Children's Serv	ices Council-Budget Detail	Name of Agency:	Children's Harbor	Inc.	EXH	B	IT A
		Contract Number:	15-4312				
Program:	Family Strengthening	Contract Period:	10/1/15 - 9/30/16				
	BUDGET CATEGORY/LINE ITEM	ROUND TO NEAREST			ount Charged	Ro	Charged to
	Dr	ogram Costs			to Contract	-	Contract
	· · · · · · · · · · · · · · · · · · ·	ogram Costs					
	a) <u>Staff Salaries</u> : List each position position title used in the contract percentage of time to be devoted to work associated with the proposed p for similar work within the applicant benefits. Only include positions that that involve youth employment, s be listed here; those should be in units) or 8050 (Cost Reimburseme	Scope section. Show the annua the program. Rates of pay for en program to be funded must be con organization. Include formulas us t are direct costs to the program. salaries and fringe benefits for t cluded under budget section 13	al salary rate and the nployees performing nsistent with that paid ed to calculate fringe Note: For programs the youth should not				
# Of Staffing Positions	Position Name	Method of Calc	ulation				
1FTE - Master 2FTE 3 FTE 1 FTE	Family Strengthening Supervisor - \$ Family Strengthening Counselor - \$ Family Strengthening Counselor - \$ Family Admin Assistant - \$26,000 x	35,000 x 100% x 2 counselors 38,500 x 100% x 3 counselors		\$ \$ \$ \$ \$ \$	44,700.00 70,000.00 115,500.00 26,000.00	Contract 0 \$ 44,700.0 0 \$ 70,000.0 0 \$ 70,000.0 0 \$ 115,500.0 0 \$ 26,000.0 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	44,700.00 70,000.00 115,500.00 26,000.00 - - -
	Total Staff S:	alaries (rounded to whole dollars)		¢	256,200.00	¢	256 200 00
# Of Staffing Positions	b) <u>Staff Benefits:</u> FICA is automato calculate all other fringe benefit unemployment etc. Be sure to ide (Do not list each employee separate Position Name	its such as retirement, insurand ntify which positions the various o	e, workers comp, alculations refer to.				
FICA		Required at 7	.65%	\$	19,599.00	F	- 19.599.00
Other Benefits	Long Term Disability - Admin Asst : Long Term Disability - Counselors : Long Term Disability - Counselors : Long Term Disability - FS Superviso Suta (State Unemployment) - 1st \$7 Workers Comp - \$256,200 x 1% Vision insurance - \$6.49 x 12mths x Dental insurance - \$13.98 x12mthsx Life/ADD Insurance - FS Supervisor Life/ADD Insurance - Counselors : \$ Life/ADD Insurance - Counselors : \$ Life/ADD Insurance - Admin Asst : \$ Health Insurance - \$718 x12mthsx 7	\$23.34 x12 months x 2 employed \$25.67 x12 months x 3 employed r : \$29.80 x12 months x 1 employ 7,000 @ 4.17% x 7 employees 7 employees : \$8.05/mo x 12 months x 1 employ 6.30/mo x 12 months x 2 employed 6.93/mo x 12 months x 3 employed 4.68 /mo x 12 months x 1 employed	ee oyee ees ees	************	207.96 560.16 924.12 357.60 2,043.30 2,562.00 545.16 1,174.32 96.60 151.20 249.48 56.16 60,312.00	********	208.00 560.00 924.00 358.00 2,043.00 2,562.00 545.00 1,174.00 97.00 151.00 249.00 56.00 60,312.00 - - - - - - - - - - - - - - - - - -

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Children's S	ervices Council-Budget Detail	Name of Agency:	Children's Harbor	Inc.			
		Contract Number:	15-4312	•			
Program:	Family Strengthening	Contract Period:	10/1/15 - 9/30/16			-	
	BUDGET CATEGORY/LINE ITEM	ROUND TO NEAREST ONLY (NO C			iount Charged	Ro	unded Amoun Charged to Contract
						\$	1.0
						s s	
						s	
						\$	5 a 2
						\$	•
						\$ \$	
						\$	-
						\$	
	Total Staff Be	nefits (rounded to whole dollars		\$	88,839.00	\$ \$	88,838.00
		Staff Benefits Percent		Ψ	34.7%		34.7%
1000	Staff Training: Show any costs bud calculations. Note the positions or cl associated with attendance at trainin registration costs, air travel, hotel, et	geted for staff training. Include assifications to be trained and in g, conferences or seminars. Inc c., as applicable.	detail and method for clude any costs lude projected		04,170		
	Description	Method of Calc	ulation			ŀ	
	(Examples: registration, air fare	e, car rental, hotel, personnel veh	icle mileage, etc.)	\$	-	\$	-
	5 counselors - \$60/year x 5 counselo	ors (CSC Trainings)		\$	300.00	\$ \$	300.00
	1 Supervisor - \$660/year x 1 supervi		ıs, Star12)	\$ \$	660.00		660.00
	Total Staff Trainir	ng (1000) (rounded to whole dol	are)	\$	960.00	\$	960.00
1100 Not L				Ψ	300,00		300.00
1200	Local or Out of Town Staff Travel: monthly mileage estimates and total	budgeted reimbursement.	-				
	(Examples: local miles, non-loc	Method of Calc cal miles, tolls, parking, miscellar				\$ \$	-
	Local Mileage Reimbursement Tolls and Parking	5 FTE x 650miles x 1 \$20 per month x 1		\$ \$	17,550.00 240.00	\$	17,550.00 240.00 -
	Total Local or Out of Town	Staff Travel (1200) (rounded to	whole dollars)	\$	17,790.00	\$	17,790.00
1300	Contractual Services/Consultants: service, list the position title, the nam work products and method of paymen etc., and justification of need for the of Administrative Costs (8900).	For each contractual staff, cons e if known, the services to be pr nt, e.g., hourly rates, daily rates,	sultant, or contracted ovided, rates of pay, price per deliverable,				
	Name/Title of Contracted Consultant/Service	Service to be Provided / Method of Calculation					
		ant, other professional fees, othe	r, etc.)			\$ \$ \$ \$ \$ \$ \$	-
	Total Contractual Services/	Consultants (1300) (rounded to	whole dollars)	\$	•	\$	
1400	Space and Utilities: Show monthly (based on square footage). If lease i	and annual cost projections for s s full-service, indicate as such.	pace and utilities				
		Method of Calc icity, maintenance/janitorial servi				\$ \$	-

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	ar a Ociv	ices Council-Budget Detail	Name of Agency:	Children's Harbor				
_			Contract Number:	15-4312	•			
rogram	:	Family Strengthening	Contract Period:	<u> 10/1/15 - 9/30/16</u>				
			ROUND TO NEAREST	NHOLE DOLLAR			Rou	nded Amour
		BUDGET CATEGORY/LINE ITEM	ONLY (NO C	ENTS)		ount Charged		harged to
	-	Utilities - Water - \$166.67/mth x 12 m	othe		1 \$	o Contract 2,000.00	\$	Contract 2,000.00
		Utilities - Electricity - \$200/mth x 12 m			\$	2,400.00	\$	2,400.0
		······			Ť	-0.000	\$	-,
							\$	-
		Space and Utilitie	(1400) (munded to whole della		\$	4 400 00	\$	4 400 0
500 N	Not Use		es (1400) (rounded to whole dolla	<u>115)</u>	Þ	4,400.00	2	4,400.0
10001	101 030	Expenses/Supplies: Itemize expenses	dable items and show how the	mounts were			<u> </u>	
		calculated. Expenses include but are						
		printing and postage, training materia						
1600		costing less than \$1,000 such as boo						
		any materials that are expendable or						
		Equipment/furniture costing less than		rt-up (8093) during				
	Link (on	the initial year of program operation o	nly					
Qty	Unit (ea etc.)	Line Item	Method of Calci	lation				
					\$	-	\$	-
		Postage & Deliveries	\$4,900 annual - @ 15%		\$	735.00	\$	735.0
		Coll shares	5 Counselors + 1 Sup x					
		Cell phones Land lines	\$50/employee x 12 mths \$24,000 annual @ 30%		\$	3,600.00	\$	3,600.0
		Assessment Tools	\$24,000 annuar @ 30%		\$	7,200.00	\$ ¢	7,200.0
		Data Plan for Tablets	6 tablets x \$10/month x 12		\$	720.00	ŝ	720.00
					Ť		\$	-
		AAPI	180 families @ \$2.5 per year		\$	450.00	\$	450.00
		Books - NPP curriculum school age	50 families @ \$15 per year		\$	750.00	\$	750.00
		Books - NPP curriculum -			•	100.00	•	700.00
		adolescent	17 families @ \$30 per year		\$	510.00	\$	510.00
							\$	-
					\$	-	\$	-
		Printing & Stationery (Business	Supervisor and counselors (\$2	0			\$	-
		Cards)	per employee x 6)	.0	\$	168.00	\$	168.00
		Recruiting	\$6,000 annual - @ 30%		\$	1,800.00	<u> </u>	1,800.00
		Office Supplies	\$19,400 annual - @30%		\$	5,820.00	\$	5 820 0
			\$8 per employee x 7 employee	s				
		Payroll services	x 26 weeks		\$	1,456.00	\$	1,456.00
			\$8 per employee x 7 employee	S	•	50.00	•	60.0
			(Bonus week)		\$	56.00	\$ \$	56.00
		Nurturing Skills Material - Lesson Gui	des for Counselors				\$	਼
		(5 counselors x \$25 x 4 lesson guides			\$	500.00	\$	500.00
			-	İ			\$	-
							\$	-
		Equipment rental:	#8.000	3.000/	•	0.400.00	~	0 400 04
		Copier/scanner/fax machine	\$8,000 annual (று 30% து	\$	2,400.00	\$ \$	2,400.0
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Childre	n's Serv	ices Council-Budget Detail	Name of Agency:	Children's Harbor	Inc.			
			Contract Number:	15-4312				
Program:	•	Family Strengthening	Contract Period:	10/1/15 - 9/30/16				
		BUDGET CATEGORY/LINE ITEM	ROUND TO NEAREST V ONLY (NO CE			iount Charged to Contract		unded Amount Charged to Contract
							\$ \$	-
		Total Expenses	(1600) (rounded to whole dollars	3)	\$	26,165.00	\$	26,165.00
		Other Items: This section is to be	used for SYEP & STEPS Progr	ams only:			Γ	
1700		1. Youth employment and fringe bene DO NOT INCLUDE ANY OTHER EX YOUR PROGRAM SPECIALIST.						
1700		Salary: List each position by posit used in the contract Scope section						
# of Staffin	ng Positons	Position Title	Method of Calcu	lation				
							\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	- - - -
		тота	L Other Salary (1700)		\$		s	_
1700					Ť		Ē	
		Fringe: FICA is automatically calcu	ulated on all salaries.					
# of Staffin	ng Positons	Position Title	Method of Calcu	lation			\$	_
FICA		Required at 7.65%			\$	-	\$	-
							\$ \$	-
							\$	-
		тота	L Other Fringe (1700)		\$	-	\$	-
1700		Non-Salary & Fringe: Only use if di	irected by your Program Speci	alist.				
		Detail	Method of Calcu	lation		i		
							\$ \$	-
							\$	-
							\$ \$	-
1		TOTAL Othe	r Non-Salary & Fringe (1700)		\$		s	
					_	-	<u> </u>	
The Acc	count Se	Total Other (17 eries <u>80XX</u> applies to REIMBI	700) (rounded to whole dollars) URSEMENT type costs: D	DO NOT USE IF	\$	-	\$	-
COSTS	ARE CO	INSIDERED PART OF UNIT CO	DST.					
8010		Flex Funds: may be used to meet ind participation and success. This <u>emer</u> address the threat of foreclosure, evic care expenses; home repairs, food, ci cards or other services/commodities.	rgency financial assistance allow ction, or termination of utility servi dothing, back to school supplies, I	vs providers to ices, temporary child bus passes or gas				
		Services/Needs to be Met Include # of Families	Method of Calcul	lation				
-		Emergency Funds (rents, utility etc)	30 families @ \$37		\$	11,250.00	\$ \$ \$ \$	- 11,250.00 -
							\$ \$ \$	•

	ervices Council-Budget Detail	Name of Agency: Contract Number:	Children's Harbor 15-4312	Inc.			
Program:	Family Strengthening	Contract Period:	10/1/15 - 9/30/16	•			
	BUDGET CATEGORY/LINE ITEM	ROUND TO NEAREST ONLY (NO C			ount Charged o Contract		Inded Amou Charged to Contract
						\$ \$ \$	
	Total Elex Fund	is (8010) (rounded to whole dolla	ire)	\$	11,250.00	\$	11,250.0
8020	Value Added: should be used to p support the goals of the program commitment. Food/refreshments achievement incentives, such as some examples. These funds are	ay for creative program enhan and improve participant partic for group activities and partic gift certificates or tickets to ga	cements that ipation and ipation/goal	9	11,230.00	Ψ	11,230.4
	Detail Publix Gift cards - 85 families x 2 gi Publix Gift cards - 35 families x 3 gi		ulation	\$	1,700.00 1,050.00	*****	1,700.0 1,050.0
8030 Not Us		ed (8020) (rounded to whole doll	ars)	\$	2,750.00	\$	2,750.0
3040 Not Us	- ····						
8050	 Youth stipend - (cost reimbursem 2. Client transportation to and from used for the program multiplied by a insurance, gas, oil etc. DO NOT IN section 8020. Other Cost Reimbursement expen your Program Specialist. Do not i directed by CSC. 	the program. Suggested calcula standard rate to cover the costs CLUDE TRANSPORTATION FO uses may be included in this se	of maintenance, R FIELD TRIPS - use ction as directed by				
	Detail	Method of Calc	ulation				
						\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	-
		OTAL Other (8050)		\$	-	\$	-
B060 throug	h 8090 Not Used						
8091	Capital Equipment (\$1,000 or mor purchased or leased (capital lease or useful life of more than one year and item). Describe if the property or eq only). Briefly explain how the capital program. These funds are cost reimi for Capital Equipment.	nly) with Council funds (tangible I having an acquisition cost of \$1 uipment will be purchased or lea I equipment is necessary for the	property having a ,000 or more <u>per</u> sed (capital lease success of the				
	Capital Equipment (\$1,000 or mor purchased or leased (capital lease or useful life of more than one year and item). Describe if the property or eq only). Briefly explain how the capital program. These funds are cost reiming for Capital Equipment. ce Line Item Justification	nly) with Council funds (tangible I having an acquisition cost of \$1 uipment will be purchased or lea I equipment is necessary for the bursement funds. Summer prog Method of Calc	property having a ,000 or more <u>per</u> sed (capital lease success of the rams are not eligible ulation				
8091	Capital Equipment (\$1,000 or more purchased or leased (capital lease or useful life of more than one year and item). Describe if the property or equipment. Describe if the property or equipment. Striefly explain how the capital program. These funds are cost reinst for Capital Equipment. Ce Line item Justification (Examples: compute Towards Electronic Health Record S	nly) with Council funds (tangible having an acquisition cost of \$1 uppment will be purchased or lea l equipment is necessary for the bursement funds. Summer prog <u>Method of Calc</u> ers, software, furniture and fixture oftware - Formtogic Tool	property having a ,000 or more <u>per</u> sed (capital lease success of the rams are not eligible ulation	\$	1,095.00 1,095.00	\$ \$ \$	1,095.0 1,095.0
8091 <u>Qty</u> Unit Pric 1 1095	Capital Equipment (\$1,000 or more purchased or leased (capital lease or useful life of more than one year and item). Describe if the property or equipment. Describe if the property or equipment. Describe if the property or equipment. Ce Line item Line item Justification Ce Line item Towards Electronic Health Record S	nly) with Council funds (tangible having an acquisition cost of \$1 uppment will be purchased or lea l equipment is necessary for the bursement funds. Summer prog <u>Method of Calc</u> ers, software, furniture and fixture oftware - Formtogic Tool	property having a ,000 or more <u>per</u> sed (capital lease success of the rams are not eligible ulation			\$	

		ices Council-Budget Detail	Name of Agency: Contract Number:	15-4312				
Program	n:	Family Strengthening	Contract Period:	10/1/15 - 9/30/16				
		BUDGET CATEGORY/LINE ITEM	ROUND TO NEAREST	WHOLE DOLLAR		ount Charged	C	nded Amour Charged to
	2 thru 095	<u>Start-up</u> : These funds are intended in prepare and start the program. They effective date. These funds are cost during the <u>initial</u> contract year. In sub appropriate expense line such as staf	must be <u>used</u> within 90 da reimbursement funds. Note that sequent years, these costs sho	<u>vs</u> of the contract start-up is used only		o Contract		Contract
8092		a) Start-Up <u>Staff Salaries</u> : List each position title used in the contract Scop percentage of time to be devoted to the work associated with the proposed per for similar work within the applicant of benefits. Only include positions that reimbursement funds. In subsequent	be section. Show the annual same program. Rates of pay for en ogram to be funded must be con ganization. Include formulas us are start-up positions. These fu	lary rate and the nployees performing nsistent with that paid ed to calculate fringe ands are cost				
Of Staffir	ng Positions	Position Title	Method of Calc	ulation				
				;			\$ \$ \$ \$ \$	-
		Total Start-up Salar	ry (8092) (rounded to whole do	illars)	\$	-	\$	-
8092		b) Start-Up Staff Benefits: FICA is formulas used to calculate all other workers comp, unemployment etc. calculations refer to. (Do not list er that are start-up positions. These f subsequent years these costs should	r fringe benefits such as retire Be sure to identify which pos ach employee separately.) Or funds are cost reimbursement	ment, insurance, sitions the various nly include positions				
Of Staffin	g Positions	Position Title	Method of Calc	ulation				
FICA Other Bene	efits		Required at 7	′.65%	\$	-	\$ \$ \$ \$ \$ \$ \$ \$ \$	- - -
		Total Start-up Fring	e (8092) (rounded to whole do	illare)	\$		\$ \$	
8093		<u>Start-Up Expenses/Supplies:</u> Itemiz were calculated. Expenses include bu printing and postage, training material less than \$1,000 such as books, testia include Non-Capital equipment items printers, cabinets, etc.) Generally, sup consumed during the course of the pri- supplies. These funds are cost reimb	at are not limited to office suppli- s. Expenses also include exper- ng instruments, tape recorders, i with a cost of less than \$1,000 e oplies include any materials that oject. Only include supplies tha	how the amounts es, communications, ndable items costing etc. Other items each (i.e. computers, are expendable or	\$	_	\$	
Qty	Unit (ea. Etc.)	Line Item	Method of Calc	ulation				
6	\$300	Tablets @ \$300 each x 6 Towards NPP materials: (supplement	tals/DVDs, Books)		\$ \$	1,800.00 885.00	\$ \$	1,800.0 885.0
		Books - NPP curriculum school age Books - NPP curriculum -	80 families @ \$15 per year		\$	1,200.00	\$	1,200.0
		adolescent	33 families @ \$30 per year		\$	990.00	\$ \$ \$ \$ \$ \$ \$	990.0 - - - - - -

Children's S	Services Council-Budget Detail	Name of Agency:	Children's Harbor	Inc.			
_		Contract Number:	15-4312	-			
Program:	Family Strengthening	Contract Period:	10/1/15 - 9/30/16	<u> </u>		1	
	BUDGET CATEGORY/LINE ITEM	ROUND TO NEAREST ONLY (NO C			ount Charged to Contract		unded Amount Charged to Contract
	Total Start-up Sup	plies (8093) (rounded to whole d	iollars)	\$	4,875.00	s	4,875.00
8094	Start-Up Staff Training: Show any method for calculations. Note the process associated with attendance to registration costs, air travel, hotel, e start-up training costs. These funds Description	costs budgeted for staff training ositions or classifications to be training training conferences or seminars tc., as applicable. Only include to	Include detail and ained and include any Include projected raining costs that are		·		
						\$ \$ \$ \$ \$ \$ \$ \$	-
		raining (8094) (rounded to whol		\$	-	\$	-
8095	Start-up Purchased Services: For service, list the position title, the nar work products and method of payme etc., and justification of need for the Services that are start-up. These fu included in Administrative Costs (89	ne if known, the services to be pr ent, e.g., hourly rates, daily rates, contractual service(s). Only incl nds are cost reimbursement fund 00)	ovided, rates of pay, price per deliverable, ude Purchased				
	Name/Title of Contracted Consultant/Service	Service to be Provided / Method of Calculation					
		ant, other professional fees, othe	er, etc.)				
						\$ \$ \$ \$ \$ \$	
	Total Purchased Ser	rvices (8095) (rounded to whole	dollars)	\$	-	\$	-
	Total Start-up (809)	thru 8095) (rounded to whole (\$	4,875.00	\$	4,875.00
8900	Administrative Costs: Limited to 1 Costs. Administrative costs must be calculation. Examples include audit	0% of the requested amount less e itemized and defined, and MUS	s the Administrative T include method of	Ψ	4,073.00		4,070.00
	Administrative Function	Method of Calc	ulation			1	
	Audit fees and tax services Staff expenses/activities Travel and Professional Insurance Security Monitoring fees Computer repairs Facility repairs & Mtnce Up to 10% of Program Director Sala	\$16,000 annua Share of \$9K an \$12,000 annual \$50,000 annual \$3,000 annual \$7,580 annual \$34,000 annual ay & fringe	nual cost @ 10% al @18% @ 30% @30%	****	4,800.00 399.00 1,200.00 9,000.00 900.00 2,274.00 10,200.00 8,317.00	***	4,800.00 399.00 1,200.00 9,000.00 900.00 2,274.00 10,200.00 8,317.00
	Note: This does not accurately reflect request/approved amount	ct our admin cost - as this is restr	icted by the total			\$	-
_	Total Administrative F	unction (8900) (rounded to who	le dollars)	\$	37,090.00	\$	37,090.00
	Matching Contributions: Show ho or in-kind. Show how worth was det minimum of 5% of total funding requ amount indicated in the contract. Cash Match	ermined and the method of calcu	lation. Must equal a				
	Description	Method of Calc	ulation				
	City of Pampano Beach Coral Springs Community Chest			\$	1,000.00 1,000.00	\$ \$ \$ \$ \$ \$ \$ \$	_ 1,000.00 1,000.00 _ _ _

	Services Council-Budget Detail	Name of Agency: Contract Number:	Children's Harbor Inc. 15-4312				
Program:	Family Strengthening BUDGET CATEGORY/LINE ITEM	Contract Period: 10/1/15 - 9/30/16 <u>ROUND TO NEAREST WHOLE DOLLAR</u> <u>ONLY (NO CENTS)</u>				Contract	
						\$ \$	-
		latch: (rounded to whole dollars)	\$	2,000.00	\$	2,000
	In-Kind Match Description	Method of Calcu					
	Space Utilization - 2500 sqft x \$21			\$ \$ \$	52,500.00	* * * * * * * * * * * * * * * * * * * *	52,500. - - - - - - - - - - - - - - - - - -
	TOTAL In-Kind	Match: (rounded to whole dollars	s)	\$	52,500.00	\$	52,500.