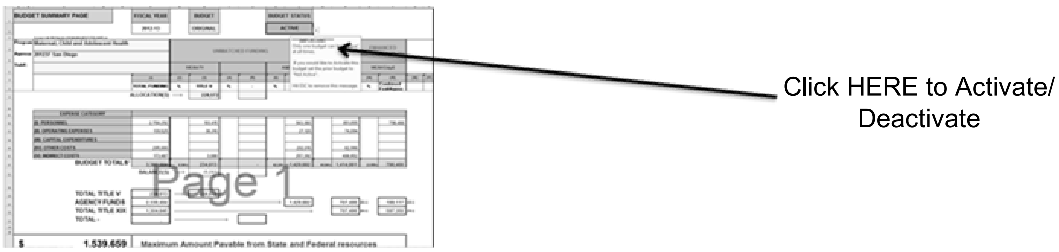
Personnel Match Validation

Only line items that were budgeted in the Enhanced and Non-Enhanced columns of the Active budget can be invoiced in the Enhanced and Non-Enhanced columns. If a line item in the Personnel section has **not** been budgeted in the matchable columns but is being invoiced in the matchable columns, the cell will turn orange. Please be sure to make any corrections, if necessary.

BUDGET REVISIONS

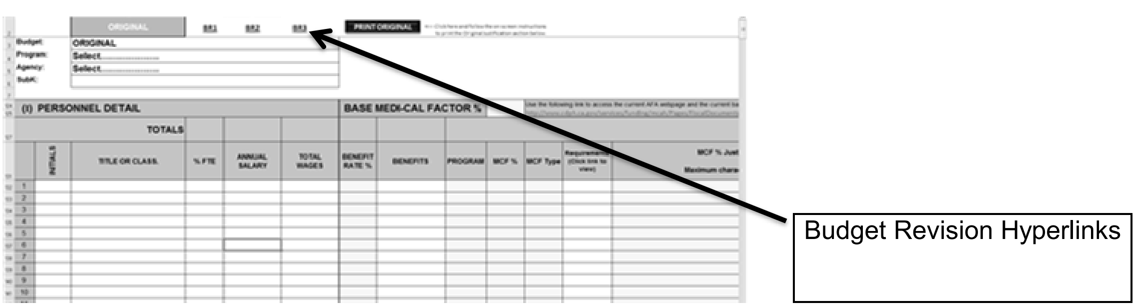
This template provides a maximum of three possible budget revisions. The values of the BR1, BR2, and BR3 sheets are identical to the ORIGINAL BUDGET. **Be sure to overwrite the values on the budget revision sheets only. Do not change any prior approved budgets in order to retain audit history.**

The template keeps track of the budget revisions by indicating “ACTIVE” or “NON-ACTIVE” on each budget sheet. The ORIGINAL BUDGET is currently the “ACTIVE” budget and should you need a budget revision, you will need to change the ORIGINAL BUDGET to “NON-ACTIVE” before you can make the budget revision (BR1) “ACTIVE”. To activate/deactivate click on cell M2. This procedure applies to all budget revisions.



The Autofill Button at the top, middle of the page can be clicked to copy the values from the previously active budget. Change amounts as needed for each section. The cells changed will turn blue and **bold** the print. This will clearly identify which changes have been made.

<u>Budget Revision Hyperlinks</u>
At the top of each justification sheet, you will find hyperlinks for BR1, BR2, and BR3. The hyperlinks allow you to easily access the justification section for each budget revision. The justification sheets will clearly indicate "ACTIVE" or "NOT ACTIVE" depending on the activated budget. For your convenience, the initial values on the budget revisions will be identical. Any changes to the budget revision justifications will carry over to the next budget revision justification.



California Department of Public Health CDPH Maternal, Child and Adolescent Health Division

BUDGET SUMMARY	FISCAL YEAR	BUDGET	BUDGET STATUS	MCAH & SIDS BALANCE	TITLE XIX BALANCE	Total Active
	2018-19	ORIGINAL	ACTIVE			1

Version 4.6 - 50 Quarterly

Program: Maternal, Child and Adolescent Health
Agency: 201835 San Benito
SubK:

NOT ACTIVE

	UNMATCHED FUNDING						NON-ENHANCED MATCHING (50/50)		ENHANCED MATCHING (75/25)			
	MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E			
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)
TOTAL FUNDING	%	TITLE V	%	SIDS	%	Agency Funds*	%	Combined Fed/Agency*	%	Combined Fed/Agency*		
ALLOCATION(S) →		102,040		3,000								

EXPENSE CATEGORY	TOTAL FUNDING	%	TITLE V	%	SIDS	%	Agency Funds*	%	Combined Fed/Agency* (N)	%	Combined Fed/Agency* (E)
(I) PERSONNEL	239,455		70,523		3,000		49,557		61,460		54,915
(II) OPERATING EXPENSES	16,800		6,655				1,980		8,165		
(III) CAPITAL EXPENDITURES											
(IV) OTHER COSTS	53,000		10,769				7,745		7,761		26,725
(V) INDIRECT COSTS	59,864		14,093				16,677		29,094		
BUDGET TOTALS*	369,119	27.64%	102,040	0.81%	3,000	20.58%	75,959	28.85%	106,480	22.12%	81,640
BALANCE(S) →											

	Total		Title V	SIDS	Agency Funds		Cnty-N		Cnty-E
TOTAL TITLE V	102,040	→	102,040						
TOTAL SIDS	3,000	→		3,000					
TOTAL TITLE XIX	114,470	→				[50%]	53,240	[75%]	61,230
TOTAL AGENCY FUNDS	149,609	→			75,959	[50%]	53,240	[25%]	20,410

$ 219,511 Maximum Amount Payable from State and Federal resources

WE CERTIFY THAT THIS BUDGET HAS BEEN CONSTRUCTED IN COMPLIANCE WITH ALL MCAH ADMINISTRATIVE AND PROGRAM POLICIES.

MCAH/PROJECT DIRECTOR'S SIGNATURE DATE

AGENCY FISCAL AGENT'S SIGNATURE DATE

* These amounts contain local revenue submitted for information and matching purposes. MCAH does not reimburse Agency contributions.

STATE USE ONLY - TOTAL STATE AND FEDERAL REIMBURSEMENT		MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E
PCA Codes		53107		53112				53118		53117
(I) PERSONNEL		70,523		3,000				30,730		41,186
(II) OPERATING EXPENSES		6,655						4,083		
(III) CAPITAL EXPENSES										
(IV) OTHER COSTS		10,769						3,881		20,044
(V) INDIRECT COSTS		14,093						14,547		
Totals for PCA Codes	219,511	102,040		3,000				53,241		61,230

California Department of Public Health CDPH Maternal, Child and Adolescent Health Division

Program:	Maternal, Child and Adolescent Health	UNMATCHED FUNDING						NON-ENHANCED MATCHING (50/50)		ENHANCED MATCHING (75/25)				NOT ACTIVE
Agency:	201835 San Benito													
SubK:		MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E				
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)	
	TOTAL FUNDING	%	TITLE V	%	SIDS	%	Agency Funds*	%	Combined Fed/Agency*	%	Combined Fed/Agency*			

(II) OPERATING EXPENSES DETAIL

		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	Total Non-E %	Total E %	Total % Non-E & E
									% TRAVEL NON-ENH MATCH 21.41%		% TRAVEL ENH MATCH 34.33%		% PERSONNEL MATCH 48.60%			
	TOTAL OPERATING EXPENSES	16,800		6,655				1,980		8,165			Match Available			
	TRAVEL	6,000	33.40%	2,004			18.00%	1,080	48.60%	2,916				48.60%		48.60%
	TRAINING	5,000	33.40%	1,670			18.00%	900	48.60%	2,430				48.60%		48.60%
1	Communications	1,000	51.40%	514					48.60%	486				48.60%		48.60%
2	Equipment Maintenance/Lease	500	51.40%	257					48.60%	243				48.60%		48.60%
3	Office Supplies	500	51.40%	257					48.60%	243				48.60%		48.60%
4	Utilities	500	51.40%	257					48.60%	243				48.60%		48.60%
5	MCAH Toll Free Line	300	51.40%	154					48.60%	146				48.60%		48.60%
6	Rent	3,000	51.40%	1,542					48.60%	1,458				48.60%		48.60%
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** Unmatched Operating Expenses are not eligible for Federal matching funds (Title XIX). Expenses may only be charged to Unmatched Title V (Col. 3), State General Funds (Col. 5), and/or Agency (Col. 7) funds.

(III) CAPITAL EXPENDITURE DETAIL

	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)
TOTAL CAPITAL EXPENDITURES										

(IV) OTHER COSTS DETAIL

		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	Total Non-E %	Total E %	Total % Non-E & E
													% PERSONNEL MATCH 48.60%			
	TOTAL OTHER COSTS	53,000		10,769				7,745		7,761		26,725				
	SUBCONTRACTS															
1	Nancy Diehl	52,000	20.19%	10,500			14.42%	7,500	13.99%	7,275	51.39%	26,725		13.99%	51.39%	65.38%
2																
3																
4																
5																
	OTHER CHARGES												Match Available			
1	Program Supplies	1,000	26.90%	269			24.50%	245	48.60%	486				48.60%		48.60%
2																
3																
4																
5																

Program:	Maternal, Child and Adolescent Health		UNMATCHED FUNDING						NON-ENHANCED MATCHING (50/50)		ENHANCED MATCHING (75/25)			
Agency:	201835 San Benito													
SubK:			MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E			
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)
		TOTAL FUNDING	%	TITLE V	%	SIDS	%	Agency Funds*	%	Combined Fed/Agency*	%	Combined Fed/Agency*		

(V) INDIRECT COSTS DETAIL

		(1) TOTAL FUNDING	(2) %	(3) TITLE V	(4) %	(5) SIDS	(6) %	(7) Agency Funds*	(10) %	(11) Combined Fed/Agency*
	TOTAL INDIRECT COSTS	59,864		14,093				16,677		29,094
25.00%	of Total Wages + Fringe Benefits	59,864	23.54%	14,093			27.86%	16,677	48.60%	29,094

(I) PERSONNEL DETAIL

	INITIALS	TITLE OR CLASSIFICATION	% FTE	ANNUAL SALARY	(1) TOTAL WAGES	(2) %	(3) TITLE V	(4) %	(5) SIDS	(6) %	(7) Agency Funds*	(10) %	(11) Combined Fed/Agency*	(14) %	(15) Combined Fed/Agency*	(16) J-Pers MCF Per Staff	(17) Staff Traveling (X)
		TOTAL PERSONNEL COSTS			239,455		70,523		3,000		49,557		61,460		54,915		
		FRINGE BENEFIT RATE	56.00%		85,958		25,316		1,077		17,790		22,063		19,713		
				TOTAL WAGES	153,497		45,207		1,923		31,767		39,398		35,202		
1	LM	MCAH Director	10.00%	131,444	13,144	51.40%	6,756					23.48%	3,086	25.12%	3,302	48.6%	X
2	OTP	Health Education Associate II	50.00%	66,009	33,005					51.40%	16,965	48.60%	16,040			48.6%	
3	RL	Office Assistant III	45.00%	38,578	17,360	51.40%	8,923					48.60%	8,437			48.6%	
4	NS	PSC SIDS PCG Coordinator	90.00%	67,988	61,189	48.26%	29,528	3.14%	1,923			19.34%	11,834	29.26%	17,904	48.6%	X
5	VAC	MCAH Coordinator	33.00%	87,269	28,799					51.40%	14,803			48.60%	13,996	48.6%	X
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California Department of Public Health CDPH Maternal, Child and Adolescent Health Division

Program:	Maternal, Child and Adolescent Health		UNMATCHED FUNDING						NON-ENHANCED MATCHING (50/50)		ENHANCED MATCHING (75/25)			
Agency:	201835 San Benito													
SubK:			MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E			
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)
		TOTAL FUNDING	%	TITLE V	%	SIDS	%	Agency Funds*	%	Combined Fed/Agency*	%	Combined Fed/Agency*		

California Department of Public Health CDPH Maternal, Child and Adolescent Health Division

BUDGET SUMMARY	FISCAL YEAR	BUDGET	BUDGET STATUS	MCAH & SIDS BALANCE	TITL BAL/
	2018-19	BR1	NOT ACTIVE	105,040	

Version 4.6 - 50 Quarterly

The Original budget is currently Active

Program: Maternal, Child and Adolescent Health
Agency: 201835 San Benito
SubK:

	UNMATCHED FUNDING						NON-ENHANCED MATCHING (50/50)		ENHANCED MATCHING (75/25)			
	MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E			
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)
TOTAL FUNDING	%	TITLE V	%	SIDS	%	Agency Funds*	%	Combined Fed/Agency*	%	Combined Fed/Agency*		
ALLOCATION(S) →		102,040		3,000								

EXPENSE CATEGORY	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)
(I) PERSONNEL											
(II) OPERATING EXPENSES											
(III) CAPITAL EXPENDITURES											
(IV) OTHER COSTS											
(V) INDIRECT COSTS											
BUDGET TOTALS*											
BALANCE(S) →			102,040		3,000						

The budget is out of balance. Please revise.

TOTAL TITLE V		→					
TOTAL SIDS		→					
TOTAL TITLE XIX		→		[50%]		[75%]	
TOTAL AGENCY FUNDS		→		[50%]		[25%]	

$ -	Maximum Amount Payable from State and Federal resources

WE CERTIFY THAT THIS BUDGET HAS BEEN CONSTRUCTED IN COMPLIANCE WITH ALL MCAH ADMINISTRATIVE AND PROGRAM POLICIES.

MCAH/PROJECT DIRECTOR'S SIGNATURE DATE

AGENCY FISCAL AGENT'S SIGNATURE DATE

* These amounts contain local revenue submitted for information and matching purposes. MCAH does not reimburse Agency contributions.

STATE USE ONLY - TOTAL STATE AND FEDERAL REIMBURSEMENT	MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E
PCA Codes	53107		53112				53118		53117
(I) PERSONNEL									
(II) OPERATING EXPENSES									
(III) CAPITAL EXPENSES									
(IV) OTHER COSTS									
(V) INDIRECT COSTS									
Totals for PCA Codes									

California Department of Public Health CDPH Maternal, Child and Adolescent Health Division

			UNMATCHED FUNDING						NON-ENHANCED MATCHING (50/50)		ENHANCED MATCHING (75/25)			
Program:	Maternal, Child and Adolescent Health													
Agency:	201835 San Benito													
SubK:			MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E			
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)
		TOTAL FUNDING	%	TITLE V	%	SIDS	%	Agency Funds*	%	Combined Fed/Agency*	%	Combined Fed/Agency*		

(II) OPERATING EXPENSES DETAIL

		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)
	RECONCILIATION SECTION (Remaining Funds)		100.00%	6,655	#DIV/0!		100.00%	1,980	100.00%		#DIV/0!		% PERSONNEL MATCH	
	TOTAL OPERATING EXPENSES												Match Available	
	TRAVEL													
	TRAINING													
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** Unmatched Operating Expenses are not eligible for Federal matching funds (Title XIX). Expenses may only be charged to Unmatched Title V (Col. 3), State General Funds (Col. 5), and/or Agency (Col. 7) funds.

(III) CAPITAL EXPENDITURE DETAIL

	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)
RECONCILIATION SECTION (Remaining Funds)		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!			
TOTAL CAPITAL EXPENDITURES											

(IV) OTHER COSTS DETAIL

		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)
	RECONCILIATION SECTION (Remaining Funds)		100.00%	10,769	#DIV/0!		100.00%	7,745	100.00%	7,761	100.00%	26,725	% PERSONNEL MATCH	
	TOTAL OTHER COSTS													
	SUBCONTRACTS													
1														
2														
3														
4														
5														
	OTHER CHARGES												Match Available	
1														
2														
3														
4														
5														

California Department of Public Health CDPH Maternal, Child and Adolescent Health Division

Program: Maternal, Child and Adolescent Health		UNMATCHED FUNDING						NON-ENHANCED MATCHING (50/50)		ENHANCED MATCHING (75/25)			
Agency: 201835 San Benito		MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E			
SubK:	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)
	TOTAL FUNDING	%	TITLE V	%	SIDS	%	Agency Funds*	%	Combined Fed/Agency*	%	Combined Fed/Agency*		

(V) INDIRECT COSTS DETAIL

RECONCILIATION SECTION (Remaining Funds)

	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)
		100.00%	14,093	#DIV/0!		100.00%	16,677	100.00%	29,094		
TOTAL INDIRECT COSTS											
25.00% of Total Wages + Fringe Benefits											

(I) PERSONNEL DETAIL

RECONCILIATION SECTION (Remaining Funds)

					(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)
						100.00%	70,523	100.00%	3,000	100.00%	49,557	100.00%	61,460	100.00%	54,915		
		TOTAL PERSONNEL COSTS															
		FRINGE BENEFIT RATE															
				TOTAL WAGES													
	INITIALS	TITLE OR CLASSIFICATION	% FTE	ANNUAL SALARY	TOTAL WAGES											J-Pers MCF Per Staff	Staff Traveling (X)
1		MCAH Director															
2		Health Education Associate II															
3		Office Assistant III															
4		PSC SIDS PCG Coordinator															
5		MCAH Coordinator															
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California Department of Public Health CDPH Maternal, Child and Adolescent Health Division

Program:		Maternal, Child and Adolescent Health				UNMATCHED FUNDING						NON-ENHANCED MATCHING (50/50)		ENHANCED MATCHING (75/25)			
Agency:		201835 San Benito															
SubK:						MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E			
					(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)
					TOTAL FUNDING	%	TITLE V	%	SIDS	%	Agency Funds*	%	Combined Fed/Agency*	%	Combined Fed/Agency*		
39																	
40																	
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California Department of Public Health CDPH Maternal, Child and Adolescent Health Division

Program:	Maternal, Child and Adolescent Health		UNMATCHED FUNDING						NON-ENHANCED MATCHING (50/50)		ENHANCED MATCHING (75/25)			
Agency:	201835 San Benito													
SubK:			MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E			
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)
		TOTAL FUNDING	%	TITLE V	%	SIDS	%	Agency Funds*	%	Combined Fed/Agency*	%	Combined Fed/Agency*		

California Department of Public Health CDPH Maternal, Child and Adolescent Health Division

Budget:	ORIGINAL
Program:	Maternal, Child and Adolescent Health
Agency:	201835 San Benito
SubK:	

Version 4.6 - 50 Quarterly

(I) PERSONNEL DETAIL

BASE MEDI-CAL FACTOR % 48.60% Use the following link to access the current AFA webpage and the current base MCF% for your

	INITIALS	TITLE OR CLASS.	TOTAL FTE	ANNUAL SALARY	TOTAL WAGES	FRINGE BENEFIT RATE %	FRINGE BENEFITS	PROGRAM	MCF %	MCF Type	Requirements (Click link to view)	MCF % Justification Maximum characters = 1024
		TOTALS	2.28	$ 391,288	$ 153,497		85,958.32					
1	LM	MCAH Director	10.00%	$ 131,444	$ 13,144	56.00%	7,360.64	MCAH	48.6%	Base		
2	OTP	Health Education Associate II	50.00%	$ 66,009	$ 33,005	56.00%	18,482.80	MCAH	48.6%	Base		
3	RL	Office Assistant III	45.00%	$ 38,578	$ 17,360	56.00%	9,721.60	MCAH	48.6%	Base		
4	NS	PSC SIDS PCG Coordinator	90.00%	$ 67,988	$ 61,189	56.00%	34,265.84	MCAH	48.6%	Base		
5	VAC	MCAH Coordinator	33.00%	$ 87,269	$ 28,799	56.00%	16,127.44	MCAH	48.6%	Base		
6				$ -	$ -			MCAH				
7				$ -	$ -			MCAH				
8				$ -	$ -			MCAH				
9				$ -	$ -			MCAH				
10				$ -	$ -			MCAH				
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48				$ -	$ -			MCAH				
49				$ -	$ -			MCAH				

Budget:	**ORIGINAL**
Program:	**Maternal, Child and Adolescent Health**
Agency:	**201835 San Benito**
SubK:	

Version 4.6 - 50 Quarterly

50				$ -	$ -			MCAH				
51				$ -	$ -			MCAH				
52				$ -	$ -			MCAH				
53				$ -	$ -			MCAH				
54				$ -	$ -			MCAH				
55				$ -	$ -			MCAH				
56				$ -	$ -			MCAH				
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65				$ -	$ -			MCAH				
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67				$ -	$ -			MCAH				
68				$ -	$ -			MCAH				
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72				$ -	$ -			MCAH				
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102				$ -	$ -			MCAH				
103				$ -	$ -			MCAH				
104				$ -	$ -			MCAH				
105				$ -	$ -			MCAH				

Budget:	ORIGINAL
Program:	Maternal, Child and Adolescent Health
Agency:	201835 San Benito
SubK:	

Version 4.6 - 50 Quarterly

106				$ -	$ -			MCAH				
107				$ -	$ -			MCAH				
108				$ -	$ -			MCAH				
109				$ -	$ -			MCAH				
110				$ -	$ -			MCAH				
111				$ -	$ -			MCAH				
112				$ -	$ -			MCAH				
113				$ -	$ -			MCAH				
114				$ -	$ -			MCAH				
115				$ -	$ -			MCAH				
116				$ -	$ -			MCAH				
117				$ -	$ -			MCAH				
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145				$ -	$ -			MCAH				
146				$ -	$ -			MCAH				
147				$ -	$ -			MCAH				
148				$ -	$ -			MCAH				
149				$ -	$ -			MCAH				
150				$ -	$ -			MCAH				

Budget:	ORIGINAL
Program:	Maternal, Child and Adolescent Health
Agency:	201835 San Benito
SubK:	

Version 4.6 - 50 Quarterly

(II) OPERATING EXPENSES JUSTIFICATION

	TOTAL OPERATING EXPENSES	TITLE V & TITLE XIX TOTAL	
	TRAVEL	6,000	Local travel for community collaborative meetings, out of County travel to Sacramento for MCAH, SIDS conferences, Bay Area Perinatal Regional collaborative meetings in Santa Clara and Alameda Counties, CPSP and lactation trainings/ conferences in Folsom, Sacramento and possibly Southern California.
	TRAINING	5,000	Registration fees for SPMP staff to attend required and related MCAH trainings and/or workshops mentioned above, membership dues.
1	Communications	1,000	Phone Services invoiced at approximately $83/mo
2	Equipment Maintenance/Lease	500	Postage meter and photocopy machine lease share
3	Office Supplies	500	Paper, pens staples, folders, binders, copier supplies, postage
4	Utilities	500	Utilities share
5	MCAH Toll Free Line	300	Toll free line
6	Rent	3,000	2.28 FTEx200sq ftx $0.365per sq ftx12mo = $1997.28; MCAH will pay $1000, HHSA will pay the remainder.
7			
8			
9			
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11			
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15			

(III) CAPITAL EXPENDITURE JUSTIFICATION

TOTAL CAPITAL EXPENDITURES		

(IV) OTHER COSTS JUSTIFICATION

	TOTAL OTHER COSTS	53,000	
	SUBCONTRACTS		
1	Nancy Diehl	52,000	Provide Public Healrh Nurse services and trainning
2			
3			
4			
5			
	OTHER CHARGES		
1	Program Supplies	1,000	Supplies and program materials
2			
3			
4			
5			
6			
7			
8			

(V) INDIRECT COSTS JUSTIFICATION

TOTAL INDIRECT COSTS	59,864	Per CDPH approved ICR

California Department of Public Health CDPH Maternal, Child and Adolescent Health Division

INVOICE SUMMARY	FISCAL YEAR	INVOICE #	INVOICE PERIOD
	2018-19	Q1	July - September

Version 4.6 - 50 Quarterly

Program:	Maternal, Child and Adolescent Health		UNMATCHED FUNDING						NON-ENHANCED MATCHING (50/50)		ENHANCED MATCHING (75/25)			
Agency:	201835 San Benito													
SubK:			MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E			
	BUDGET LINE ITEMS	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)
	ORIGINAL BUDGET	TOTAL FUNDING	%	TITLE V	%	SIDS	%	Agency Funds*	%	Combined Fed/Agency*	%	Combined Fed/Agency*		

EXPENSE CATEGORY												
(I) PERSONNEL												
(II) OPERATING EXPENSES												
(III) CAPITAL EXPENDITURES												
(IV) OTHER COSTS												
(V) INDIRECT COSTS												
TOTAL INVOICED*												

TOTAL TITLE V						
TOTAL SIDS						
TOTAL TITLE XIX				[50%]		[75%]
TOTAL AGENCY FUNDS				[50%]		[25%]

$ -	Maximum Amount Payable from State and Federal resources

AS THE MCAH/PROJECT DIRECTOR, I CERTIFY THAT I HAVE SEEN AND REVIEWED THIS INVOICE FOR COMPLIANCE WITH MCAH ADMINISTRATIVE AND PROGRAM POLICIES.

AS THE FISCAL AGENT FOR THIS AGENCY, I CERTIFY THAT THIS INVOICE IS BASED UPON ACTUAL COSTS AND THAT THOSE SALARIES AND WAGES FOR STAFF FUNDED IN WHOLE OR IN PART BY FEDERAL TITLE XIX FUNDS ARE BASED ENTIRELY ON TIME-STUDY DOCUMENTS COMPLETED BY PROGRAM STAFF.

MCAH/PROJECT DIRECTOR'S SIGNATURE DATE

AGENCY FISCAL / AGENCY FISCAL AGENT'S SIGNATURE DATE

* These amounts contain local revenues submitted for information and matching purposes. MCAH does not reimburse for Agency contributions.

STATE USE ONLY - TOTAL STATE AND FEDERAL REIMBURSEMENT	MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E
PCA Codes	53107		53112				53118		53117
(I) PERSONNEL									
(II) OPERATING EXPENSES									
(III) CAPITAL EXPENSES									
(IV) OTHER COSTS									
(V) INDIRECT COSTS									
Totals for PCA Codes									

Program:	**Maternal, Child and Adolescent Health**		**UNMATCHED FUNDING**						**NON-ENHANCED MATCHING (50/50)**		**ENHANCED MATCHING (75/25)**		
Agency:	**201835 San Benito**												
SubK:			MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E		
	BUDGET LINE ITEMS	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16) / (17)
	ORIGINAL BUDGET	**TOTAL FUNDING**	**%**	**TITLE V**	**%**	**SIDS**	**%**	**Agency Funds***	**%**	**Combined Fed/Agency***	**%**	**Combined Fed/Agency***	
(II) OPERATING EXPENSES DETAIL			**RECONCILIATION SECTION (Remaining Funds)**										% PERSONNEL MATCH
			100.00%	6,655	#DIV/0!		100.00%	1,980	100.00%	8,165	#DIV/0!		
	TOTAL OPERATING EXPENSES												Match Available
	TRAVEL												
	TRAINING												
1	Communications												
2	Equipment Maintenance/Lease												
3	Office Supplies												
4	Utilities												
5	MCAH Toll Free Line												
6	Rent												
7													
8													
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15													

** Unmatched Operating Expenses are not eligible for Federal matching funds (Title XIX). Expenses may only be charged to Unmatched Title V (Col. 3), State General Funds (Col. 5), and/or Agency (Col. 7) funds.

(III) CAPITAL EXPENDITURE DETAIL		**RECONCILIATION SECTION (Remaining Funds)**										
		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!				
TOTAL CAPITAL EXPENDITURES												

(IV) OTHER COSTS DETAIL			**RECONCILIATION SECTION (Remaining Funds)**										% PERSONNEL MATCH
			100.00%	10,769	#DIV/0!		100.00%	7,745	100.00%	7,761	100.00%	26,725	
	TOTAL OTHER COSTS												
	SUBCONTRACTS												Match Available
1	Nancy Diehl												
2													
3													
4													
5													
	OTHER CHARGES												
1	Program Supplies												
2													
3													
4													
5													

California Department of Public Health CDPH Maternal, Child and Adolescent Health Division

Program: Maternal, Child and Adolescent Health
Agency: 201835 San Benito
SubK:

BUDGET LINE ITEMS	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)	(18)	(19)
		UNMATCHED FUNDING						NON-ENHANCED MATCHING (50/50)		ENHANCED MATCHING (75/25)					
		MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E					
ORIGINAL BUDGET	TOTAL FUNDING	%	TITLE V	%	SIDS	%	Agency Funds*	%	Combined Fed/Agency*	%	Combined Fed/Agency*				

(V) INDIRECT COSTS DETAIL

	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)		Non-E on Budget
RECONCILIATION SECTION (Remaining Funds)		100.00%	14,093	#DIV/0!		100.00%	16,677	100.00%	29,094				
TOTAL INDIRECT COSTS													
25.00% of Total Wages + Fringe Benefits													Yes

(I) PERSONNEL DETAIL

	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)
RECONCILIATION SECTION (Remaining Funds)		100.00%	70,523	100.00%	3,000	100.00%	49,557	100.00%	61,460	100.00%	54,915
TOTAL PERSONNEL COSTS											
FRINGE BENEFITS											
TOTAL WAGES											

100%

	INITIALS	TITLE OR CLASSIFICATION	Actual Benefit %	Actual Benefit $	TOTAL WAGES	(2) %	(3) TITLE V	(4) %	(5) SIDS	(6) %	(7) Agency Funds*	(10) %	(11) Combined Fed/Agency*	(14) %	(15) Combined Fed/Agency*	% Time In Prog.	Staff Traveling (X)	J-Pers MCF Per Staff	Total Match %
1	LM	MCAH Director																48.60%	
2	OTP	Health Education Associate II																48.60%	
3	RL	Office Assistant III																48.60%	
4	NS	PSC SIDS PCG Coordinator																48.60%	
5	VAC	MCAH Coordinator																48.60%	
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Program: Maternal, Child and Adolescent Health

Agency: 201835 San Benito

SubK:

						UNMATCHED FUNDING						NON-ENHANCED MATCHING (50/50)		ENHANCED MATCHING (75/25)					
						MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E					
		BUDGET LINE ITEMS			(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)	(18)	(19)
		ORIGINAL BUDGET			TOTAL FUNDING	%	TITLE V	%	SIDS	%	Agency Funds*	%	Combined Fed/Agency*	%	Combined Fed/Agency*				
40																			
41																			
42																			
43																			
44																			
45																			
46																			
47																			
48																			
49																			
50																			

California Department of Public Health CDPH Maternal, Child and Adolescent Health Division

INVOICE SUMMARY	FISCAL YEAR	INVOICE #	INVOICE PERIOD
	2018-19	Q2	October - December

Version 4.6 - 50 Quarterly

Program:	Maternal, Child and Adolescent Health														
Agency:	201835 San Benito		UNMATCHED FUNDING						NON-ENHANCED MATCHING (50/50)		ENHANCED MATCHING (75/25)				
SubK:			MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E				
	BUDGET LINE ITEMS	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)	
	ORIGINAL BUDGET	TOTAL FUNDING	%	TITLE V	%	SIDS	%	Agency Funds*	%	Combined Fed/Agency*	%	Combined Fed/Agency*			

EXPENSE CATEGORY												
(I) PERSONNEL												
(II) OPERATING EXPENSES												
(III) CAPITAL EXPENDITURES												
(IV) OTHER COSTS												
(V) INDIRECT COSTS												
TOTAL INVOICED*												

TOTAL TITLE V

TOTAL SIDS

TOTAL TITLE XIX [50%] [75%]

TOTAL AGENCY FUNDS [50%] [25%]

$ -	Maximum Amount Payable from State and Federal resources

AS THE MCAH/PROJECT DIRECTOR, I CERTIFY THAT I HAVE SEEN AND REVIEWED THIS INVOICE FOR COMPLIANCE WITH MCAH ADMINISTRATIVE AND PROGRAM POLICIES.

AS THE FISCAL AGENT FOR THIS AGENCY, I CERTIFY THAT THIS INVOICE IS BASED UPON ACTUAL COSTS AND THAT THOSE SALARIES AND WAGES FOR STAFF FUNDED IN WHOLE OR IN PART BY FEDERAL TITLE XIX FUNDS ARE BASED ENTIRELY ON TIME-STUDY DOCUMENTS COMPLETED BY PROGRAM STAFF.

MCAH/PROJECT DIRECTOR'S SIGNATURE DATE

AGENCY FISCAL / AGENCY FISCAL AGENT'S SIGNATURE DATE

* These amounts contain local revenues submitted for information and matching purposes. MCAH does not reimburse for Agency contributions.

STATE USE ONLY - TOTAL STATE AND FEDERAL REIMBURSEMENT	MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E
PCA Codes	53107		53112				53118		53117
(I) PERSONNEL									
(II) OPERATING EXPENSES									
(III) CAPITAL EXPENSES									
(IV) OTHER COSTS									
(V) INDIRECT COSTS									
Totals for PCA Codes									

Program: Maternal, Child and Adolescent Health		UNMATCHED FUNDING						NON-ENHANCED MATCHING (50/50)		ENHANCED MATCHING (75/25)			
Agency: 201835 San Benito													
SubK:		MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E			
BUDGET LINE ITEMS	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)
ORIGINAL BUDGET	TOTAL FUNDING	%	TITLE V	%	SIDS	%	Agency Funds*	%	Combined Fed/Agency*	%	Combined Fed/Agency*		

(II) OPERATING EXPENSES DETAIL		RECONCILIATION SECTION (Remaining Funds)										% PERSONNEL MATCH
		100.00%	6,655	#DIV/0!		100.00%	1,980	100.00%	8,165	#DIV/0!		
TOTAL OPERATING EXPENSES												Match Available
TRAVEL												
TRAINING												
1 Communications												
2 Equipment Maintenance/Lease												
3 Office Supplies												
4 Utilities												
5 MCAH Toll Free Line												
6 Rent												
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15												

** Unmatched Operating Expenses are not eligible for Federal matching funds (Title XIX). Expenses may only be charged to Unmatched Title V (Col. 3), State General Funds (Col. 5), and/or Agency (Col. 7) funds.

(III) CAPITAL EXPENDITURE DETAIL		RECONCILIATION SECTION (Remaining Funds)								
		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		
TOTAL CAPITAL EXPENDITURES										

(IV) OTHER COSTS DETAIL		RECONCILIATION SECTION (Remaining Funds)										% PERSONNEL MATCH
		100.00%	10,769	#DIV/0!		100.00%	7,745	100.00%	7,761	100.00%	26,725	
TOTAL OTHER COSTS												
SUBCONTRACTS												Match Available
1 Nancy Diehl												
2												
3												
4												
5												
OTHER CHARGES												
1 Program Supplies												
2												
3												
4												
5												

Program:	Maternal, Child and Adolescent Health		UNMATCHED FUNDING						NON-ENHANCED MATCHING (50/50)		ENHANCED MATCHING (75/25)			
Agency:	201835 San Benito													
SubK:			MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E			
	BUDGET LINE ITEMS	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)
	ORIGINAL BUDGET	TOTAL FUNDING	%	TITLE V	%	SIDS	%	Agency Funds*	%	Combined Fed/Agency*	%	Combined Fed/Agency*		

Program:	Maternal, Child and Adolescent Health		UNMATCHED FUNDING						NON-ENHANCED MATCHING (50/50)		ENHANCED MATCHING (75/25)					
Agency:	201835 San Benito															
SubK:			MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E					
	BUDGET LINE ITEMS	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)	(18)	(19)
	ORIGINAL BUDGET	TOTAL FUNDING	%	TITLE V	%	SIDS	%	Agency Funds*	%	Combined Fed/Agency*	%	Combined Fed/Agency*				

(V) INDIRECT COSTS DETAIL

	(1) TOTAL FUNDING	(2) %	(3) TITLE V	(4) %	(5) SIDS	(6) %	(7) Agency Funds*	(10) %	(11) Combined Fed/Agency*	(14) %	(15) Combined Fed/Agency*	(16)	(17)	(18)	(19)
RECONCILIATION SECTION (Remaining Funds)		100.00%	14,093	#DIV/0!		100.00%	16,677	100.00%	29,094						Non-E on Budget
TOTAL INDIRECT COSTS															
25.00% of Total Wages + Fringe Benefits															Yes

(I) PERSONNEL DETAIL

	(1) TOTAL FUNDING	(2) %	(3) TITLE V	(4) %	(5) SIDS	(6) %	(7) Agency Funds*	(10) %	(11) Combined Fed/Agency*	(14) %	(15) Combined Fed/Agency*
RECONCILIATION SECTION (Remaining Funds)		100.00%	70,523	100.00%	3,000	100.00%	49,557	100.00%	61,460	100.00%	54,915
TOTAL PERSONNEL COSTS											
FRINGE BENEFITS											
TOTAL WAGES											

100%

	INITIALS	TITLE OR CLASSIFICATION	Actual Benefit %	Actual Benefit $	TOTAL WAGES	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	% Time In Prog.	Staff Traveling (X)	J-Pers MCF Per Staff	Total Match %
1	LM	MCAH Director																48.60%	
2	OTP	Health Education Associate II																48.60%	
3	RL	Office Assistant III																48.60%	
4	NS	PSC SIDS PCG Coordinator																48.60%	
5	VAC	MCAH Coordinator																48.60%	
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Program:	Maternal, Child and Adolescent Health				UNMATCHED FUNDING						NON-ENHANCED MATCHING (50/50)		ENHANCED MATCHING (75/25)					
Agency:	201835 San Benito																	
SubK:					MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E					
	BUDGET LINE ITEMS			(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)	(18)	(19)
	ORIGINAL BUDGET			TOTAL FUNDING	%	TITLE V	%	SIDS	%	Agency Funds*	%	Combined Fed/Agency*	%	Combined Fed/Agency*				
41																		
42																		
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California Department of Public Health CDPH Maternal, Child and Adolescent Health Division

INVOICE SUMMARY	FISCAL YEAR	INVOICE #	INVOICE PERIOD
	2018-19	Q3	January - March

Version 4.6 - 50 Quarterly

			UNMATCHED FUNDING						NON-ENHANCED MATCHING (50/50)		ENHANCED MATCHING (75/25)			
Program:	Maternal, Child and Adolescent Health													
Agency:	201835 San Benito													
SubK:			MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E			
	BUDGET LINE ITEMS	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)
	ORIGINAL BUDGET	TOTAL FUNDING	%	TITLE V	%	SIDS	%	Agency Funds*	%	Combined Fed/Agency*	%	Combined Fed/Agency*		

EXPENSE CATEGORY												
(I) PERSONNEL												
(II) OPERATING EXPENSES												
(III) CAPITAL EXPENDITURES												
(IV) OTHER COSTS												
(V) INDIRECT COSTS												
TOTAL INVOICED*												

TOTAL TITLE V							
TOTAL SIDS							
TOTAL TITLE XIX				[50%]		[75%]	
TOTAL AGENCY FUNDS				[50%]		[25%]	

$ -	Maximum Amount Payable from State and Federal resources

AS THE MCAH/PROJECT DIRECTOR, I CERTIFY THAT I HAVE SEEN AND REVIEWED THIS INVOICE FOR COMPLIANCE WITH MCAH ADMINISTRATIVE AND PROGRAM POLICIES.

AS THE FISCAL AGENT FOR THIS AGENCY, I CERTIFY THAT THIS INVOICE IS BASED UPON ACTUAL COSTS AND THAT THOSE SALARIES AND WAGES FOR STAFF FUNDED IN WHOLE OR IN PART BY FEDERAL TITLE XIX FUNDS ARE BASED ENTIRELY ON TIME-STUDY DOCUMENTS COMPLETED BY PROGRAM STAFF.

MCAH/PROJECT DIRECTOR'S SIGNATURE DATE

AGENCY FISCAL / AGENCY FISCAL AGENT'S SIGNATURE DATE

* These amounts contain local revenues submitted for information and matching purposes. MCAH does not reimburse for Agency contributions.

STATE USE ONLY - TOTAL STATE AND FEDERAL REIMBURSEMENT	MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E
PCA Codes	53107		53112				53118		53117
(I) PERSONNEL									
(II) OPERATING EXPENSES									
(III) CAPITAL EXPENSES									
(IV) OTHER COSTS									
(V) INDIRECT COSTS									
Totals for PCA Codes									

California Department of Public Health CDPH Maternal, Child and Adolescent Health Division

			UNMATCHED FUNDING						NON-ENHANCED MATCHING (50/50)		ENHANCED MATCHING (75/25)			
Program:	Maternal, Child and Adolescent Health													
Agency:	201835 San Benito													
SubK:			MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E			
	BUDGET LINE ITEMS	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)
	ORIGINAL BUDGET	TOTAL FUNDING	%	TITLE V	%	SIDS	%	Agency Funds*	%	Combined Fed/Agency*	%	Combined Fed/Agency*		

(II) OPERATING EXPENSES DETAIL

		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)
	RECONCILIATION SECTION (Remaining Funds)												% PERSONNEL MATCH
			100.00%	6,655	#DIV/0!		100.00%	1,980	100.00%	8,165	#DIV/0!		
	TOTAL OPERATING EXPENSES												Match Available
	TRAVEL												
	TRAINING												
1	Communications												
2	Equipment Maintenance/Lease												
3	Office Supplies												
4	Utilities												
5	MCAH Toll Free Line												
6	Rent												
7													
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12													
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14													
15													

** Unmatched Operating Expenses are not eligible for Federal matching funds (Title XIX). Expenses may only be charged to Unmatched Title V (Col. 3), State General Funds (Col. 5), and/or Agency (Col. 7) funds.

(III) CAPITAL EXPENDITURE DETAIL

	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)
RECONCILIATION SECTION (Remaining Funds)										
		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		
TOTAL CAPITAL EXPENDITURES										

(IV) OTHER COSTS DETAIL

		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)
	RECONCILIATION SECTION (Remaining Funds)												% PERSONNEL MATCH
			100.00%	10,769	#DIV/0!		100.00%	7,745	100.00%	7,761	100.00%	26,725	
	TOTAL OTHER COSTS												
	SUBCONTRACTS												Match Available
1	Nancy Diehl												
2													
3													
4													
5													
	OTHER CHARGES												
1	Program Supplies												
2													
3													
4													
5													

Program:	Maternal, Child and Adolescent Health		UNMATCHED FUNDING						NON-ENHANCED MATCHING (50/50)		ENHANCED MATCHING (75/25)			
Agency:	201835 San Benito													
SubK:			MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E			
	BUDGET LINE ITEMS	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)
	ORIGINAL BUDGET	TOTAL FUNDING	%	TITLE V	%	SIDS	%	Agency Funds*	%	Combined Fed/Agency*	%	Combined Fed/Agency*		

California Department of Public Health CDPH Maternal, Child and Adolescent Health Division

Program: Maternal, Child and Adolescent Health Agency: 201835 San Benito SubK:		UNMATCHED FUNDING						NON-ENHANCED MATCHING (50/50)		ENHANCED MATCHING (75/25)					
		MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E					
BUDGET LINE ITEMS	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)	(18)	(19)
ORIGINAL BUDGET	TOTAL FUNDING	%	TITLE V	%	SIDS	%	Agency Funds*	%	Combined Fed/Agency*	%	Combined Fed/Agency*				
(V) INDIRECT COSTS DETAIL		RECONCILIATION SECTION (Remaining Funds)													
		100.00%	14,093	#DIV/0!		100.00%	16,677	100.00%	29,094						Non-E on Budget
TOTAL INDIRECT COSTS															
25.00% of Total Wages + Fringe Benefits															Yes

(I) PERSONNEL DETAIL						RECONCILIATION SECTION (Remaining Funds)													
						100.00%	70,523	100.00%	3,000	100.00%	49,557	100.00%	61,460	100.00%	54,915				
		TOTAL PERSONNEL COSTS																	
		FRINGE BENEFITS																	
		TOTAL WAGES																	100%
	INITIALS	TITLE OR CLASSIFICATION	Actual Benefit %	Actual Benefit $	TOTAL WAGES											% Time In Prog.	Staff Traveling (X)	J-Pers MCF Per Staff	Total Match %
1	LM	MCAH Director																48.60%	
2	OTP	Health Education Associate II																48.60%	
3	RL	Office Assistant III																48.60%	
4	NS	PSC SIDS PCG Coordinator																48.60%	
5	VAC	MCAH Coordinator																48.60%	
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Program:	Maternal, Child and Adolescent Health					UNMATCHED FUNDING							NON-ENHANCED MATCHING (50/50)		ENHANCED MATCHING (75/25)					
Agency:	201835 San Benito																			
SubK:						MCAH-TV		SIDS		AGENCY FUNDS			MCAH Cnty-N		MCAH Cnty-E					
	BUDGET LINE ITEMS				(1)	(2)	(3)	(4)	(5)	(6)	(7)		(10)	(11)	(14)	(15)	(16)	(17)	(18)	(19)
	ORIGINAL BUDGET				TOTAL FUNDING	%	TITLE V	%	SIDS	%	Agency Funds*		%	Combined Fed/Agency*	%	Combined Fed/Agency*				
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California Department of Public Health CDPH Maternal, Child and Adolescent Health Division

INVOICE SUMMARY	FISCAL YEAR	INVOICE #	INVOICE PERIOD
	2018-19	Q4	April - June

Version 4.6 - 50 Quarterly

Program:	Maternal, Child and Adolescent Health		UNMATCHED FUNDING						NON-ENHANCED MATCHING (50/50)		ENHANCED MATCHING (75/25)			
Agency:	201835 San Benito													
SubK:			MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E			
	BUDGET LINE ITEMS	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)
	ORIGINAL BUDGET	TOTAL FUNDING	%	TITLE V	%	SIDS	%	Agency Funds*	%	Combined Fed/Agency*	%	Combined Fed/Agency*		

EXPENSE CATEGORY											
(I) PERSONNEL											
(II) OPERATING EXPENSES											
(III) CAPITAL EXPENDITURES											
(IV) OTHER COSTS											
(V) INDIRECT COSTS											
TOTAL INVOICED*											

TOTAL TITLE V		→				
TOTAL SIDS		→				
TOTAL TITLE XIX		→	[50%]		[75%]	
TOTAL AGENCY FUNDS		→	[50%]		[25%]	

$ -	Maximum Amount Payable from State and Federal resources

AS THE MCAH/PROJECT DIRECTOR, I CERTIFY THAT I HAVE SEEN AND REVIEWED THIS INVOICE FOR COMPLIANCE WITH MCAH ADMINISTRATIVE AND PROGRAM POLICIES.

AS THE FISCAL AGENT FOR THIS AGENCY, I CERTIFY THAT THIS INVOICE IS BASED UPON ACTUAL COSTS AND THAT THOSE SALARIES AND WAGES FOR STAFF FUNDED IN WHOLE OR IN PART BY FEDERAL TITLE XIX FUNDS ARE BASED ENTIRELY ON TIME-STUDY DOCUMENTS COMPLETED BY PROGRAM STAFF.

MCAH/PROJECT DIRECTOR'S SIGNATURE DATE

AGENCY FISCAL / AGENCY FISCAL AGENT'S SIGNATURE DATE

* These amounts contain local revenues submitted for information and matching purposes. MCAH does not reimburse for Agency contributions.

STATE USE ONLY - TOTAL STATE AND FEDERAL REIMBURSEMENT	MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E
PCA Codes	53107		53112				53118		53117
(I) PERSONNEL									
(II) OPERATING EXPENSES									
(III) CAPITAL EXPENSES									
(IV) OTHER COSTS									
(V) INDIRECT COSTS									
Totals for PCA Codes									

California Department of Public Health CDPH Maternal, Child and Adolescent Health Division

Program: Maternal, Child and Adolescent Health		UNMATCHED FUNDING						NON-ENHANCED MATCHING (50/50)		ENHANCED MATCHING (75/25)			
Agency: 201835 San Benito													
SubK:		MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E			
BUDGET LINE ITEMS	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)
ORIGINAL BUDGET	TOTAL FUNDING	%	TITLE V	%	SIDS	%	Agency Funds*	%	Combined Fed/Agency*	%	Combined Fed/Agency*		

(II) OPERATING EXPENSES DETAIL

	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)–(17)
		RECONCILIATION SECTION (Remaining Funds)										% PERSONNEL MATCH
		100.00%	6,655	#DIV/0!		100.00%	1,980	100.00%	8,165	#DIV/0!		
TOTAL OPERATING EXPENSES												Match Available
TRAVEL												
TRAINING												
1 Communications												
2 Equipment Maintenance/Lease												
3 Office Supplies												
4 Utilities												
5 MCAH Toll Free Line												
6 Rent												
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15												

** Unmatched Operating Expenses are not eligible for Federal matching funds (Title XIX). Expenses may only be charged to Unmatched Title V (Col. 3), State General Funds (Col. 5), and/or Agency (Col. 7) funds.

(III) CAPITAL EXPENDITURE DETAIL

	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)–(15)
		RECONCILIATION SECTION (Remaining Funds)								
		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		
TOTAL CAPITAL EXPENDITURES										

(IV) OTHER COSTS DETAIL

	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)–(17)
		RECONCILIATION SECTION (Remaining Funds)										% PERSONNEL MATCH
		100.00%	10,769	#DIV/0!		100.00%	7,745	100.00%	7,761	100.00%	26,725	
TOTAL OTHER COSTS												
SUBCONTRACTS												Match Available
1 Nancy Diehl												
2												
3												
4												
5												
OTHER CHARGES												
1 Program Supplies												
2												
3												
4												
5												

Program:	Maternal, Child and Adolescent Health		UNMATCHED FUNDING						NON-ENHANCED MATCHING (50/50)		ENHANCED MATCHING (75/25)			
Agency:	201835 San Benito													
SubK:			MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E			
	BUDGET LINE ITEMS	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)
	ORIGINAL BUDGET	TOTAL FUNDING	%	TITLE V	%	SIDS	%	Agency Funds*	%	Combined Fed/Agency*	%	Combined Fed/Agency*		

California Department of Public Health CDPH Maternal, Child and Adolescent Health Division

Program:	Maternal, Child and Adolescent Health		UNMATCHED FUNDING						NON-ENHANCED MATCHING (50/50)		ENHANCED MATCHING (75/25)					
Agency:	201835 San Benito															
SubK:			MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E					
	BUDGET LINE ITEMS	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)	(18)	(19)
	ORIGINAL BUDGET	TOTAL FUNDING	%	TITLE V	%	SIDS	%	Agency Funds*	%	Combined Fed/Agency*	%	Combined Fed/Agency*				

(V) INDIRECT COSTS DETAIL

		(2) %	(3) TITLE V	(4) %	(5) SIDS	(6) %	(7) Agency Funds*	(10) %	(11) Combined Fed/Agency*	(14) %	(15) Combined Fed/Agency*	(16)	(17)	(18)	(19)
RECONCILIATION SECTION (Remaining Funds)		100.00%	14,093	#DIV/0!		100.00%	16,677	100.00%	29,094						Non-E on Budget
TOTAL INDIRECT COSTS															
25.00% of Total Wages + Fringe Benefits															Yes

(I) PERSONNEL DETAIL

		(2) %	(3) TITLE V	(4) %	(5) SIDS	(6) %	(7) Agency Funds*	(10) %	(11) Combined Fed/Agency*	(14) %	(15) Combined Fed/Agency*
RECONCILIATION SECTION (Remaining Funds)		100.00%	70,523	100.00%	3,000	100.00%	49,557	100.00%	61,460	100.00%	54,915
TOTAL PERSONNEL COSTS											
FRINGE BENEFITS											
TOTAL WAGES											

100%

	INITIALS	TITLE OR CLASSIFICATION	Actual Benefit %	Actual Benefit $	TOTAL WAGES	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	% Time In Prog.	Staff Traveling (X)	J-Pers MCF Per Staff	Total Match %
1	LM	MCAH Director																48.60%	
2	OTP	Health Education Associate II																48.60%	
3	RL	Office Assistant III																48.60%	
4	NS	PSC SIDS PCG Coordinator																48.60%	
5	VAC	MCAH Coordinator																48.60%	
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California Department of Public Health CDPH Maternal, Child and Adolescent Health Division

Program: **Maternal, Child and Adolescent Health**
Agency: **201835 San Benito**
SubK:

	BUDGET LINE ITEMS	(1)	UNMATCHED FUNDING						NON-ENHANCED MATCHING (50/50)		ENHANCED MATCHING (75/25)					
			MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E					
			(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)	(18)	(19)
	ORIGINAL BUDGET	**TOTAL FUNDING**	**%**	**TITLE V**	**%**	**SIDS**	**%**	**Agency Funds***	**%**	**Combined Fed/Agency***	**%**	**Combined Fed/Agency***				
41																
42																
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44																
45																
46																
47																
48																
49																
50																

California Department of Public Health CDPH Maternal, Child and Adolescent Health Division

INVOICE SUMMARY	FISCAL YEAR	INVOICE #	INVOICE PERIOD
	2018-19	Sup. 1	July 1 - June 30

Version 4.6 - 50 Quarterly

			UNMATCHED FUNDING						NON-ENHANCED MATCHING (50/50)		ENHANCED MATCHING (75/25)			
Program:	Maternal, Child and Adolescent Health		MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E			
Agency:	201835 San Benito													
SubK:	BUDGET LINE ITEMS	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)
	ORIGINAL BUDGET	TOTAL FUNDING	%	TITLE V	%	SIDS	%	Agency Funds*	%	Combined Fed/Agency*	%	Combined Fed/Agency*		

EXPENSE CATEGORY											
(I) PERSONNEL											
(II) OPERATING EXPENSES											
(III) CAPITAL EXPENDITURES											
(IV) OTHER COSTS											
(V) INDIRECT COSTS											
TOTAL INVOICED*											

TOTAL TITLE V						
TOTAL SIDS						
TOTAL TITLE XIX			[50%]		[75%]	
TOTAL AGENCY FUNDS			[50%]		[25%]	

$ - **Maximum Amount Payable from State and Federal resources**

AS THE MCAH/PROJECT DIRECTOR, I CERTIFY THAT I HAVE SEEN AND REVIEWED THIS INVOICE FOR COMPLIANCE WITH MCAH ADMINISTRATIVE AND PROGRAM POLICIES.

AS THE FISCAL AGENT FOR THIS AGENCY, I CERTIFY THAT THIS INVOICE IS BASED UPON ACTUAL COSTS AND THAT THOSE SALARIES AND WAGES FOR STAFF FUNDED IN WHOLE OR IN PART BY FEDERAL TITLE XIX FUNDS ARE BASED ENTIRELY ON TIME-STUDY DOCUMENTS COMPLETED BY PROGRAM STAFF.

MCAH/PROJECT DIRECTOR'S SIGNATURE DATE

AGENCY FISCAL / AGENCY FISCAL AGENT'S SIGNATURE DATE

* These amounts contain local revenues submitted for information and matching purposes. MCAH does not reimburse for Agency contributions.

STATE USE ONLY - TOTAL STATE AND FEDERAL REIMBURSEMENT	MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E
PCA Codes	53107		53112				53118		53117
(I) PERSONNEL									
(II) OPERATING EXPENSES									
(III) CAPITAL EXPENSES									
(IV) OTHER COSTS									
(V) INDIRECT COSTS									
Totals for PCA Codes									

Program: Maternal, Child and Adolescent Health		UNMATCHED FUNDING						NON-ENHANCED MATCHING (50/50)		ENHANCED MATCHING (75/25)			
Agency: 201835 San Benito													
SubK:		MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E			
BUDGET LINE ITEMS	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)
ORIGINAL BUDGET	TOTAL FUNDING	%	TITLE V	%	SIDS	%	Agency Funds*	%	Combined Fed/Agency*	%	Combined Fed/Agency*		

(II) OPERATING EXPENSES DETAIL		RECONCILIATION SECTION (Remaining Funds)										% PERSONNEL MATCH
		100.00%	6,655	#DIV/0!		100.00%	1,980	100.00%	8,165	#DIV/0!		
TOTAL OPERATING EXPENSES												Match Available
TRAVEL												
TRAINING												
1 Communications												
2 Equipment Maintenance/Lease												
3 Office Supplies												
4 Utilities												
5 MCAH Toll Free Line												
6 Rent												
7												
8												
9												
10												
11												
12												
13												
14												
15												

** Unmatched Operating Expenses are not eligible for Federal matching funds (Title XIX). Expenses may only be charged to Unmatched Title V (Col. 3), State General Funds (Col. 5), and/or Agency (Col. 7) funds.

(III) CAPITAL EXPENDITURE DETAIL		RECONCILIATION SECTION (Remaining Funds)								
		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		
TOTAL CAPITAL EXPENDITURES										

(IV) OTHER COSTS DETAIL		RECONCILIATION SECTION (Remaining Funds)										% PERSONNEL MATCH
		100.00%	10,769	#DIV/0!		100.00%	7,745	100.00%	7,761	100.00%	26,725	
TOTAL OTHER COSTS												
SUBCONTRACTS												Match Available
1 Nancy Diehl												
2												
3												
4												
5												
OTHER CHARGES												
1 Program Supplies												
2												
3												
4												
5												

Program:	Maternal, Child and Adolescent Health		UNMATCHED FUNDING						NON-ENHANCED MATCHING (50/50)		ENHANCED MATCHING (75/25)			
Agency:	201835 San Benito													
SubK:			MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E			
	BUDGET LINE ITEMS	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)
	ORIGINAL BUDGET	TOTAL FUNDING	%	TITLE V	%	SIDS	%	Agency Funds*	%	Combined Fed/Agency*	%	Combined Fed/Agency*		

California Department of Public Health CDPH Maternal, Child and Adolescent Health Division

Program:	Maternal, Child and Adolescent Health		UNMATCHED FUNDING						NON-ENHANCED MATCHING (50/50)		ENHANCED MATCHING (75/25)				
Agency:	201835 San Benito														
SubK:			MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E				
	BUDGET LINE ITEMS	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)	(18)	(19)
	ORIGINAL BUDGET	TOTAL FUNDING	%	TITLE V	%	SIDS	%	Agency Funds*	%	Combined Fed/Agency*	%	Combined Fed/Agency*				

(V) INDIRECT COSTS DETAIL

RECONCILIATION SECTION (Remaining Funds)

	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)	(18)	(19)
		100.00%	14,093	#DIV/0!		100.00%	16,677	100.00%	29,094						Non-E on Budget
TOTAL INDIRECT COSTS															
25.00% of Total Wages + Fringe Benefits															Yes

(I) PERSONNEL DETAIL

RECONCILIATION SECTION (Remaining Funds)

	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)
		100.00%	70,523	100.00%	3,000	100.00%	49,557	100.00%	61,460	100.00%	54,915
TOTAL PERSONNEL COSTS											
FRINGE BENEFITS											
TOTAL WAGES											

100%

	INITIALS	TITLE OR CLASSIFICATION	Actual Benefit %	Actual Benefit $	TOTAL WAGES	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	% Time In Prog.	Staff Traveling (X)	J-Pers MCF Per Staff	Total Match %
1	LM	MCAH Director																48.60%	
2	OTP	Health Education Associate II																48.60%	
3	RL	Office Assistant III																48.60%	
4	NS	PSC SIDS PCG Coordinator																48.60%	
5	VAC	MCAH Coordinator																48.60%	
6																			
7																			
8																			
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10																			
11																			
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40																			

Program:		Maternal, Child and Adolescent Health				UNMATCHED FUNDING						NON-ENHANCED MATCHING (50/50)		ENHANCED MATCHING (75/25)					
Agency:		201835 San Benito																	
SubK:						MCAH-TV		SIDS		AGENCY FUNDS		MCAH Cnty-N		MCAH Cnty-E					
		BUDGET LINE ITEMS			(1)	(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)	(18)	(19)
		ORIGINAL BUDGET			TOTAL FUNDING	%	TITLE V	%	SIDS	%	Agency Funds*	%	Combined Fed/Agency*	%	Combined Fed/Agency*				
41																			
42																			
43																			
44																			
45																			
46																			
47																			
48																			
49																			
50																			

California Department of Public Health CDPH Maternal, Child and Adolescent Health Division

INVOICE RECONCILIATION SUMMARY TABLE

Budgeted	Paid	Balance
219,511		219,511

Version 4.6 - 50 Quarterly

Program: Maternal, Child and Adolescent Health

Agency: 201835 San Benito

SubK:

		UNMATCHED FUNDING									NON-ENHANCED MATCHING (50/50)				ENHANCED MATCHING (75/25)		
			MCAH-TV		SIDS				AGENCY FUNDS				MCAH Cnty-N				MCAH
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)
		TOTAL FUNDING REMAINING	%	TITLE V REMAINING	%	SIDS REMAINING	%	- REMAINING	%	Agency Funds* REMAINING	%	REMAINING	%	Combined Fed/Agency* REMAINING	%	REMAINING	%
(I) PERSONNEL	100.00%	239,455	100.00%	70,523	100.00%	3,000			100.00%	49,557			100.00%	61,460			100.00%
(II) OPERATING EXPENSES	100.00%	16,800	100.00%	6,655					100.00%	1,980			100.00%	8,165			
(III) CAPITAL EXPENDITURES																	
(IV) OTHER COSTS	100.00%	53,000	100.00%	10,769					100.00%	7,745			100.00%	7,761			100.00%
(V) INDIRECT COSTS	100.00%	59,864	100.00%	14,093					100.00%	16,677			100.00%	29,094			
TOTALS*	100.00%	369,119	100.00%	102,040	100.00%	3,000	#DIV/0!		100.00%	75,959	#DIV/0!		100.00%	106,480	#DIV/0!		100.00%

EXPENSE CATEGORY		TOTALS		UNMATCHED FUNDING								ON-ENHANCED MATCHING (50/5		NON-ENHANCED (50/50)		ENHANCED (75/25)		
		% Funding	(1) TOTAL FUNDING	(2) % Remaining (3)	(3) PCA 53107 Remaining (3)	(4) % Remaining	(5) PCA 53112 Remaining	(4) % Remaining	(5) PCA 0 Remaining	(6) % Remaining Agency	(7) PCA 0 Remaining Agency	(8) % Remaining Fed/State	(9) PCA 0 Remaining Fed/State	(10) % Remaining Fed/Agency	(11) PCA 53118 Remaining Fed/Agency	(12) % Remaining Fed/State	(13) PCA 0 Remaining Fed/State	(14) % Remaining Fed/Agency
(I) PERSONNEL				UNMATCHED FUNDING								ON - ENHANCED MATCHING (50/		NON-ENHANCED (50/50)		ENHANCED MATCHING (75/25)		ENHANC
BUDGETS	ORIGINAL		239,455	1	70,523	1	3,000	1		1	49,557	1		1	61,460	1		1
				1		1		1		1		1		1		1		1
	Difference																	
				1		1		1		1		1		1		1		1
				1		1		1		1		1		1		1		1
	Difference																	
				1		1		1		1		1		1		1		1
				1		1		1		1		1		1		1		1
	Difference																	
	Q1							#DIV/0!				#DIV/0!				#DIV/0!		
	Q2							#DIV/0!				#DIV/0!				#DIV/0!		
	Q3							#DIV/0!				#DIV/0!				#DIV/0!		
	Q4							#DIV/0!				#DIV/0!				#DIV/0!		
	Sup. 1							#DIV/0!				#DIV/0!				#DIV/0!		
	Sup. 2							#DIV/0!				#DIV/0!				#DIV/0!		
Adjustments/Corrections																		
Total Expended Funds																		
Balance of Available Funds*		100.00%	239,455	100.00%	70,523	100.00%	3,000			100.00%	49,557			100.00%	61,460			100.00%

(II) OPERATING EXPENSES

			UNMATCHED FUNDING								N - ENHANCED MATCHING (50/		NON-ENHANCED (50/50)		ENHANCED MATCHING (75/25)		ENHANC
BUDGETS ORIGINAL		16,800	1	6,655	1		1		1	1,980	1		1	8,165	1		1
			1		1		1		1		1		1		1		1
Difference																	
			1		1		1		1		1		1		1		1
			1		1		1		1		1		1		1		1
Difference																	
			1		1		1		1		1		1		1		1
			1		1		1		1		1		1		1		1
Difference																	
Q1					#DIV/0!		#DIV/0!				#DIV/0!				#DIV/0!		#DIV/0!
Q2					#DIV/0!		#DIV/0!				#DIV/0!				#DIV/0!		#DIV/0!
Q3					#DIV/0!		#DIV/0!				#DIV/0!				#DIV/0!		#DIV/0!
Q4					#DIV/0!		#DIV/0!				#DIV/0!				#DIV/0!		#DIV/0!
Sup. 1					#DIV/0!		#DIV/0!				#DIV/0!				#DIV/0!		#DIV/0!
Sup. 2					#DIV/0!		#DIV/0!				#DIV/0!				#DIV/0!		#DIV/0!
Adjustments/Corrections																	
Total Expended Funds																	
Balance of Available Funds*	**100.00%**	**16,800**	**100.00%**	**6,655**	**#DIV/0!**		**#DIV/0!**		**100.00%**	**1,980**	**#DIV/0!**		**100.00%**	**8,165**	**#DIV/0!**		**#DIV/0!**

EXPENSE CATEGORY	TOTALS		UNMATCHED FUNDING								NON-ENHANCED (50/50)			
	% Funding	(1) TOTAL FUNDING	(2) % Remaining (3)	(3) PCA 53107 Remaining (3)	(4) % Remaining	(5) PCA 53112 Remaining	% Remaining	PCA 0 Remaining	(6) % Remaining Agency	(7) PCA 0 Remaining Agency	(8) % Remaining Fed/State	(9) PCA 0 Remaining Fed/State	(10) % Remaining Fed/Agency	(11) PCA 53118 Remaining Fed/Agency

(III) CAPITAL EXPENDITURES

			UNMATCHED FUNDING								N - ENHANCED MATCHING (50/		NON-ENHANCED (50/50)	
BUDGETS			1		1		1		1		1		1	
			1		1		1		1		1		1	
Difference														
			1		1		1		1		1		1	
			1		1		1		1		1		1	
Difference														
			1		1		1		1		1		1	
			1		1		1		1		1		1	
Difference														
Q1	#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!	
Q2	#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!	
Q3	#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!	
Q4	#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!	
Sup. 1	#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!	
Sup. 2	#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!	
Adjustments/Corrections														
Total Expended Funds														
Balance of Available Funds*	**#DIV/0!**		**#DIV/0!**		**#DIV/0!**		**#DIV/0!**		**#DIV/0!**		**#DIV/0!**		**#DIV/0!**	

(IV) OTHER COSTS

				UNMATCHED FUNDING							NON - ENHANCED MATCHING (5		NON-ENHANCED (50/50)		ENHANCED MATCHING (75/25)		ENHANC
BUDGETS	ORIGINAL		53,000	1	10,769	1		1		1	7,745	1		1	7,761	1	1
				1		1		1		1		1		1		1	1
	Difference																
				1		1		1		1		1		1		1	1
				1		1		1		1		1		1		1	1
	Difference																
				1		1		1		1		1		1		1	1
				1		1		1		1		1		1		1	1
	Difference																
	Q1					#DIV/0!		#DIV/0!				#DIV/0!				#DIV/0!	
	Q2					#DIV/0!		#DIV/0!				#DIV/0!				#DIV/0!	
	Q3					#DIV/0!		#DIV/0!				#DIV/0!				#DIV/0!	
	Q4					#DIV/0!		#DIV/0!				#DIV/0!				#DIV/0!	
	Sup. 1					#DIV/0!		#DIV/0!				#DIV/0!				#DIV/0!	
	Sup. 2					#DIV/0!		#DIV/0!				#DIV/0!				#DIV/0!	
Adjustments/Corrections																	
	Total Expended Funds																
Balance of Available Funds*		100.00%	53,000	100.00%	10,769	#DIV/0!		#DIV/0!		100.00%	7,745	#DIV/0!		100.00%	7,761	#DIV/0!		100.00%

EXPENSE CATEGORY		TOTALS		UNMATCHED FUNDING								NON-ENHANCED (50/50)			
		% Funding	(1) TOTAL FUNDING	(2) % Remaining (3)	(3) PCA 53107 Remaining (3)	(4) % Remaining	(5) PCA 53112 Remaining	(6) % Remaining	(7) PCA 0 Remaining	(8) % Remaining Agency	(9) PCA 0 Remaining Agency	(10) % Remaining Fed/State	(11) PCA 0 Remaining Fed/State	(12) % Remaining Fed/Agency	(13) PCA 53118 Remaining Fed/Agency
(V) INDIRECT COSTS				UNMATCHED FUNDING								NCED MATCHING (50/50)		NON-ENHANCED (50/50)	
BUDGETS	ORIGINAL		59,864	1	14,093	1		1		1	16,677	1		1	29,094
				1		1		1		1		1		1	
	Difference														
				1		1		1		1		1		1	
				1		1		1		1		1		1	
	Difference														
				1		1		1		1		1		1	
				1		1		1		1		1		1	
	Difference														
	Q1					#DIV/0!		#DIV/0!				#DIV/0!			
	Q2					#DIV/0!		#DIV/0!				#DIV/0!			
	Q3					#DIV/0!		#DIV/0!				#DIV/0!			
	Q4					#DIV/0!		#DIV/0!				#DIV/0!			
	Sup. 1					#DIV/0!		#DIV/0!				#DIV/0!			
	Sup. 2					#DIV/0!		#DIV/0!				#DIV/0!			
Adjustments/Corrections															
	Total Expended Funds														
Balance of Available Funds*		100.00%	59,864	100.00%	14,093	#DIV/0!		#DIV/0!		100.00%	16,677	#DIV/0!		100.00%	29,094

CDPH Audit Section

Program Maternal, Child and Adolescent Health
Agency: 201835 San Benito
SubK:
FY: 2018-19 ORIGINAL BUDGET

	Budgeted Funds	Remaining Funds $	Remaining Funds %
TOTAL TITLE V	102,040	102,040	100.00%
TOTAL SIDS	3,000	3,000	100.00%
TOTAL -			
TOTAL TITLE XIX	114,470	114,470	100.00%
TOTAL AGENCY FUNDS	149,609	149,609	100.00%
TOTALS	369,119	369,119	100.00%

INVOICE	REIMBURSEMENT TOTALS
Q1	
Q2	
Q3	
Q4	
Sup. 1	
Sup. 2	
Adjust/Corr	
YTD Total	

*Balance of Available Funds includes Title V, State General Fund, Title XIX , and Agency Funds. Agency funds are not reimbursable through the MCAH Program.
**Advance payment will be recovered at the State level when the first three quarterly invoices are submitted for payment and is dependent on funding availability

ł Cnty-E
(17)
Combined Fed/Agency* REMAINING
54,915
26,725
81,640

(15)
PCA 53117 Remaining Fed/Agency
:ED (75/25)
54,915
54,915

ED (75/25)

:ED (75/25)
26,725
26,725