


# Public Health Department

## Request for Change to the Current Year Budget

*J*  
2/14/07

**Index Name:** Special Needs **Index No.:** 402135

**Program Manager or Coordinator:** Michael Ungeheuer

**Request Approved By:**  **Date:** 2/14/07  
(Signature)

*Note:* Approval must be obtained from the "Individual with Delegated Authority" designated (by index) on the Department's Delegated Purchasing Authority Matrix.

### REQUESTED EXPENDITURE CHANGE:

Subsubject No.	Subsubject Name and Reason for Change *	Amount of Change
3000	Permenant Employees	\$27,500
3001	Temporary Employees	\$985
3005	Tahoe Differential	\$1,455
3006	Bilingual	\$1,706
3020	Retirement	\$3,087
3022	Medicare	\$497
3040	Hlth Insurance	\$9,543
3041	Unemployment Insurance	(\$261)
4040	Telephone Company	\$231
4041	County Pass Thru	(\$162)
4201	Medical Supplies - Field	\$795
4264	Books	\$150
4324	Medical, Dental, Lab Svcs	\$250
4529	Software License	(\$194)
4602	Mileage	\$951
4605	Vehicle Rents	\$449
4620	Utilities	\$149
5301	Tele Equip	(\$149)
7250	Intrafund Transfers	\$4,488
<b>Subtotal Expenditure Adjustment:</b>		\$51,470

### REQUESTED REVENUE CHANGE:

Subsubject No.	Subsubject Name and Reason for Change *	Amount of Change
1940	Misc Revenue	\$51,470
<b>Subtotal Revenue Adjustment:</b>		\$51,470

**INCREASE OR (DECREASE) TO NET COST:** \$0

QUARTERLY BUDGET FORM



Grantee Name: El Dorado County Public Health Department						
Project Name: First Five-Special Needs Project						
Contract Number: 010-500-0306-301-1						
Contact Name & Title: Michael Ungeheuer, Division Mgr						
Reporting Period (circle one):                      Q1                      X Q2                      Q3                      Q4						
Budget Item	Total Approved Budget Amount [B]	Expenditures Year To Date [C]	Encumbered [D]	Total Expenditures [C+D=E]	Unexpended Balance [B-E=F]	% Expended [E/B=G]
<b>Personnel:</b>						
1)12 month .5 FTE Tahoe Bilingual CHA	\$31,180.00	\$20,847.00		\$20,847.00	\$10,333.00	67%
2)12 month 1.FTE WS Bilingual CHA	\$33,968.00	\$15,490.00		\$15,490.00	\$18,478.00	46%
3)12 month .5 FTE Tahoe Bilingual PHN II	\$33,138.00	\$6,297.00		\$6,297.00	\$26,841.00	19%
4)12-month 1.0 FTE WS PHN II	\$61,434.00	\$28,736.00		\$28,736.00	\$32,698.00	47%
5) 6-month 1.0 FTE WS Bilingual CHA	\$16,570.00	\$0.00		\$0.00	\$16,570.00	0%
6) 6-month .2 WS Bilingual Sr. OA	\$3,050.00	\$0.00		\$0.00	\$3,050.00	0%
Benefits @ 34%	\$59,008.00	\$24,213.00		\$24,213.00	\$34,795.00	41%
<b>Subtotal Personnel:</b>	<b>\$238,348.00</b>	\$95,583.00	\$0.00	\$95,583.00	\$142,765.00	40%
<b>Operating Expenses:</b>						
5) Rent and Utilities	\$1,062.00	\$505.00		\$505.00	\$557.00	
6) Office Supplies/Materials	\$2,366.00	\$37.00		\$37.00	\$2,329.00	2%
7)Telephone	\$2,170.00	\$240.00		\$240.00	\$1,930.00	11%
8) Postage/Mailing	\$1,116.00	\$108.00		\$108.00	\$1,008.00	10%
9) Reproduction/Copying	\$800.00			\$0.00	\$800.00	0%
10) Equipment Lease	\$150.00					
11) Travel & Mileage	\$7,800.00	\$1,715.00		\$1,715.00	\$6,085.00	22%
12) Training/Conferences	\$1,800.00			\$0.00	\$1,800.00	0%
13) Medical Supplies/Services	\$1,050.00	\$285.00				
14) PC Support	\$4,531.00	\$2,552.00		\$2,552.00	\$1,979.00	56%
15) Insurance	\$1,997.00	\$999.00		\$999.00	\$998.00	50%
<b>Subtotal Operating:</b>	<b>\$24,842.00</b>	\$6,441.00	\$0.00	\$6,156.00	\$18,686.00	25%
<b>Indirect Expenses:</b>						
Indirect Cost (9.9% max)	\$23,685.00	\$9,558.00		\$9,558.00	\$14,127.00	40%
<b>TOTAL COSTS</b>	<b>\$286,875.00</b>	\$111,582.00	\$0.00	\$111,297.00	\$175,578.00	39%

Michael Ungeheuer, Division Mgr

Print Name of Program Contact Person or Authorized Representative

2/5/2007

Signature: Program Contact Person or Authorized Representative

DATE

For Commission Use Only - Do Not Fill In Shaded Area

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SUMMARY: INDEX CODE OR ORGANIZATION: 7:36 AM

ACTIVE

BALANCE (Y,M,Q, Y) C / P PERIOD : CURRENCY CODE :

FISCAL MO/YEAR 08 2007 FEB 2007

INDEX CODE : 402135 SPECIAL NEED PROJECT/FIRST FIVE

ORGANIZATION :

CHAR / OBJECT :

FDT FUN SBFD :

PROJE PROJ DT :

GRANT GRANT L :T

USER CODE :

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S	SUBO DESCRIPTION	BUDGET	ACTUAL	ENCUMBERED	BALANCE
1940	MISC: REVENUE	235,405	62,189		-173,216
	REVENUE TOTAL	235,405	62,189		-173,216
3000	PERMANENT EM	146,407	87,032		59,375
3001	TEMPORARY EM	≡	985		-985
3005	TAHOE DIFFERENTIAL	1,200	1,507		-307
3006	BILINGUAL PAY	3,120	2,226		894
3020	RETIREMENT	29,060	16,022		13,038

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SUMMARY: INDEX CODE OR ORGANIZATION 8:25 AM

ACTIVE

BALANCE (Y,M,Q, Y C / P PERIOD : CURRENCY CODE :

FISCAL MO/YEAR 08 2007 FEB 2007

INDEX CODE : 402135 SPCECIAL NEED PROJECT/FIRST FIVE

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S	SUBO DESCRIPTION	BUDGET	ACTUAL	ENCUMBERED	BALANCE
3022	MEDI CARE	2,186	1,312		874
3040	HEALTH INSURANCE	3,006	3,891		-885
3041	UNEMPLOYMENT	1,101	477		624
3042	LONG TERM DIS/	799	599		200
3046	RETIREE HEALTH	4,879	3,659		1,220
3060	WORKERS' COMI	2,713	2,035		678
4040	TELEPHONE COM		113		-113

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S	SUBO DESCRIPTION	BUDGET	ACTUAL	ENCUMBERED	BALANCE
4041	COUNTY PASS T	370	15		355
4100	INSURANCE: PRE	1,997	1,498		499
4260	OFFICE EXPENSI	1,000	141		859
4261	POSTAGE	400			400
4324	MEDICAL, DENTA		25		-25
4421	RENT & LEASE: S	150	114		36
4503	STAFF DEVELOP	1,800			1,800

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ACTIVE

BALANCE (Y,M,Q, Y

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S	SUBO DESCRIPTION	BUDGET	ACTUAL	ENCUMBERED	BALANCE
4529	SOFTWARE LICE	480	286		194
4600	TRANSPORTATIC	3,400	30		3,370
4602	MILEAGE: EMPLC	3,400	2,371		1,029
4605	RENT & LEASE: \		187		-187
4620	UTILITIES	913	514		399
5301	INTERFND: TELE	1,800	219		1,581
5304	INTERFND: MAIL	216	144		72

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F5-NEXT

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S	SUBO DESCRIPTION	BUDGET	ACTUAL	ENCUMBERED	BALANCE
5305	INTERFND: STOF	190	127		63
5306	INTERFND: CENT	800			800
5308	INTERFND: MAIN	1,707	854		854
5320	INTERFND: NETV	2,824	1,412		1,412
7235	INTRAFND: PRIV	196	98		98
7254	INTRAFND: PUBL	19,291			19,291
	EXPENDITURE T	235,405	127,891		107,514

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