

WARREN-HAMILTON COUNTIES OFFICE FOR THE AGING  
1340 STATE ROUTE ♦ LAKE GEORGE, NY 12845  
PH#(518)761-6347 ♦ FAX#(518)761-6344

**HUMAN SERVICES COMMITTEE MEETING  
OFFICE FOR THE AGING AGENDA  
August 21, 2018 9:20AM**

Committee Members: Chairman Edna Frasier, Peter McDevitt, Claudia Braymer, Craig Leggett, William Loeb, Jack Diamond, Cynthia Hyde, Brad Magowan, Matthew Sokol

- I. Committee meeting called to order by Chairman
- II. Motion to approve minutes of prior Committee meeting
- III. Action Agenda
  1. **Request:** Permission to submit '18-'19 NY Connects grant application for \$195,398.  
**Rationale:** This grant allows us to run the NY Connects program for Warren and Hamilton Counties. This grant is 100% funded.
- IV. Referral/pending items- N/A
- V. Information for Discussion/Review
  - a) Senior Picnic is scheduled for Wednesday, September 12<sup>th</sup>, from 10-1PM at the Fish Hatchery in Warrensburg. Cost is \$5/person and need to be purchased in advance at the Office for the Aging. (See attached flyer)
- VI. Privilege of the Floor to discuss any additional items to come before the Committee
- VII. Motion to adjourn

# ***RESOLUTION REQUEST FORM NO. 20***

## ***MISCELLANEOUS***

***\*Please List All Other Requests Not Covered by Previous Resolution Request Forms Here.  
Please attach any backup information available and be as detailed as possible.***

**DEPARTMENT NAME: Warren/Hamilton Counties Office for the Aging**

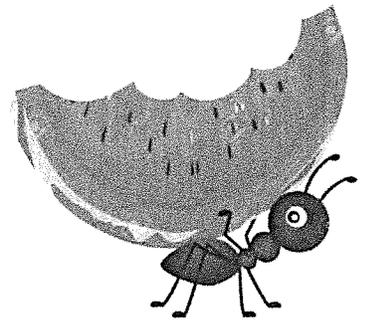
**DATE: 8/1/2018**

- (a) Purpose of Request: **Submit New York State Office for the Aging NY Connects grant application in the amount of \$195,398 for program year 4/1/18-3/31/19. Grant application not released by NYSOFA until 7/11/2018.**
- (b) Details: **We use NY Connects funding to operate the NY Connects program in both Warren and Hamilton counties. These monies are used to offset the salary & fringe costs of employees, supplies, etc.. This program is 100% funded by this grant.**
- (c) Previous Resolution Number:
- (d) Where are the Funds (if required)? List Budget Code, Object Code, Full Title\* and Amount:

**Sample: A.8021 470 Planning & Community Development – Contract**

\* as listed in budget and LOGOS

# WARREN/HAMILTON SENIOR PICNIC 2018



WHEN: Wednesday, September 12th

TIME: 10AM, Coffee & Donuts  
12PM Lunch

WHERE: Warren County Fish Hatchery  
145 Echo Lake Road  
Warrensburg, NY 12885

COST: \$5, Tickets may be purchased at the  
Office for the Aging or one of the meal  
site locations. Please make sure to get  
your receipt for entry and the door prize.



RSVP: By August 31st

MENU: Coffee, Tea, Donuts  
Cold Refreshments  
Hot Dogs & Hamburgers  
Coleslaw, Macaroni Salad  
Watermelon  
Strawberry Short Cake

## HIGHLIGHTS:

Blood Pressure Clinic  
Information Booths  
Door Prize  
Games & Prizes  
Entertainment



PH#(518)761-6347



**NY Connects Expansion and Enhancement 2018-2019**  
**SUMMARY BUDGETS**  
**18-PI-14**

AAA: Warren/Hamilton Counties Allocation Amount  
\$195,398.00

Program Period: April 1, 2018 - March 31, 2019

<b>Budget Category</b>		<b>Budget Amount</b>
1	Personnel	\$86,654.00
2	Fringe Benefits	\$45,060.00
3	Equipment	
4	Travel	\$818.00
5	Maintenance and Operations	\$2,649.00
6	Other Expenses	\$2,600.00
7	Contracts and/or Consultants	\$57,617.00
8	<b>Total Budget (Sum of Lines 1-7)</b>	\$195,398.00
9	<b>State Funds Requested</b>	\$195,398.00
10	<b>Local Funds</b>	

Notes The Total Budget amount (Line 8) must equal the Total Budget amount (Line 8) on the last page.

Area Agencies may include additional Local Funding in the budget above, however additional funds are not required.

**NY Connects Expansion and Enhancement 2018-2019  
Supporting Budget Schedules**

AAA: Warren/Hamilton Counties

1. Personnel - AAA salaries are listed here.( DSS and other <i>county</i> partners' salaries are listed in the contract section, as applicable.)							
	Complete for Each Position (N)ame, (T)itle, (L)ocation	Annual Salary or Hourly Rate*	Hours worked on program per week	Total Hours worked per week	Chargeable to Program		Narrative justification: For each position, provide a brief summary of duties related to each program.
					% of Time	Amount	
1	N Susan Dornan	\$47,926	40	40	100.00%	\$23,963.00	The NY Connects Coordinator is responsible for all facets of the program. This position does all the I&A, options counseling, handles outreach and education. Works with the LTCC leadership and completes reporting.
	T NY Connects Coordinator						
	L OFA Office, Lake George, NY 12845						
2	N Kathleen McLaughlin [4/1-7/20/18]	\$11,521	40	40	100.00%	\$14,401.00	Answer phone calls, conduct screening and home visits, input notes and information into Peerplace reporting system, conducts outreach. Works with NY Connects Coordinator.
	T Aging Services Specialist						
	L 1340 State Rt 9, Lake George, NY 12845						
3	N Cynthia Ross	53,882	5	40	10.00%	\$2,694.00	The Fiscal Manager handles all NY Connects fiscal functions, including purchasing and A/P, budget monitoring, voucher preparation and claims processing.
	T Fiscal Manager						
	L OFA Office, Lake George, NY 12845						
4	N Tammy Morehouse	29,327	8	40	20.00%	\$5,865.00	Answer phone calls, conduct screening and home visits, input notes and information into Peerplace reporting system, conducts outreach. Works with NY Connects Coordinator.
	T Aging Services Assistant						
	L OFA Office, Lake George, NY 12845						
5	N Catherine Bearor	39,178	8	40	20.00%	\$7,836.00	Answer phone calls, conduct screening and home visits, input notes and information into Peerplace reporting system, conducts outreach. Works with NY Connects Coordinator.
	T Aging Services Specialist						
	L OFA Office, Lake George, NY 12845						
6	N Joanna Hall	38,999	5	40	10.00%	\$3,900.00	Answer phone calls, conduct screening and home visits, input notes and information into Peerplace reporting system, conducts outreach. Works with NY Connects Coordinator.
	T Aging Services Specialist						
	L OFA Office, Lake George, NY 12845						
7	N RoseAnn O'Rourke	53,973	5	40	10.00%	\$5,397.00	Answer phone calls, conduct screening and home visits, input notes and information into Peerplace reporting system, conducts outreach. Works with NY Connects Coordinator.
	T Coordinator of Services						
	L OFA Office, Lake George, NY 12845						
8	N Jami Rivers	33,856	16	40	40.00%	\$13,542.00	Answers NY Connects line, can give basic information, transfers to other staff trained in Person Centered/Optoins Counseling.
	T Typist						
	L OFA Office, Lake George, NY 12845						
9	N Dinah Kawaguchi	13,658	5	25	20.00%	\$2,732.00	Answers NY Connects line, can give basic information, transfers to other staff trained in Person Centered/Optoins Counseling.
	T Typist						
	L OFA Office, Lake George, NY 12845						
10	N Deanna Park	63,240	5	40	10.00%	\$6,324.00	Works with NY Connects Coordinator. Policy review and revision. Attends NWD, LTCC meetings, etc.
	T Director						
	L OFA Office, Lake George, NY 12845						
11	N						
	T						
	L						
<b>TOTAL Program Personnel:</b>						<b>\$86,654.00</b>	
*Note: If employee is paid a salary, then list the annual salary. If employee is not on salary, then list the hourly rate. When reporting the rate of pay on vouchering forms, the format (i.e., salary or hourly rate) must match this budget (although the actual salary or the hourly rate paid may be different than budgeted).							
<b>2. Fringe Benefits-</b> Fringe Benefits should be directly proportional to that portion of personnel costs that are program related. Provide a clear justification if the expenses are not proportionally allocated.							
<b>Fringe Benefit Rate %:</b>		<b>52.00%</b>	<b>TOTAL Fringe:</b>		<b>\$45,060.00</b>		

## NY Connects Expansion and Enhancement 2018-2019 Supporting Budget Schedules

AAA: Warren/Hamilton Counties

<b>3. Equipment:</b>																
<ul style="list-style-type: none"> <li>•List all equipment items whether purchased or leased.</li> <li>•Provide a detailed description for all equipment with a unit cost of \$1,000 or more.</li> <li>•Equipment with a unit cost of less than \$1,000 should be listed individually under Miscellaneous Equipment in the Maintenance &amp; Operations budget section.</li> </ul>																
<b>Item and Description</b>	<b>Quantity</b>	<b>Unit Purchase Price</b>	<b>Percent Chargeable to Program</b>	<b>Amount Chargeable to Program</b>												
<b>TOTAL Equipment</b>																
<b>4. Travel:</b>																
<ul style="list-style-type: none"> <li>•List travel costs.</li> <li>•Outline reason for travel and indicate the number of staff traveling.(e.g., staff to training, field interviews, advisory group meeting, etc.).</li> <li>•Show the basis of computation (e.g., two people to 3-day training at \$X airfare, \$X lodging, \$X food).</li> </ul>																
Mileage: _____ <u>1500</u> miles @ <u>\$0.545</u> per mile Parking & Tolls _____ Public Transportation: _____ Rental Vehicles (specify destination): _____ Other Travel Costs (Specify): _____				<b>Program Expenses</b> <b>\$818.00</b>												
<b>Reasons for Travel:</b>																
Home visits, training, conferences, meetings, outreach, public education to various locations.																
<b>TOTAL Travel</b>				<b>\$818.00</b>												
<b>5. Maintenance &amp; Operations:</b>																
<ul style="list-style-type: none"> <li>•In the space provided, detail each expense.</li> <li>•For equipment with a unit cost of less than \$1,000, list the items and the total for these items under Miscellaneous Equipment.</li> </ul>																
Equipment Maintenance and Repair: _____ Postage: _____ Printing & Photocopying: _____ Rent: _____ <table border="1" style="width: 100%; border-collapse: collapse; margin-left: 20px;"> <tr> <th style="width: 30%;">Monthly Rent</th> <th style="width: 30%;">% Charge to Prg</th> <th style="width: 40%;">No. of months</th> </tr> <tr> <td>NY Connects: _____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Location: _____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Owner: _____</td> <td>_____</td> <td>_____</td> </tr> </table> Supplies: _____ Telephone: _____ Utilities: _____ Miscellaneous Equipment (List Items): _____				Monthly Rent	% Charge to Prg	No. of months	NY Connects: _____	_____	_____	Location: _____	_____	_____	Owner: _____	_____	_____	<b>Program Expenses</b>  <b>\$299.00</b> <b>\$500.00</b>   <b>\$1,250.00</b> <b>\$600.00</b>
Monthly Rent	% Charge to Prg	No. of months														
NY Connects: _____	_____	_____														
Location: _____	_____	_____														
Owner: _____	_____	_____														
<b>TOTAL M&amp;O:</b>				<b>\$2,649.00</b>												

# NY Connects Expansion and Enhancement 2018-2019

## Supporting Budget Schedules

AAA: Warren/Hamilton Counties

<b>6. Other Expenses: List specific item and cost.</b>		
<ul style="list-style-type: none"> <li>•Itemize all Public Education costs.</li> <li>•Promotional materials in the form of informational brochures and the like are acceptable expenses.</li> <li>•“Giveaways” are not an allowable expense under this funding.</li> </ul>		
<b>Public Education:</b>		<b>Amount</b>
Promotional Materials, such as flyers, pens, etc. (\$500 per County)		\$1,000.00
<b>Information Technology:</b>		<b>Amount</b>
Annual User Fee \$67/user (Susan Dornan & Kathleen McLaughlin - 100% NY Connects)		\$134.00
<b>Other (Specify):</b>		<b>Amount</b>
Training/Conferences for NY Connects (ACUU, Adult Abuse Institute)		\$1,466
<b>TOTAL Other Expenses:</b>		<b>\$2,600.00</b>
<b>7. Contracts/Consultants:</b>		
<ul style="list-style-type: none"> <li>•List each contractor or consultant, amount, and describe service below.</li> <li>•A copy of each contract or consultant agreement must be submitted to NYSOFA before reimbursement will be made.</li> <li>•Complete and submit a Contractor Budget for each contractor that will receive 25% or more of your grant amount in the form of line item contracts.</li> <li>•For Consultants, please list unit rate (e.g., \$25 per hour) and Number of Units in the columns provided. (Note: If you hire a translator, language and/or sign interpreter, include the expense here.) DSS or other county partners' salaries are to be listed in this section.</li> <li>•The Unit Rate and Number of Units do not need to be completed for line item contracts.</li> </ul>		
Contractor/Consultant and description of service <b>(List them individually)</b>	# of Units (Consultant)	Program Total
Hamilton County DSS serves as the NY Connects office for Hamilton County. This includes staff time (there is a case manager who works closely with our NY Connects Coordinator, and other case workers that provide back-up for her) and office resources used for the program (printing, postage, envelopes, etc.)	1000	\$47,556.00
Warren County DSS Adult Protective Unit receives the over flow calls that are not answered by OFA NY Connects staff.	60	\$10,061.00
<b>TOTAL Contractors/Consultants:</b>		<b>\$57,617.00</b>
<b>8. Total Budget: (numbers 1-7)</b>		<b>\$195,398.00</b>
<b>9. State Funds Requested</b>		
<b>10. Local Funds: Describe below</b>		Amount
<b>TOTAL Local Funds:</b>		

**NY Connects Expansion and Enhancements 2018-2019**  
**CONTRACTOR SUMMARY BUDGETS**

Contractor: Hamilton County DSS Allocation Amount  
\$47,556.00

Program Period: April 1, 2018 - March 31, 2019

	<b>Budget Category</b>	<b>Budget Amount</b>
1	Personnel	\$30,000.00
2	Fringe Benefits	\$17,556.00
3	Equipment	
4	Travel	
5	Maintenance and Operations	
6	Other Expenses	
7	Contracts and/or Consultants	
8	<b>Total Budget (Sum of Lines 1-7)</b>	\$47,556.00

Note: Total budget amount on Budget Summary must equal total budget

**NY Connects Expansion and Enhancements 2018-2019  
Contractor Supporting Budget Schedules**

Contractor: Hamilton County DSS

1. Personnel - Contractor salaries are listed here.								
	Complete for Each Position (N)ame, (T)itle, (L)ocation		Annual Salary or Hourly Rate*	Hours chargeable to program per	Total Hours worked per week	Chargeable to Program		Narrative justification: For each position, provide a brief summary of duties related to each program.
						% of Time	Amount	
1	N	Cynthia Hansen	\$30,000	35	35	100.00%	\$30,000.00	Answers phone call, inputs notes and info into Peerplace reporting system. Works with NY Connects Coordinator. Manages NY Connects Resource Directory.
	T	Clerk						
	L	139 White Birch Lane, Indian lake, NY 12842						
2	N							
	T							
	L							
3	N							
	T							
	L							
4	N							
	T							
	L							
5	N							
	T							
	L							
6	N							
	T							
	L							
7	N							
	T							
	L							
8	N							
	T							
	L							
9	N							
	T							
	L							
10	N							
	T							
	L							
11	N							
	T							
	L							
<b>TOTAL Program Personnel:</b>							<b>\$30,000.00</b>	
*Note: If employee is paid a salary, then list the annual salary. If employee is not on salary, then list the hourly rate. When reporting the rate of pay on vouchering forms, the format (i.e., salary or hourly rate) must match this budget (although the actual salary or the hourly rate paid may be different than budgeted).								
<b>2. Fringe Benefits-</b> Fringe Benefits should be directly proportional to that portion of personnel costs that are program related. Provide a clear justification if the expenses are not proportionally allocated.								
<b>Fringe Benefit Rate %:</b>			58.52%	<b>TOTAL Fringe:</b>			\$17,556.00	

## NY Connects Expansion and Enhancements 2018-2019 Contractor Supporting Budget Schedules

Contractor: Hamilton County DSS

<b>3. Equipment:</b>																				
<ul style="list-style-type: none"> <li>•List all equipment items whether purchased or leased.</li> <li>•Provide a detailed description for all equipment with a unit cost of \$1,000 or more.</li> <li>•Equipment with a unit cost of less than \$1,000 should be listed individually under Miscellaneous Equipment in the Maintenance &amp; Operations budget section.</li> </ul>																				
		<b>Unit Purchase Price</b>	<b>Percent Chargeable to Program</b>	<b>Amount Chargeable to Program</b>																
<b>Item and Description</b>	<b>Quantity</b>																			
<b>TOTAL Equipment</b>																				
<b>4. Travel:</b>																				
<ul style="list-style-type: none"> <li>•List travel costs.</li> <li>•Outline reason for travel and indicate the number of staff traveling.(e.g., staff to training, field interviews, advisory group meeting, etc.).</li> <li>•Show the basis of computation (e.g., two people to 3-day training at \$X airfare, \$X lodging, \$X food).</li> </ul>																				
Mileage: _____ miles @ _____ per mile Parking & Tolls Public Transportation: Rental Vehicles (specify destination): Other Travel Costs (Specify):				<b>Program Expenses</b>																
<b>Reasons for Travel:</b>																				
<b>TOTAL Travel</b>																				
<b>5. Maintenance &amp; Operations:</b>																				
Equipment Maintenance and Repair: Postage: Printing & Photocopying: Rent:				<b>Program Expenses</b>																
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;"></td> <td style="width: 30%; text-align: center;">Monthly Rent</td> <td style="width: 30%; text-align: center;">% Charge to Prg</td> <td style="width: 10%; text-align: center;">No. of months</td> </tr> <tr> <td>NY Connects:</td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td>Location:</td> <td colspan="3"> </td> </tr> <tr> <td>Owner:</td> <td colspan="3"> </td> </tr> </table>					Monthly Rent	% Charge to Prg	No. of months	NY Connects:				Location:				Owner:				
	Monthly Rent	% Charge to Prg	No. of months																	
NY Connects:																				
Location:																				
Owner:																				
Supplies:																				
Telephone:																				
Utilities:																				
Miscellaneous Equipment (List Items):																				
<b>TOTAL M&amp;O:</b>																				

## NY Connects Expansion and Enhancements 2018-2019 Contractor Supporting Budget Schedules

Contractor: Hamilton County DSS

<b>6. Other Expenses: List specific item and cost.</b>		
<ul style="list-style-type: none"> <li>•Itemize all Public Education costs.</li> <li>•Promotional materials (e.g. informational brochures) are acceptable expenses.</li> <li>•“Giveaways” are not an allowable expense under this funding.</li> </ul>		
		<b>Program Expenses</b>
<b>Public Education:</b>		
<b>Information Technology:</b>		
<b>Other (Specify):</b>		
<b>TOTAL Other Expenses:</b>		
<b>7. Subcontracts/Consultants:</b>		
<ul style="list-style-type: none"> <li>•List each contractor or consultant, amount, and describe service below.</li> <li>•A copy of each contract or consultant agreement must be submitted to NYSOFA before reimbursement will be made.</li> <li>•Complete and submit a Contractor Budget for each contractor that will receive 25% or more of your grant amount in the form of line item contracts.</li> <li>•For Consultants, please list unit rate (e.g., \$25 per hour) and Number of Units in the columns provided. (Note: If you hire a translator, language and/or sign interpreter, include the expense here.) DSS or other county partners' salaries are to be listed in this section.</li> <li>•The Unit Rate and Number of Units do not need to be completed for line item contracts.</li> </ul>		
Subcontractor/Consultant and description of service <b>(List them individually)</b>	# of Units (Consultant)	Program Total
<b>TOTAL Contractors/Consultants:</b>		
<b>8. Total Budget: (numbers 1-7)</b>		<b>\$47,556.00</b>

**NY Connects Expansion and Enhancements 2018-2019**  
**CONTRACTOR SUMMARY BUDGETS**

Contractor: Warren County DSS Allocation Amount  
\$10,061.00

Program Period: April 1, 2018 - March 31, 2019

<b>Budget Category</b>		<b>Budget Amount</b>
1	Personnel	\$6,891.00
2	Fringe Benefits	\$3,170.00
3	Equipment	
4	Travel	
5	Maintenance and Operations	
6	Other Expenses	
7	Contracts and/or Consultants	
8	<b>Total Budget (Sum of Lines 1-7)</b>	<b>\$10,061.00</b>

Note: Total budget amount on Budget Summary must equal total budget

**NY Connects Expansion and Enhancements 2018-2019  
Contractor Supporting Budget Schedules**

Contractor: Warren County DSS

1. Personnel - Contractor salaries are listed here.							
	Complete for Each Position (N)ame, (T)itle, (L)ocation	Annual Salary or Hourly Rate*	Hours chargeable to program per	Total Hours worked per week	Chargeable to Program		Narrative justification: For each position, provide a brief summary of duties related to each program.
					% of Time	Amount	
1	N Julie Pearl	\$58,572	2	40	2.50%	\$1,464.00	Supervisor of program, directs staff, meets with NY Connects Coordinator and Director, attend NWD meetings, staff support
	T CASA Supervisor						
	L 1340 State Rt 9, Lake George						
2	N Tammy Corbett	53,260	1	40	1.88%	\$999.00	Answer phone calls, conduct screening and home visits; input notes and info into Peerplace reporting system. Works with NY Connects Coordinator
	T Senior Caseworker						
	L 1340 State Rt 9, Lake George						
3	N Elizabeth Dobert	47,562	0.75	40	1.88%	\$892.00	Answer phone calls, conduct screening and home visits; input notes and info into Peerplace reporting system. Works with NY Connects Coordinator
	T Senior Caseworker						
	L 1340 State Rt 9, Lake George						
4	N Cara Irwin	47,564	0.75	40	1.88%	\$892.00	Answer phone calls, conduct screening and home visits; input notes and info into Peerplace reporting system. Works with NY Connects Coordinator
	T Caseworker						
	L 1340 State Rt 9, Lake George						
5	N Anne O'Neill	50,968	0.75	40	1.88%	\$956.00	Answer phone calls, conduct screening and home visits; input notes and info into Peerplace reporting system. Works with NY Connects Coordinator
	T Caseworker						
	L 1340 State Rt 9, Lake George						
6	N Penny Barlow	47,564	0.75	40	1.88%	\$892.00	Answer phone calls, conduct screening and home visits; input notes and info into Peerplace reporting system. Works with NY Connects Coordinator
	T Caseworker						
	L 1340 State Rt 9, Lake George						
7	N Terra Cahill	42,457	0.75	40	1.88%	\$796.00	Answer phone calls, conduct screening and home visits; input notes and info into Peerplace reporting system. Works with NY Connects Coordinator
	T Caseworker						
	L 1340 State Rt 9, Lake George						
8	N						
	T						
	L						
9	N						
	T						
	L						
10	N						
	T						
	L						
11	N						
	T						
	L						
<b>TOTAL Program Personnel:</b>						<b>\$6,891.00</b>	
*Note: If employee is paid a salary, then list the annual salary. If employee is not on salary, then list the hourly rate. When reporting the rate of pay on vouchering forms, the format (i.e., salary or hourly rate) must match this budget (although the actual salary or the hourly rate paid may be different than budgeted).							
<b>2. Fringe Benefits-</b> Fringe Benefits should be directly proportional to that portion of personnel costs that are program related. Provide a clear justification if the expenses are not proportionally allocated.							
<b>Fringe Benefit Rate %:</b>		46.00%	<b>TOTAL Fringe:</b>		\$3,170.00		

## NY Connects Expansion and Enhancements 2018-2019 Contractor Supporting Budget Schedules

Contractor: Warren County DSS

<b>3. Equipment:</b>				
<ul style="list-style-type: none"> <li>•List all equipment items whether purchased or leased.</li> <li>•Provide a detailed description for all equipment with a unit cost of \$1,000 or more.</li> <li>•Equipment with a unit cost of less than \$1,000 should be listed individually under Miscellaneous Equipment in the Maintenance &amp; Operations budget section.</li> </ul>				
		<b>Unit Purchase Price</b>	<b>Percent Chargeable to Program</b>	<b>Amount Chargeable to Program</b>
<b>Item and Description</b>	<b>Quantity</b>			
<b>TOTAL Equipment</b>				
<b>4. Travel:</b>				
<ul style="list-style-type: none"> <li>•List travel costs.</li> <li>•Outline reason for travel and indicate the number of staff traveling.(e.g., staff to training, field interviews, advisory group meeting, etc.).</li> <li>•Show the basis of computation (e.g., two people to 3-day training at \$X airfare, \$X lodging, \$X food).</li> </ul>				
Mileage: _____ miles @ _____ per mile Parking & Tolls Public Transportation: Rental Vehicles (specify destination): Other Travel Costs (Specify):				<b>Program Expenses</b>
<b>Reasons for Travel:</b>				
<b>TOTAL Travel</b>				
<b>5. Maintenance &amp; Operations:</b>				
Equipment Maintenance and Repair: Postage: Printing & Photocopying: Rent:				<b>Program Expenses</b>
NY Connects:	Monthly Rent	% Charge to Prg	No. of months	
Location:				
Owner:				
Supplies:				
Telephone:				
Utilities:				
<b>Miscellaneous Equipment (List Items):</b>				
<b>TOTAL M&amp;O:</b>				

## NY Connects Expansion and Enhancements 2018-2019 Contractor Supporting Budget Schedules

Contractor: Warren County DSS

<b>6. Other Expenses: List specific item and cost.</b>		
<ul style="list-style-type: none"> <li>•Itemize all Public Education costs.</li> <li>•Promotional materials (e.g. informational brochures) are acceptable expenses.</li> <li>•“Giveaways” are not an allowable expense under this funding.</li> </ul>		
		<b>Program Expenses</b>
<b>Public Education:</b>		
<b>Information Technology:</b>		
<b>Other (Specify):</b>		
<b>TOTAL Other Expenses:</b>		
<b>7. Subcontracts/Consultants:</b>		
<ul style="list-style-type: none"> <li>•List each contractor or consultant, amount, and describe service below.</li> <li>•A copy of each contract or consultant agreement must be submitted to NYSOFA before reimbursement will be made.</li> <li>•Complete and submit a Contractor Budget for each contractor that will receive 25% or more of your grant amount in the form of line item contracts.</li> <li>•For Consultants, please list unit rate (e.g., \$25 per hour) and Number of Units in the columns provided. (Note: If you hire a translator, language and/or sign interpreter, include the expense here.) DSS or other county partners' salaries are to be listed in this section.</li> <li>•The Unit Rate and Number of Units do not need to be completed for line item contracts.</li> </ul>		
Subcontractor/Consultant and description of service <b>(List them individually)</b>	# of Units (Consultant)	Program Total
<b>TOTAL Contractors/Consultants:</b>		
<b>8. Total Budget: (numbers 1-7)</b>		<b>\$10,061.00</b>