

## GRANT AWARD AGREEMENT

SOUTH CAROLINA DEPARTMENT OF SOCIAL SERVICES		
<b>1535 CONFEDERATE AVENUE EXTENSION POST OFFICE BOX 1520 COLUMBIA, SOUTH CAROLINA 29202-1520</b>	<b>GRANT NUMBER:</b>	4400009627
	<b>PROJECT:</b>	SNAP E&T 50/50
	<b>GRANT PERIOD:</b>	<b>Limited to 1 Year</b>
<b>PROJECT TYPE:</b>		
<b>GRANTOR:</b>	<b>APPROVED GRANT AWARD FOR BUDGET PERIOD</b>	
South Carolina Department of Social Services 1535 Confederate Avenue Extension Post Office Box 1520 Columbia, SC 29202-1520	Description .....\$728,070.00  <b>Federal Funds: \$364,035.00</b> <b>Provider Match: \$364,035.00</b>	
<b>GRANTEE:</b>		
Name: United Way of Greenville County Address: 105 Edinburgh Ct. City, State Zip: Greenville, SC 29607	Contact Person Name: Lisa Colby Phone: 864-467-3548 Email: lcolby@unitedwaygc.org	
<b>MATCH PROVIDED <input checked="" type="checkbox"/> YES    <input type="checkbox"/> NO</b>	<b>MONETARY <input checked="" type="checkbox"/>                      IN-KIND <input type="checkbox"/></b>	

**TERMS AND CONDITIONS:** This grant is being made to a community-based not-for-profit organization. The Grantee agrees to comply with and administer this initiative in accordance with the Description of Services which are indicated below.

NOW THEREFORE, the parties to this Grant Agreement, in consideration of the exchange between them of the mutual promises, covenants, and conditions set forth herein, agree as follows:

### I. Description of Services

The Grantee has traditionally worked to provide employment and training services, in partnership with other agencies and employers in order to enhance and expand services and to ensure maximum benefit of services in local communities. **Attachment 1, Scope of Work** describes the specific services and benefits the grantee will provide under the grant.

Responsibilities of Grantee:

The Grantee will comply with the following requirements:

1. Assure that funds awarded under this grant will be used to pay for employment and training activities and services in compliance with SNAP E&T requirements.
2. Track all clients served and expenditures awarded under this grant.
3. Provide written documentation as indicated in Section V regarding the use of funds provided to grantee.

### II. Match Provided

- a. **Type of Match: Monetary**
- b. **Amount of Match: \$364,035.00**

### III. Grant Period and Termination

This grant shall take effect as of October 01, 2014 and shall, unless terminated sooner by the Grantee or grantor, continue in full force and effect through September 30, 2015. Unless otherwise determined by SCDSS, the services described in this grant shall be provided throughout the period of this grant.

**IV. Location of Services**  
Greenville, South Carolina

**V. Reports**

The Grantee shall collect, maintain, and report statistical and financial data and/or information as requested by SCDSS. Such information will be used for project monitoring and evaluation and will be subject to the Covenants and Conditions, F, of this grant agreement.

The Grantee shall submit a monthly report on program performance that includes, but is not limited to, information on referrals, program participation and job placements. SCDSS will provide the standard format and template for these reports.

At any time during normal business hours and as often as SCDSS may deem necessary, the Grant shall make all program records and service delivery sites open to SCDSS in order that program reviews may be performed. SCDSS shall have the right to examine and make copies, excerpts, or transcripts from all records, contact the client for documentation of service delivery and to conduct on-site reviews of all matters relating to service delivery as specified by this grant. In order to prevent the loss or misuse of information or records, the transfer of any records in the custody of Grantee is prohibited without written SCDSS authorization.

**VI. Budget Information**

The detailed program budget for this grant agreement shall be included at **Attachment 2, Program Budget**.

Allowable sources of the non-Federal funding to be expended by the Grantee may include General State funds, local tax levies, donations from private firms or non-profit organizations, provided those funds are not used as match for any other Federal program.

For nongovernmental organizations, there must be a cash outlay for the SNAP E&T goods or services provided in order to receive a 50 percent reimbursement. In-kind contributions from non-government organizations are not allowable as charges to this program.

Of the fifty percent (50%) Federal reimbursement awarded under the grant, grantee agrees to allow SCDSS to deduct from its payments five percent (5%) of Federal revenues received by SCDSS related to the grantee's reimbursement. The reasonableness of this monitoring fee will be reviewed annually and may be adjusted, with the approval of both parties.

Grantee agrees to use ("reinvest") the remaining ninety-five percent (95%) of Federal revenues generated under this grant to cover its direct costs and indirect costs related to this grant and to expand services to eligible SNAP E&T individuals. Grantee agrees to report quarterly to SCDSS on the use of these reinvested funds during the past quarter and the planned use of funds during the coming quarter.

SCDSS agrees to use the five percent (5%) funds deducted from grantees' Federal reimbursement to fund administrative, training, technical assistance and quality assurance activities. SCDSS agrees to review grantees policies and procedures, to provide training and technical assistance to grantee staff as may be needed, to provide SNAP E&T eligibility information to grantee, and to provide direction and monitor Grantee performance as appropriate for the efficient and effective administration of the grant.

**VII. TERMS AND CONDITIONS**

In addition to all other stipulations, terms, and conditions contained in this grant, the parties to this grant (SCDSS and Grantee) agree to the following covenants and conditions:

A. Request for Reimbursement

SCDSS shall reimburse Grantee only for allowable expenditures reasonably and necessarily incurred by the Grantee in the course of the providing services pursuant to this agreement. Total reimbursement to the Grantee pursuant to this agreement shall not exceed **\$364,035.00**.

Requests for payment shall be made not later than (30) calendar days after the provision of services. Final billing must be received on or before December 31, 2015. Invoices must be signed in ink.

**South Carolina Department of Social Services  
Division of Employment Services Attn: Deborah Reed-Cole  
Post Office Box 1520  
Columbia, South Carolina 29202-1520**

B. Financial Reports

The Grantee shall collect, maintain, and report statistical and financial data and/or information as requested by SCDSS.

C. Fines/Penalties

Any fines or penalties imposed by grantor or other state or federal agencies pursuant to services provided through this grant are the responsibility of the Grantee and shall be paid by the Grantee. No grantor funds shall be used to pay such fines or penalties.

D. Audits & Records

At any time during normal business hours and as often as SCDSS, the State Auditor, the Office of the Attorney General, GAO, DHHS, and any other appropriate federal agency and/or the designee of any of the above may deem necessary, the Grantee shall immediately make available for examination all records of the Grantee with respect to all matters covered by this contract. The Grantee shall permit any of the above to audit, examine, make copies, excerpts, or transcripts from such records and contact and conduct private interviews with Grantee clients and employees and on-site reviews of all matters relating to service delivery. If any audit, litigation, claim, or other action involving the records has been initiated prior to the expiration of a three (3) year period since the date of contract termination/expiration, this Article and the terms hereunder shall continue to apply until the action is completed and the issues are resolved.

1. AUDIT REQUIREMENTS

The Grantee agrees that it shall comply with any federal and/or state audit requirements.

i. Private for Profit

Private for Profit sub-recipient organizations that receive \$500,000 or more in federal financial assistance from SCDSS in a fiscal year shall obtain an annual audit conducted in accordance with the revised Office of Management and Budget (OMB) Circular A-133 or a financial related audit in accordance with Governmental Auditing Standards as determined by DSS.

ii. Audits of States, Local Governments and Non-Profit Organizations

States, local governments and nonprofit sub recipient organizations (both private and public) that expend \$500,000 or more in federal financial assistance from all sources in a fiscal year shall obtain an annual audit in accordance with the Single Audit Act and the revised Office of Management and Budget (OMB) Circular A-133.

iii. Additional Audit Requirements - State Funds

Organizations that receive more than \$75,000 in state funds from SCDSS in a fiscal year are required to obtain an annual financial audit. This Audit shall be performed in accordance with auditing standards and generally accepted accounting principles as defined by the AICPA.

iv. Filing Audit Reports

Each organization required to have an audit shall supply a copy of such audit, data collection form, reporting package, any management letters associated with the audit, and Grantee's corrective action plan to the South Carolina Department of Social Services, Office of Audit Services, Post Office Box 1520, Columbia, South Carolina 29202-1520, within thirty (30) calendar days of the receipt of such report but not later than nine (9) months after the end of the organization's fiscal year.

v. Working Papers

Working papers are to be retained by the audit firm and must be available for examination by SCDSS or its designee for at least three (3) years following the issuance of the audit report to the auditee. Retention of working papers beyond three (3) years is required where questioned costs and/or practices have not been resolved with DSS.

2. CORRECTIVE ACTIONS PLANS

When the audit describes weaknesses in Internal Controls and/or Program compliance, the Grantee must submit a corrective action plan to eliminate the weaknesses indicating the actions taken, actions to be taken, dates of anticipated completion, and contact person responsible, or submit an explanation of specific reasons why no corrective action is required. The corrective action plan must be submitted along with the audit report or reporting package within thirty (30) days of the receipt of the final audit report/management letter. Corrective action should be initiated within six (6) months of the receipt of the audit report and proceed as rapidly as possible. In the event that an audit report contains audit exceptions or disallowances, it is agreed that the following procedures shall be used in making the appropriate audit adjustment(s):

i. Notice of Exception and Disallowances:

SCDSS shall furnish the Grantee with written notice containing the adjustment for each exception. Such notice shall state the total sum disallowed and that payment is due to SCDSS in the full amount within thirty (30) days after the receipt of notice. Notice will be sent to the Grantee by certified mail. Audit exceptions or disallowances shall be accepted as final unless appealed within thirty (30) days of receipt of the notice of disallowance. Payment shall be made within thirty (30) days from the receipt of notice of disallowance regardless of the filing of an appeal.

ii. Disallowances – Appeals

In the event the Grantee disagrees with the audit exceptions and disallowances, they may seek relief in accordance with Article VIII.

iii. Disallowances Sums, Set-Off

Any provision for contract resolution notwithstanding, SCDSS is authorized to recoup at any time after receipt of the notice of disallowances any funds owed to SCDSS. The means of recoupment shall be by withholding and/or offsetting such funds for which SCDSS may be obligated to the Grantee under this or any previous and/or future contracts. Provided, however, if the Grantee can demonstrate that such withholding or set-off would constitute a serious hazard to the quality of services, SCDSS may, in its sole discretion, grant such repayment terms as may be determined by SCDSS to be consonant with sound business practice.

iv. Interest Provision/Repayment (for Disallowed Amounts)

The Grantee shall pay interest on the disallowed amount with said interest accruing from the thirtieth (30th) day following the date of receipt of the notice of disallowance. The Grantee may request that they be permitted to make repayment on an installment payment schedule. Such request must be made in writing within thirty (30) days of the receipt of the notice of disallowance and must contain evidence to support the Grantee's allegation of financial inability to pay the sum in full. At the sole option of SCDSS, SCDSS may agree in writing to permit the Grantee to repay pursuant to an installment payment schedule. The legal interest rate [S.C. Code Ann. ee34-31-20(B)] plus two percent (2%) is SCDSS rate on extended / installment repayment.

v. Audits During and After the Contract Period

The provisions of this Article shall apply to audits commenced during the contract period and audits commenced after termination of this contract and for a period of three (3) years thereafter.

3. ACCURACY OF DATA AND REPORTS

The Grantee agrees that all statements, reports, and claims, financial and otherwise, shall be certified as true, accurate, and complete, and the Grantee shall not submit those claims, statements, or reports which they know, or has reason to know, are not properly prepared or payable pursuant to federal and state laws, applicable regulations, this contract, and SCDSS policy.

i. Maintenance of Records

The Grantee must maintain an accounting system with supporting fiscal records adequate to assure that claims for funds are in accordance with this contract and all applicable laws, regulations, and policies. The Grantee shall keep one (1) copy of the OMB approved Data Collection Form and one (1) copy of the OMB A-133 reporting package on file for three (3) years from the date of submission to the Federal Clearinghouse. The Grantee further agrees to retain all financial and programmatic records, supporting documents, and statistical records under this contract for a period of three (3) years after the expiration of this contract. Property and equipment records must be maintained until three (3) years after transfer, replacement, sale, or junking of the item. If any audit, litigation, claims, or other actions involving the records have been initiated prior to the expiration of the three (3) year period, the records shall be retained until completion of the action and resolution of all issues.

E. Suspension/Debarment

The Grantee/provider certifies by its representative's signature to this contract/agreement that neither the Grantee/provider nor any of its principals are suspended, debarred, proposed for debarment, or declared ineligible for the award of contracts by any state or federal agency. The Grantee/provider agrees to and shall inform SCDSS immediately if at any point it is suspended, debarred, proposed for debarment, or declared ineligible for the award of contracts by any state or federal agency. If at any point the SCDSS and/or the State of South Carolina determines that the Grantee/provider knowingly or in bad faith rendered an erroneous certification and/or that either the Grantee/provider or any of its principals are suspended or debarred, then, in addition to other remedies available to the SCDSS, the SCDSS may terminate this contract immediately and, upon such termination, the Grantee/provider agrees to and shall, within thirty (30) days, return to the SCDSS all funds paid to it under this contract with a 2% penalty.

"Principals," for the purposes of this certification, means officers; directors; owners; partners; and, person having primary management or supervisory responsibilities within a business entity (e.g., general manager; plant manager; head or a subsidiary, division, or business segment, and similar positions).

F. Termination

This grant award may be terminated at any time by the Grantor for convenience, such reason being within the sole discretion of the Grantor. The Grantor shall give notice of termination to the Grantee in writing. Upon

notice of any type of termination and/or expiration of the grant, the Grantee agrees to return immediately to the Grantor all unused funds awarded to it by the Grantor.

In the alternative and in a situation where the Grantee materially fails to comply with any term of this grant award, then the Grantor may choose, instead of termination for convenience, to enforce one or more of the remedial actions outlined in 45 CFR §92.43, as appropriate in the circumstances.

The Grantee may terminate the grant award for convenience upon 30 days written notification to the Grantor, setting forth the reasons for such termination, the effective date, and in the case of partial termination, the portion of the award to be terminated. However, if, in the case of a partial termination, the Grantor determines that the remaining portion of the award will not accomplish the purposes for which the award was made, the Grantor may terminate the award in its entirety. This determination is within the sole discretion of the Grantor.

**G. Notification of Investigation or Inquiry**

The Grantee must notify SCDSS of any investigation of inquiry about suspected, or actual, child or adult protective services violations. The Grantee must notify SCDSS in writing within one (1) day of its notice of the investigation or inquiry. Communication by letter should be sent to the contract manager at SCDSS.

The Grantee must also provide copies of any written results of the investigation or inquiry within three (3) working days of the Grantee's receipt of this information. Failure to provide the required information to SCDSS within the above timeframes may be grounds for termination of the agreement.

The Grantee also must notify SCDSS of any investigation or inquiry initiated by any governmental entities concerning possible violations of health and safety laws or regulations. The Grantee must notify SCDSS within one (1) working day of the Grantee's notice of investigation or inquiry.

The Grantee must provide copies of the written results of the investigation or inquiry within three (3) working days of receipt of this information. Failure to provide the required information to SCDSS within the above timeframes may be grounds for termination of the agreement.

**H. Applicable Laws and Regulations**

The Grantee agrees to comply with all applicable federal and state laws and regulations including constitutional provisions regarding due process and equal protection of the laws and including, but not limited to:

1. All applicable standards, orders, or regulations issued pursuant to the Clean Air Act of 1970, as amended (U.S.C. 7401, et seq.).
2. Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d) and regulations issued pursuant thereto, 45 CFR Part 80.
3. Title VII of the Civil Rights Act of 1964 (42 U.S.C. 2000e) in regard to employees or applicants for employment.
4. Section 504 of the Rehabilitation Act of 1973, as amended, (29 U.S.C. 794), which prohibits discrimination on the basis of handicap in programs and activities receiving or benefiting from federal financial assistance, and regulations issued pursuant thereto (45 CFR Part 84, 1994).
5. The Age Discrimination Act of 1975, as amended, (42 U.S.C. 6101 et seq.), which prohibits discrimination on the basis of age in programs or activities receiving or benefiting from federal financial assistance.
6. The Omnibus Budget Reconciliation Act of 1981, P.E. 97-35, which prohibits discrimination on the basis of sex and religion in programs and activities receiving or benefiting from federal financial assistance.



7. Americans with Disabilities Act, (42 U.S.C. Sections 12101 et seq.), and regulations issued pursuant thereto, 42 CFR Parts 35 and 36.
8. Drug Free Workplace Acts, S.C. Code Ann. §§44-107-10 et seq. (1976, as amended), and the Federal Drug Free Workplace Act of 1988 as set forth in 45 CFR Part 76, Subpart F (1994).
9. Health Insurance Portability and Accountability Act of 1996 (HIPPA)(45 C.F.R.), PART 164.502(e), 164.504(e), 164.532(d) and (e).

I. Political Activity

None of the funds, materials, property, or services provided directly or indirectly under this contract shall be used in the performance of this contract for any partisan political activity, or to further the election or defeat of any candidate for public office or any activity in violation of the "Hatch Act".

J. Restrictions on Lobbying.

In accordance with 31 U.S.C. 1352, funds received through this contract may not be expended to pay any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with any of the following covered Federal actions: the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement. This restriction is applicable to all sub-contractors.

- K. Integration and Amendment. This Contract shall be construed to be the complete integration of all understandings between the parties hereto. No prior or contemporaneous addition, deletion, or other amendment shall have any force or effect whatsoever, unless embodied herein in writing. No subsequent novation, renewal, addition, deletion, or other amendment hereto shall have any force or effect, unless embodied in a written contract executed and approved by both parties or added as an attachment specifically authorized in this contract.

L. Security and Confidentiality of Personally Identifying and other Confidential Client

Grantee agrees to be fully responsible to SCDSS for the security of the storage, processing, compilation, and transmission of all personally identifying and other confidential client data supplied to it by SCDSS, and of all equipment, storage facilities, transmission facilities on or from which any such data is stored, processed, compiled, or transmitted.

1. Grantee agrees that it will not access, use, or disclose such data supplied by SCDSS beyond its limited authorization under this agreement or for any purpose outside the scope of this agreement.
2. Grantee agrees that it will protect such data in a secure environment and ensure that its computer site(s) and related infrastructure will have adequate physical security and that in situations such as remote terminals or other office work sites where all the requirements of a secure area with restricted access cannot be maintained, the equipment shall receive the highest level of protection and shall be consistent with Internal Revenue Service publication requirements on alternate work sites. Grantee agrees that it will not allow any such data supplied to it by SCDSS to be held on mobile, remote, or portable storage devices.
3. Grantee agrees that it will protect the confidentiality of such data in accordance with the requirements of all applicable state and federal laws, regulations, standards, and guidelines, as well as all applicable industry standards, including, but not limited to, Internal Revenue Service requirements, federal information processing standards, the federal Privacy Act, Payment Card Industry (PCI) data security

standards, and functional and assurance requirements for the operating security features of its systems.

4. Grantee agrees that it will ensure that appropriate background checks are performed on each employee/agent/sub-contractor to whom it grants access to any such data; that it will ensure that an appropriate and effective authorization process for user access is maintained; that it will ensure that each of its employees and agents to whom data is disclosed is notified in writing of the confidentiality and security requirements of this agreement and of criminal and civil sanctions under applicable laws; and that it will notify SCDSS immediately in writing if the relationship ends between Grantee and any employee/agent/sub-contractor to whom it granted access or who obtained access to any SCDSS data.
5. Grantee agrees that, in the event of any unauthorized disclosure or loss of such data supplied to it by SCDSS, it will immediately notify SCDSS of the extent of the breach of security, the reason therefore, the sources, the affected data, and mitigation actions. The parties agree that the actual harm to a third party caused by a security breach is difficult to estimate, and that a reasonable forecast of just compensation is for the Grantee to provide to such individual: (1) timely and adequate notice of the facts surrounding the compromise of information; (2) actual damages sustained by the individual as a result of the breach and any prescribed or ordered damages; and (3) two (2) years of credit monitoring services, at no cost to such individual.
6. Grantee agrees that, prior to disposal, all floppy disks, CDs, magnetic tape, hard drives (desktop and server), data DVDs, zip drives, and any other media used in containing sensitive data supplied to it by SCDSS, must be destroyed in compliance with federal and industry legal and standard operating procedures standards to sufficiently ensure that data is non-recoverable, prior to disposal of any such media, equipment, data holders. All hardcopy records that contain sensitive data must be disposed of through a cross cut paper shredder or equivalent secure destruction process.

Grantee agrees that, prior to any disclosure of data or information supplied to it by SCDSS, regardless of instance or whether court-ordered, legally mandated, or otherwise, it will timely notify SCDSS in writing of its intent to disclose and secure the prior written permission of SCDSS before disclose.



Contract # 4400009627

In witness whereof, the Grantor and the Grantee by their authorized agents, in consideration of the mutual promises, covenants and conditions exchanged between them have executed this agreement as of the first date of October 1, 2014.

SOUTH CAROLINA DEPARTMENT OF  
SOCIAL SERVICES (Grantor)

By: \_\_\_\_\_

Witnesses

[Signature]  
Joyce C. Robinson

UNITED WAY OF GREENVILLE COUNTY. (Grantee)

By: \_\_\_\_\_

Witnesses

[Signature]  
[Signature]

Contract # 4400009627

**Attachments**

The attachments contained herein are hereby incorporated into this agreement.

1. Scope of Work
2. Program Budget
3. DSS Financial Form 2215
4. Drug-Free Workplace Act

Third Party Reimbursement Program  
SNAP2WORK

SCOPE OF WORK / TASK ORDER

**Local Agency Name:** United Way of Greenville County

**Operational Period:** October 1, 2014 - September 30, 2015

**A. PROGRAM DESCRIPTION**

United Way of Greenville County (UWGC) proposes to act as an intermediary in the administration of a workforce development and job skills training program on behalf of six local nonprofit partners. The UWGC employment and training partnership includes the following organizations: Alston Wilkes Society, Greenville Region Workforce Collaborative (GRWC), Homes of Hope, Project Host, SHARE, and United Ministries. UWGC has successfully served as the DSS third party provider for this program since March of 2013, serving a total of 3,661 SNAP participants and providing direct and indirect services resulting in a reimbursement of \$250,432.

As a private charity, UWGC currently invests \$1.2 million per year in 21 programs throughout Greenville County to deliver financial stability and workforce development services. Through the SNAP2Work program UWGC and its partners will reinvest resources into high quality programs in order to expand the number of people served and, in some cases, the quality and quantity of services offered. UWGC's intends to invest the additional funds generated through SNAP2Work in programs that help low-skilled, un/under-employed people enter the job skills pipeline and ultimately secure jobs with family-sustaining wages or career ladders. Through its partners, UWGC provides recruitment, career coaching, remedial WorkKeys preparation, job training in identified career clusters, placement and retention, and ongoing monitoring of participants. The SNAP2Work program allows UWGC to bear the administrative and management burden of a program that is beyond the capacity of many smaller service providers.

Marketing and specific services vary depending on the service provider. Each of the six partner providers have specific recruitment, intake, monitoring, assessment processes. For example, United Ministries receives client referrals from other nonprofit agencies and has recently begun working in partnership with the local DSS Employment and Training department to receive clients with mandatory job training requirements (ABAWDs) in the SNAP program. All partners have begun planning ways in which their SNAP2Work participants can receive additional services and incentives as a part of the program. Currently, most programs treat SNAP2Work and non-SNAP2Work clients equally. UWGC has begun encouraging partners to consider additional incentives such as transportation vouchers and other incentives to SNAP participants.

The following is a brief description of each partner provider and the services they offer:

## Third Party Reimbursement Program SNAP2WORK

### Alston Wilkes Society (AWS)

AWS provides case management, soft skills (pre-employment) training, and job search assistance to people reintegrating into society (ex-offenders, homeless veterans, and troubled youth). AWS also provides monitoring and coordination of resources in order to ensure job retention and life stability. Community Service Coordinators serve SNAP participants by addressing their lack of education (with GED and literacy classes) and employment skills (with job training), as well as an array of personal/social barriers (with referrals to community resources).

### Greenville Region Workforce Collaborative (GRWC)

GRWC is a workforce intermediary that works to bridge the local skills gap by training people for the jobs that are available and in high demand. GRWC is funded through public and private grants and is a National Fund for Workforce Solutions site. As the convener of GRWC, United Way manages the job training partnerships with local nonprofits (SHARE, United Ministries, Goodwill, Urban League and others). Resource development, employer relationships, and financial and programmatic reporting are handled by UWGC. With two full-time case managers, two WorkKeys coordinators, and one workforce partnership manager, GRWC serves SNAP participants by coordinating job skills, providing on the job paid employment and apprenticeships, and supportive services.

### Homes of Hope

Homes of Hope participants are men recovering from substance abuse and addiction who have completed a residential recovery program. These men are offered a one-year residential program for job skill training (LEED construction skills) and daily life skill mentoring. Three full-time staff members operate the program and provide services directly relating to job skills training, including: 24 hours of classroom training in construction, basic computer skills, and basic electrical skills and 12 hours each of basic HVAC and basic plumbing. Each participant also receives on-the-job training in blueprint reading/drafting, framing, power saw training, foundation, roofing, building, and trim carpentry. Because of their intense mentoring and training services, Homes of Hope serves a small number of men each year, approximately 15 SNAP participants.

### Project Host

Project Host offers job skills training in the area of culinary services and food preparation. Also offered as part of the program is case management for employment purposes, employment readiness and job retention, culinary and ServSafe managerial certification, and a variety of client support services such as books, test fees, uniforms/materials. Students enrolled in the 12-week program learn cooking principles and what it takes to work in a professional kitchen.

### SHARE

SHARE operates the Lifelong Advancement through Diligence, Determination, and Employment Resources (LADDER) program, which provides intensive case management with a comprehensive system of job training, services, and support to meet the employment needs of low-income targeted adults. The specific goal of LADDER is for participants to complete job training, enter employment, and retain employment beyond a one year follow-up period. Two

Third Party Reimbursement Program  
SNAP2WORK

Case Managers/Job Coaches provide job training and the program assists with the purchase of uniforms, books, vaccines, and other supportive services such as a gas cards.

United Ministries

United Ministries offers two programs as part of this partnership – Adult Education and Employment Readiness. Three full-time academic counselors and one program director support the Adult Education program by offering academic assessment, one-on-one GED preparation, paying for GED testing fees, individualized education plans and counseling, transporting to testing sites, and coordinating services with literacy and employment programs. Most training takes place on a drop-in basis in a classroom setting. The Employment Readiness program reaches SNAP participants per year with three full-time employment counselors and one program director. The program entails a four-day class that teaches job search skills, employability skills, and basic financial skills; individual appointments with employment counselors to develop an individualized employment plan, address barriers, and follow job leads; job training; WorkKeys testing; supportive services, including bus tickets and gas cards, work supplies, financial assistance; and case management to support job retention.

**B. E&T COMPONENTS OFFERED**

The six partner providers will collectively offer all of the allowable E&T component activities to SNAP participants with the exception of vocational training. For example, Alston Wilkes Society offers job search training (via resume writing classes and soft skill development) and job search services (via connecting participants to known employer contacts). United Ministries offers education (GED classes and WorkKeys preparation), job search training (resume writing), and job search services (connecting and referring participants to known employer contacts). The Greenville Region Workforce Collaborative offers job search services (referring participants to employers), education (technical training in advanced manufacturing) and work experience. Project Host offers education (a culinary curriculum leading to certification) and job search services (resume writing and soft skill training). Homes of Hope offers education leading to certification in construction. SHARE offers job search training (resume writing and soft skill training) and education in specific career clusters.

**C. ESTIMATED # OF SNAP PARTICIPANTS**

The UWGC SNAP2Work partnership anticipates serving 3,000 SNAP participants during the 2014-2015 program year. Many participants will receive multiple services. The estimated number of participants by E&T component is as follows:

Job Search Training: 1,740

Job Search: 1,000

Education: 200

Vocational Training: 0

Work Experience: 60

Third Party Reimbursement Program  
SNAP2WORK

**D. FISCAL RESPONSIBILITIES / BUDGET**

2014/15's program costs total \$728,069 compared to 2013/14's total of \$833,619. This change represents a 13% decrease in spending. In spite of this, United Way of Greenville County and its partners anticipate an increase in individuals served from 2013/14 to 2014/15 from 2950 to 3000 persons which represents a 2% increase. The reason for the increase in service accompanied by the simultaneous decrease in cost is due to the recalculation of partner agencies' indirect cost rate. A majority of partners chose to use the "de minimis" rate of 10% rather than calculating an indirect cost rate of their own. In addition, the decrease in cost is in part due to the unmet expectation that the program would grow in 2013/14. 2014/15's budget now reflects a more accurate expectation of cost and service level.

As the intermediary grantee, UWGC will have fiscal responsibility and provide all financial reporting for the program. UWGC will use a flat fee of 5% of the DSS-reimbursed amount to defray the costs of administering the program. In the role of the intermediary for the SNAP2Work grant since April 2013, UWGC has implemented new practices to ensure financial compliance among partners. For instance, the Grant Accounting Manager engages in ongoing training with partners on budget creation, understanding Federal Register guidelines, and maintaining proper documentation. Strengthening partner capacity has been integral to the success of the SNAP2Work grant. Only allowable and necessary program costs will be charged to the grant in accordance with the approved budget (submitted with this Scope of Work). The source of non-federal funds is private funds only. These funds must be verified by all partners through the local match certification summary sheet required by UWGC and SC DSS. Documentation for UWGC's indirect cost rate will be provided upon request.

In order to allow for separate tracking of grant program revenues and expenses, UWGC utilizes Sage 100 Fund Accounting Software. This software ensures effective control for all transactions of a specific grant by program year and budget category as well as tracking the 50% cash match required by DSS. The organization is well-staffed to manage the financial and project management of its programs. The finance department, with a combined total of over 120 years experience in non-profit and for-profit entities, consists of a Chief Operating Officer & Vice president of Finance, a Controller, two Accounting Managers, a Grant Accounting Manager, and one accounting assistant. UWGC plans to expand the finance department by one Accounting Manager in late 2014.

**E. SUPPORT SERVICES**

SNAP participants will receive a variety of services depending on the service provider. Services include:

- Transportation vouchers (bus tokens)
- Tutoring
- Background checks
- Clothing/Equipment/Uniforms
- Supplies
- Physicals/health/drug screenings

All costs for the above services are provided in detail in the attached budget.



Third Party Reimbursement Program  
SNAP2WORK

**F. Tracking / Outcomes Measures**

Each of the six partners measure and report the following outcomes as required for United Way programmatic funding:

- # of SNAP participants served in program
- # of WorkKeys Assessments taken
- # of participants who complete program
- # of participants receiving certificate (GED, HS equivalency, technical trade, college degree etc.)
- # of participants receiving WorkKeys Career Readiness Certificate
- # of participants making a living wage at 6 months and 12 months post-program completion
- # of participants employed at 6 months and 12 months post-program completion
- # of participants who improved employment status at 6 months and 12 months post-program completion
- # of participants still employed 6 months and 12 months post-program completion

Program metrics have corresponding measurement tools (surveys, checklists, etc.) that will assist the partners in collecting this data. All data will be de-identified for client anonymity, aggregated and reported to DSS (local or state office) as required. UWGC uses client management software and a reporting database called Community TechKnowledge to manage this information and produce reports.

**SNAP2WORK - Third Party Reimbursement Program  
Local Agency Budget Estimate**

**Local Agency Name:** Alston Wilkes Society

**Operational Period:** October 1, 2014 - September 30, 2015

1. SALARY COSTS (Employees directly involved in SNAP E&T activities or administrative support)							
Position Title	Name	% FTE	Salary	E&T Salary	Fringe % Rate	E&T Fringe Amount	Total E&T Cost
Program Manager - 25% of \$30,900 x 40% SNAP participation	Sammie Stroud	100%	\$3,090.00	\$3,090.00		\$0.00	\$3,090.00
Case Manager - 90% of \$12,480 x 40% SNAP participation	Brenda Stewart	100%	\$4,493.00	\$4,493.00		\$0.00	\$4,493.00
Director of Community Service Programs - 5% of \$50,000 x 40% SNAP participation	Marilyn Yarnall	100%	\$1,000.00	\$1,000.00		\$0.00	\$1,000.00
				\$0.00		\$0.00	\$0.00
				\$0.00		\$0.00	\$0.00
				\$0.00		\$0.00	\$0.00
				\$0.00		\$0.00	\$0.00
				\$0.00		\$0.00	\$0.00

2. GOODS, SERVICES, Other		BUDGET NARRATIVE
a. Office Equipment/Supplies	\$0.00	100 participants clothing/tools/boots/shoes for interviewing and employment.
b. Postage	\$0.00	
c. Copying/Printing	\$0.00	
d. Lease /Space Rental	\$0.00	
e. Utilities	\$0.00	
f. SNAP Program Marketing	\$0.00	
g. Training	\$0.00	
h. Accounting/Audit Services	\$0.00	
i. Support Svcs (Childcare/Transportation)	\$400.00	
j. Tuition/Fees	\$0.00	
k. Books	\$0.00	
l. Maintenance/Repairs	\$0.00	
m. SNAP Related Travel	\$0.00	
n. Other (Explain in budget narrative)	\$3,137.00	
<b>TOTAL</b>		<b>\$3,537.00</b>

3. INDIRECT COSTS (Please indicate the indirect cost rate and the methodology used to determine indirect costs)	
Indirect Costs	<div><div></div><div>\$1,212.00</div></div>
De minimus rate of 10% applied to the following costs: all	
TOTAL	\$1,212.00

4. PROGRAM COSTS SUMMARY	
Budget Category	Total Program Costs
a. Personnel (Salary & Fringe)	\$8,583.00
b. Goods, Services, Other	\$3,537.00
c. Indirect Costs	\$1,212.00

**TOTAL BUDGET** **\$13,332.00**

**\*Submit Local Match Certification Form to identify the source and amount of non-Federal funds available to operate the program**

**SNAP2Work - Third Party Reimbursement Program  
Local Agency Budget Estimate**

**Local Agency Name:** HOMES OF HOPE, INC

**Operational Period:** October 1, 2014 - September 30, 2015

**1. SALARY COSTS (Employees directly involved in SNAP E&T activities or administrative support)**

Position Title	Name	% FTE	Salary	E&T Salary	Fringe % Rate	E&T Fringe Amount	Total E&T Cost
Executive Director of Men's Development - \$58,000 x 66% x 100% SNAP participation	Steve Vicari	0.66	\$58,000.00	\$38,280.00	28.00%	\$10,718.40	\$48,998.40
Men's Development Program Staff - \$42,500 x 65% x 100 SNAP participation	Nathan Fleming	0.65	\$42,500.00	\$27,625.00	28.00%	\$7,735.00	\$35,360.00
				\$0.00		\$0.00	\$0.00
				\$0.00		\$0.00	\$0.00
				\$0.00		\$0.00	\$0.00
				\$0.00		\$0.00	\$0.00
<b>TOTAL</b>			<b>\$100,500.00</b>	<b>\$65,905.00</b>		<b>\$18,453.40</b>	<b>\$84,358.40</b>

**2. GOODS, SERVICES, Other**

		BUDGET NARRATIVE
a. Office Equipment/Supplies		
b. Postage		
c. Copying/Printing		
d. Lease /Space Rental		
e. Utilities		
f. SNAP Program Marketing		
g. Training		
h. Accounting/Audit Services		
i. Support Svcs (Childcare/Transportation)		
j. Tuition/Fees		
k. Books		
l. Maintenance/Repairs		
m. SNAP Related Travel		
n. Other (Explain in budget narrative)	\$4,514.00	Uniforms for 8 men - \$4,514
<b>TOTAL</b>		<b>\$4,514.00</b>

**3. INDIRECT COSTS (Please indicate the indirect cost rate and the methodology used to determine indirect costs)**

Indirect Costs	\$8,887.24	
<b>TOTAL</b>		<b>\$8,887.24</b>

De minimus rate of 10% applied to the following costs: all

**4. PROGRAM COSTS SUMMARY**

Budget Category	Total Program Costs
a. Personnel (Salary & Fringe)	\$84,358.40
b. Goods, Services, Other	\$4,514.00
c. Indirect Costs	\$8,887.24

**TOTAL BUDGET \$97,759.64**

**\*Submit Local Match Certification Form to identify the source and amount of non-Federal funds available to operate the program**

**SNAP2WORK - Third Party Reimbursement Program**  
**Local Agency Budget Estimate**

**Local Agency Name:** Project Host

**Operational Period:** October 1, 2014 - September 30, 2015

**1. SALARY COSTS (Employees directly involved in SNAP E&T activities or administrative support)**

Position Title	Name	% FTE	Salary	E&T Salary	Fringe % Rate	E&T Fringe Amount	Total E&T Cost
Program Director 75% of annual salary \$36,800 x 50% SNAP participants	Allen Hellenga	1	\$13,800.00	\$13,800.00	26.00%	\$3,588.00	\$17,388.00
Chef Instructor 75 of annual salary \$34,500 x 50% SNAP participants	Tobin Simpson	1	\$19,406.00	\$19,406.00	26.00%	\$5,045.56	\$24,451.56
Case Manager 75% of annual salary \$28,750 x 50% SNAP participants	Nicole Zeiset	1	\$16,172.00	\$16,172.00	26.00%	\$4,204.72	\$20,376.72
ED/ Bookkeeper 33% of annual salary \$64,400 x 50% SNAP participants	Sally Green	1	\$15,939.00	\$15,939.00	26.00%	\$4,144.14	\$20,083.14
				\$0.00		\$0.00	\$0.00
				\$0.00		\$0.00	\$0.00
				\$0.00		\$0.00	\$0.00

**TOTAL** **\$65,317.00** **\$65,317.00** **\$16,982.42** **\$82,299.42**

**2. GOODS, SERVICES, Other**

			BUDGET NARRATIVE	
a. Office Equipment/Supplies				
b. Postage				
c. Copying/Printing				
d. Lease /Space Rental				
e. Utilities				
f. SNAP Program Marketing		\$1,000.00		
g. Training				
h. Accounting/Audit Services				
i. Support Svcs (Childcare/Transportation)				
j. Tuition/Fees				
k. Books		\$2,020.00		
l. Maintenance/Repairs				
m. SNAP Related Travel		\$0.00		
n. Other (Explain in budget narrative)		\$200.00		

drug tests

**TOTAL** **\$3,220.00**

**3. INDIRECT COSTS (Please indicate the indirect cost rate and the methodology used to determine indirect costs)**

Indirect Costs	\$8,551.94	De minimus approved indirect cost rate of 10% applied to all costs
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**TOTAL** **\$8,551.94**

**4. PROGRAM COSTS SUMMARY**

Budget Category	Total Program Costs
a. Personnel (Salary & Fringe)	\$82,299.42
b. Goods, Services, Other	\$3,220.00
c. Indirect Costs	\$8,551.94

**TOTAL BUDGET** **\$94,071.36**

**\*Submit Local Match Certification Form to identify the source and amount of non-Federal funds available to operate the program**

**SNAP2WORK - Third Party Reimbursement Program  
Local Agency Budget Estimate**

**Local Agency Name:** Sunbelt Human Advancement Resources, Inc.

**Operational Period:** October 1, 2014 - September 30, 2015

1. SALARY COSTS (Employees directly involved in SNAP E&T activities or administrative support)							
Position Title	Name	% FTE	Salary	E&T Salary	Fringe % Rate	E&T Fringe Amount	Total E&T Cost
				\$0.00		\$0.00	\$0.00
				\$0.00		\$0.00	\$0.00
				\$0.00		\$0.00	\$0.00
				\$0.00		\$0.00	\$0.00
				\$0.00		\$0.00	\$0.00
				\$0.00		\$0.00	\$0.00
				\$0.00		\$0.00	\$0.00
				\$0.00		\$0.00	\$0.00
				\$0.00		\$0.00	\$0.00
<b>TOTAL</b>			<b>\$0.00</b>	<b>\$0.00</b>		<b>\$0.00</b>	<b>\$0.00</b>

2. GOODS, SERVICES, Other			BUDGET NARRATIVE	
a. Office Equipment/Supplies			Uniforms, immunizations, physicals, drug screens, and SLED background checks for 26 CNA's, 9 Phlebotomists, 11 Unit Secretaries, and 9 Truck Drivers.	
b. Postage				
c. Copying/Printing				
d. Lease /Space Rental				
e. Utilities				
f. SNAP Program Marketing				
g. Training				
h. Accounting/Audit Services				
i. Support Svcs (Childcare/Transportation)		\$2,500.00		
j. Tuition/Fees		\$52,384.00		
k. Books		\$4,560.00		
l. Maintenance/Repairs				
m. SNAP Related Travel				
n. Other (Explain in budget narrative)		\$16,876.00		
<b>TOTAL</b>		<b>\$76,320.00</b>		

3. INDIRECT COSTS (Please indicate the indirect cost rate and the methodology used to determine indirect costs)	
Indirect Costs	Has an approved Federal Indirect Cost Rate that is based on Salaries only.
<b>TOTAL</b>	<b>\$0.00</b>

4. PROGRAM COSTS SUMMARY	
Budget Category	Total Program Costs
a. Personnel (Salary & Fringe)	\$0.00
b. Goods, Services, Other	\$76,320.00
c. Indirect Costs	\$0.00

**TOTAL BUDGET \$76,320.00**

\*Submit Local Match Certification Form to identify the source and amount of non-Federal funds available to operate the program

**SNAP2WORK - Third Party Reimbursement Program**  
**Local Agency Budget Estimate**

**Local Agency Name:** United Ministries Adult Education

**Operational Period:** October 1, 2014 - September 30, 2015

<b>1. SALARY COSTS (Employees directly involved in SNAP E&amp;T activities or administrative support)</b>							
Position Title	Name	% FTE	Salary	E&T Salary	Fringe % Rate	E&T Fringe Amount	Total E&T Cost
Director of Programs	Ethan Friddle	0.35	\$33,346.22	\$11,671.18	22.61%	\$2,638.85	\$14,310.03
AE Counselor	Janey House	1	\$19,462.05	\$19,462.05	30.99%	\$6,031.29	\$25,493.34
AE Counselor	Kenneth Christy	1	\$18,526.81	\$18,526.81	31.99%	\$5,926.73	\$24,453.53
AE Counselor	Benjamin Sullivan	1	\$18,195.62	\$18,195.62	32.41%	\$5,897.20	\$24,092.82
AE Counselor	Mary Allen Murphy	1	\$3,890.90	\$3,890.90	10.24%	\$398.43	\$4,289.33
AE Counselor	Matt Kaplan	1	\$3,931.20	\$3,931.20	10.24%	\$402.55	\$4,333.75
Accounting Assistant	Brian Sutherland	0.025	\$19,768.16	\$494.20	30.70%	\$151.72	\$645.92
				\$0.00		\$0.00	\$0.00
				\$0.00		\$0.00	\$0.00
				\$0.00		\$0.00	\$0.00
<b>TOTAL</b>			<b>\$117,120.97</b>	<b>\$76,171.96</b>		<b>\$21,446.77</b>	<b>\$97,618.73</b>

<b>2. GOODS, SERVICES, Other</b>		<b>BUDGET NARRATIVE</b>
a. Office Equipment/Supplies	_____	
b. Postage	_____	
c. Copying/Printing	_____	
d. Lease /Space Rental	_____	
e. Utilities	_____	
f. SNAP Program Marketing	\$1,500.00	
g. Training	_____	
h. Accounting/Audit Services	_____	
i. Support Svcs (Childcare/Transportation)	_____	
j. Tuition/Fees	\$5,000.00	
k. Books	_____	
l. Maintenance/Repairs	_____	
m. SNAP Related Travel	_____	
n. Other (Explain in budget narrative)	_____	
<b>TOTAL</b>	<b>\$6,500.00</b>	

<b>3. INDIRECT COSTS (Please indicate the indirect cost rate and the methodology used to determine indirect costs)</b>		
Indirect Costs	\$40,316.54	Indirect Cost Rate of 41.3% using Salaries & Wages + Fringe as Base.
<b>TOTAL</b>	<b>\$40,316.54</b>	

<b>4. PROGRAM COSTS SUMMARY</b>	
<b>Budget Category</b>	<b>Total Program Costs</b>
a. Personnel (Salary & Fringe)	\$97,618.73
b. Goods, Services, Other	\$6,500.00
c. Indirect Costs	\$40,316.54

**TOTAL BUDGET                      \$144,435.27**

**\*Submit Local Match Certification Form to identify the source and amount of non-Federal funds available to operate the program**



**SNAP2WORK - Third Party Reimbursement Program**  
**Local Agency Budget Estimate**

**Local Agency Name:** United Ministries Employment Readiness

**Operational Period:** October 1, 2014 - September 30, 2015

1. SALARY COSTS (Employees directly involved in SNAP E&T activities or administrative support)							
Position Title	Name	% FTE	Salary	E&T Salary	Fringe % Rate	E&T Fringe Amount	Total E&T Cost
Director of Programs	Ethan Friddle	0.35	\$33,346.22	\$11,671.18	22.61%	\$2,638.85	\$14,310.03
ER Team Leader	Amanda Warren	1	\$24,599.99	\$24,599.99	11.16%	\$2,745.36	\$27,345.35
ER Counselor	Richard Angle	1	\$20,449.82	\$20,449.82	30.06%	\$6,147.22	\$26,597.03
ER Counselor	Katherine Preuss	1	\$21,125.99	\$21,125.99	29.45%	\$6,221.60	\$27,347.59
ER Counselor	Margaret Murphy	1	\$19,343.84	\$19,343.84	11.15%	\$2,156.84	\$21,500.68
Accounting Assistant	Brian Sutherland	0.025	\$19,768.16	\$494.20	30.70%	\$151.72	\$645.92
				\$0.00		\$0.00	\$0.00
				\$0.00		\$0.00	\$0.00
				\$0.00		\$0.00	\$0.00
				\$0.00		\$0.00	\$0.00

**TOTAL**                      **\$138,634.03**    **\$97,685.03**                      **\$20,061.59**    **\$117,746.62**

2. GOODS, SERVICES, Other			BUDGET NARRATIVE
a. Office Equipment/Supplies	_____		Uniforms - \$1,800; Work Clothes - \$2,246.40; Blood Pressure Kits - \$475; Watches - \$250; Background checks - \$1,290
b. Postage	_____		
c. Copying/Printing	_____		
d. Lease /Space Rental	_____		
e. Utilities	_____		
f. SNAP Program Marketing	_____	\$1,500.00	
g. Training	_____		
h. Accounting/Audit Services	_____		
i. Support Svcs (Childcare/Transportation)	_____		
j. Tuition/Fees	_____	\$17,750.00	
k. Books	_____	\$1,158.00	
l. Maintenance/Repairs	_____		
m. SNAP Related Travel	_____		
n. Other (Explain in budget narrative)	_____	\$6,061.40	

**TOTAL**                      **\$26,469.40**

3. INDIRECT COSTS (Please indicate the indirect cost rate and the methodology used to determine indirect costs)		
Indirect Costs	_____	\$48,629.35
Indirect Cost Rate of 41.3% using Salaries & Wages + Fringe as Base.		

**TOTAL**                      **\$48,629.35**

4. PROGRAM COSTS SUMMARY	
<b>Budget Category</b>	<b>Total Program Costs</b>
a. Personnel (Salary & Fringe)	_____
b. Goods, Services, Other	_____
c. Indirect Costs	_____

**TOTAL BUDGET**                      **\$192,845.37**

**\*Submit Local Match Certification Form to identify the source and amount of non-Federal funds available to operate the program**

**SNAP2WORK - Third Party Reimbursement Program  
Local Agency Budget Estimate**

**Local Agency Name:** GRWC / United Way

**Operational Period:** October 1, 2014 - September 30, 2015

<b>1. SALARY COSTS (Employees directly involved in SNAP E&amp;T activities or administrative support)</b>							
<b>Position Title</b>	<b>Name</b>	<b>% FTE</b>	<b>Salary</b>	<b>E&amp;T Salary</b>	<b>Fringe % Rate</b>	<b>E&amp;T Fringe Amount</b>	<b>Total E&amp;T Cost</b>
Case Manager 50% of time (33,103 x 50% = \$16,551.50) x 50% SNAP participants = \$8,275.75	Goodwill	100%	\$8,275.75	\$8,275.75	30.00%	\$2,482.73	\$10,758.48
Case Manager 100% of time x 50% SNAP participants = \$14,942.00	SHARE	100%	\$14,942.00	\$14,942.00	30.00%	\$4,482.60	\$19,424.60
WorkKeys Coordinator 100% of time x 50% SNAP participants = \$16,654.00	United Ministries	100%	\$16,654.00	\$16,654.00	30.00%	\$1,332.00	\$17,986.00
				\$0.00		\$0.00	\$0.00
				\$0.00		\$0.00	\$0.00
				\$0.00		\$0.00	\$0.00
				\$0.00		\$0.00	\$0.00

**TOTAL** **\$39,871.75** **\$39,871.75** **\$8,297.33** **\$48,169.08**

<b>2. GOODS, SERVICES, Other</b>		<b>BUDGET NARRATIVE</b>
a. Office Equipment/Supplies	\$0.00	
b. Postage	\$0.00	
c. Copying/Printing	\$0.00	
d. Lease /Space Rental	\$0.00	
e. Utilities	\$0.00	
f. SNAP Program Marketing	\$0.00	
g. Training	\$0.00	
h. Accounting/Audit Services	\$0.00	
i. Support Svcs (Childcare/Transportation)	\$0.00	
j. Tuition/Fees	\$45,000.00	
k. Books	\$0.00	
l. Maintenance/Repairs	\$0.00	
m. SNAP Related Travel	\$0.00	
n. Other (Explain in budget narrative)	\$0.00	

**TOTAL** **\$45,000.00**

<b>3. INDIRECT COSTS (Please indicate the indirect cost rate and the methodology used to determine indirect costs)</b>		
Indirect Costs	\$16,136.64	Federally approved indirect cost rate of 33.5% applied to the following costs: salary and fringe

**TOTAL** **\$16,136.64**

<b>4. PROGRAM COSTS SUMMARY</b>	
<b>Budget Category</b>	<b>Total Program Costs</b>
a. Personnel (Salary & Fringe)	\$48,169.08
b. Goods, Services, Other	\$45,000.00
c. Indirect Costs	\$16,136.64

**TOTAL BUDGET** **\$109,305.72**

**\*Submit Local Match Certification Form to identify the source and amount of non-Federal funds available to operate the program**

**TOTAL****4. TOTAL PROGRAM COSTS SUMMARY**

Budget Category	Total Program Costs
a. Personnel (Salary & Fringe)	<u>\$438,775.24</u>
b. Goods, Services, Other	<u>\$165,560.40</u>
c. Indirect Costs	<u>\$123,733.71</u>

<b>TOTAL BUDGET</b>	<b>\$728,069.35</b>
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**PROVIDER'S NAME AND ADDRESS:**

**DATE FILED:**

**CONTRACT NO.:**

FUND NO.:

COST CENTER NO.:

**PERIOD COVERED BY REPORT:****SERVICE:**

**TYPE OF PROVIDERS:**

**FROM:**

70.

[ ] **MULTIPLE**

☐ PRIVATE NON-PROFIT

**CONTRACT PERIOD:**

[ ] **SINGLE**

[ ] **PRIVATE PROFIT**

**FROM:**

**TD:**

☐ PUBLIC

## MATCH

**Social Services Block Grant (SSBG)**

### Child Welfare Services (IV-B)

IV-E

### Foster Home Care

### Medicaid (Title XIX)

## Workfare

### Child Support Services (IV-D)

## Refugee Resettlement

### **Jobs Training Partnership Act (JTPA)**

## Mondale

**Spouse Abuse Program (State)**

NET CLAIM AMOUNT

(1)

**{2}**

(3)

(4)

I do solemnly swear (or affirm) that I have examined the information contained in this request. That all information has been prepared from the books and records of the provider named within. That the aforesaid information is true and correct to the best of my knowledge and belief; and that no other request for reimbursement from other Federal and/or State funds has been made nor has any other reimbursement been received, applied for, nor will they be applied for, for the services herein described. That our Agency has on file proper client authorizations for these services claimed and the necessary documentation to support these claims. That all claims reported are within the period of authorized eligibility.

**PROVIDER'S SIGNATURE:**

**TITLE:**

DATE:

**REPORT PREPARED BY:**

**TITLE:**

**ADDRESS:**

DATE:

PROVIDER NAME:			MONTH:		REIMBURSEMENT: <input type="checkbox"/> SINGLE SERVICE <input type="checkbox"/> MULTIPLE SERVICE	
<b>SECTION D - SINGLE SERVICE PROVIDER REIMBURSEMENT</b>						
TYPE OF SERVICE PURCHASED	TOTAL ALLOWABLE COST	TOTAL UNITS OF SERVICE	UNIT COST (Col. 1 $\div$ Col. 2)	TOTAL ELIGIBLE UNITS	REIMBURSEABLE COST (Col. 3 x Col. 4)	REIMBURSEMENT FOR PERIOD (100% ELIGIBLE)
	(1)	(2)	(3)	(4)	(5)	(6)
<b>SECTION E - MULTIPLE SERVICE PROVIDER REIMBURSEMENT</b>						
TYPE OF SERVICE PURCHASED	TOTAL ALLOWABLE COST	TOTAL UNITS OF SERVICE	UNIT COST (Col. 1 $\div$ Col. 2)	TOTAL ELIGIBLE UNITS	REIMBURSEABLE COST (Col. 3 x Col. 4)	REIMBURSEMENT FOR PERIOD (100% ELIGIBLE)
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						
TOTAL						

PROVIDER NAME:

MONTH:

## SECTION F - ITEMIZED EXPENDITURES

SERVICE NAME:

CURRENT

YEAR TO DATE

A/C NO.	BUDGET LINE ITEM	1. TOTAL EXPENSES PER BOOK	2. EXPENSE ADJUSTMENTS	3. ADJUSTED TOTAL EXPENSES	4. FFP-UNALLOW. EXPENSES	5. FFP-ALLOWABLE EXPENSES	6. ANNUAL APPROVED BUDGET	7. ACTUAL EXPENSES
	PERSONNEL:							
	STATE AGENCIES:							
0102	Classified Positions							
0103	Unclassified Positions							
0104	Other Personnel							
	PRIVATE PROVIDERS:							
0105	Administrative							
0106	Professional							
0107	Food Services							
0108	Paraprofessionals							
0109	Other							
	TOTAL PERSONNEL							
	CONTRACTED SERVICES:							
0201	Freight							
0202	Travel							
0203	Telephone							
0204	Repairs							
0205	Printing, Binding & Adv.							
0206	Utilities							
0207	Other Contractual Services							
0208	Consultant Fees							
	TOTAL CONTRACTED SERVICES							



PROVIDER NAME:	MONTH:
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**SECTION F - ITEMIZED EXPENDITURES (CONTINUED)**

SERVICE NAME:		CURRENT						YEAR TO DATE
A/C NO.	BUDGET LINE ITEM	1. TOTAL EXPENSES PER BOOK	2. EXPENSE ADJUSTMENTS	3. ADJUSTED TOTAL EXPENSES	4. FFP--UNALLOW. EXPENSES	5. FFP--ALLOWABLE EXPENSES	6. ANNUAL APPROVED BUDGET	7. ACTUAL EXPENSES
	SUPPLIES :							
0301	Food							
0302	Fuel							
0304	Office							
0305	Household, Laundry & Janitorial							
0306	Medical							
0307	Educational/Recreational							
0308	Motor Vehicle							
0311	Maintenance							
0312	Postage							
0320	Other							
	TOTAL SUPPLIES							
	FIXED CHARGES:							
	Use Allowance							
0401	Rent-Real Property							
0404	Rent-Equipment							
0405	Rent-Other							
0410	Insurance							
0420	Other Fixed Charges							
	TOTAL FIXED CHARGES							
	EQUIPMENT:							
0601	Office Equipment							
0603	Household Equipment							
0607	Educational/Rec. Equip.							
0620	Other Equipment							
	TOTAL EQUIPMENT							

PROVIDER NAME:	MONTH:
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**SECTION F - ITEMIZED EXPENDITURES (CONTINUED)**

SERVICE NAME:		CURRENT						YEAR TO DATE
A/C NO.	BUDGET LINE ITEM	1. TOTAL EXPENSES PER BOOK	2. EXPENSE ADJUSTMENTS	3. ADJUSTED TOTAL EXPENSES	4. FFP-UNALLOW. EXPENSES	5. FFP-ALLOWABLE EXPENSES	6. ANNUAL APPROVED BUDGET	7. ACTUAL EXPENSES
0800	DEPRECIATION:							
	TOTAL DEPRECIATION							
	MISCELLANEOUS:							
0901	Bank Charges							
0902	Training & Education							
0903	Memberships, Subscriptions, Etc.							
0904	Organization Expenses							
0905	Accounting & Auditing							
0906	Data Processing							
0907	Indirect Cost							
0908	Field Trips							
	TOTAL MISCELLANEOUS							
1000	UNALLOWABLE EXPENSES:							
	TOTAL UNALLOWABLE EXPENSES							
	EMPLOYER CONTRIBUTIONS:							
1301	Retirement							
1304	FICA							
1305	Workmen's Compensation							
1306	Health Insurance							
1307	Unemployment							
	TOTAL EMPLOYER CONTRIBUT.							
	TOTALS							

PROVIDER NAME:

MONTH:

**SECTION G - EXPENSE ADJUSTMENT SCHEDULE**

BUDGET LINE ITEM	AMOUNT	EXPLANATION			REMARKS:								
						REMARKS:							
							REMARKS:						
								REMARKS:					
									REMARKS:				
										REMARKS:			
											REMARKS:		
												REMARKS:	
													REMARKS:
					REMARKS:								
TOTALS						REMARKS:							
(1)	(2)	(3)					REMARKS:						

  

<b>SECTION H - SCHEDULE OF EXPENSES UNALLOWABLE FOR FEDERAL FINANCIAL PARTICIPATION</b>				
BUDGET LINE ITEM	TOTAL EXPENSES UNALLOWABLE FOR FFP	AMOUNT TO BE PAID BY OTHER STATE AND/OR FEDERAL SOURCE	NAME OF SOURCE	REMAINING UNALLOWABLE EXPENSES
TOTALS				
(1)	(2)	(3)	(4)	(5)

PROVIDER NAME:

MONTH:

**SECTION I - EQUIPMENT REPORT**

EQUIPMENT DESCRIPTION AND LOCATION	SERIAL NUMBER	MAKE	MODEL	DATE OF PURCHASE	COST	PURCHASED FROM
Description:						
Location:						
Description:						
Location:						
Description:						
Location:						
Description:						
Location:						