

**PALM BEACH COUNTY  
BOARD OF COUNTY COMMISSIONERS**

**AGENDA ITEM SUMMARY**

Meeting Date: May 19, 2009

☒ Consent

☐ Regular

☐ Workshop

☐ Public Hearing

Department

Submitted By: Community Services

Submitted For: Ryan White Part A

**I. EXECUTIVE BRIEF**

**Motion and Title:** Staff recommends motion to approve: Amendment No.1 to Contract R2008-1438 with Comprehensive AIDS Program, Inc., for the period August 1, 2008, through July 31, 2009, adjusting the unit cost rate and unit quantity for Medical Case Management services.

**Summary:** The amendment to this contract will increase the unit cost rate from \$13.50 to \$14.50 and reduce the quantity of units being provided from 41,858 to 38,971. The adjustment in unit cost rate will be applicable to the full contract period. These changes are necessary to more accurately reflect the cost of providing the service. The total reimbursable not-to-exceed amount of \$565,076 is unchanged. No County funds are required. (Ryan White) Countywide (TKF).

**Background and Justification:** Under the new Ryan White Treatment Modernization Act of 2006, The Palm Beach County HIV CARE Council establishes priority service areas and assigns funding percentages. These changes have been approved by the Care Council Priorities and Allocation Committee.

**Attachments:** Amendment No. 1 with Comprehensive AIDS Program, Inc.

Recommended by: \_\_\_\_\_

Department Director

Date

5/6/09

Approved by: \_\_\_\_\_

Assistant County Administrator

Date

5/12/09

## II. FISCAL IMPACT ANALYSIS

### A. Five Year Summary of Fiscal Impact:

| <b>Fiscal Years</b>      | <b>2009</b> | <b>2010</b> | <b>2011</b> | <b>2012</b> | <b>2013</b> |
|--------------------------|-------------|-------------|-------------|-------------|-------------|
| Capital Expenditures     | <u>0</u>    | _____       | _____       | _____       | _____       |
| Operating Costs          | <u>0</u>    | _____       | _____       | _____       | _____       |
| External Revenues        | <u>0</u>    | _____       | _____       | _____       | _____       |
| Program Income (County)  | <u>0</u>    | _____       | _____       | _____       | _____       |
| In-Kind Match (County)   | <u>0</u>    | _____       | _____       | _____       | _____       |
| <b>NET FISCAL IMPACT</b> | <b>0</b>    |             |             |             |             |

### # ADDITIONAL FTE POSITIONS (Cumulative)

Is Item Included in Current Budget? Yes X No \_\_\_\_\_  
Budget Account No.: Fund 1010 Dept 142 Unit 1477 Object 8201  
Program Code RW 32

**B. Recommended Sources of Funds/Summary of Fiscal Impact:**

Funding provided through the U.S. Department of Health and Human Services.  
No county match is required.

**C. Departmental Fiscal Review:** 

### **III. REVIEW COMMENTS**

**A. OFMB Fiscal and/or Contract Administration Comments:**

John Dowl 5.9.09  
 885/8109 OFMB  $\frac{700}{118}$  CN 5/8/9

Dr. J. Jacob 511109  
Contract Dev. and Control

**B. Legal Sufficiency:**

 5/12/09  
Assistant County Attorney

**This amendment complies with  
our review requirements.**

**C. Other Department Review:**

Department Director

**This summary is not to be used as a basis for payment.**

**AMENDMENT TO RYAN WHITE PART A  
HIV HEALTH SUPPORT SERVICES  
(MAI)**

**THIS AMENDMENT TO THE RYAN WHITE PART A HIV HEALTH SUPPORT SERVICES CONTRACT** (Document No.R2008-1438, dated September 9, 2008) made and entered into at West Palm Beach Florida, on this \_\_\_\_ day of \_\_\_\_, 2009 by and between PALM BEACH COUNTY, a political subdivision of the State of Florida hereinafter referred to as "COUNTY" and Comprehensive AIDS Program, Inc. hereinafter referred to as the AGENCY, a not-for-profit corporation, entitled to do business in the State of Florida, whose address is 2330 South Congress Avenue, Palm Springs, FL 33406.

**WITNESSETH:**

**WHEREAS**, the need exists to amend the contract to increase the unit of service cost and reduce the units of service for Medical Case Management.

**NOW THEREFORE**, the above named parties hereby mutually agree that the Contract entered into on September 9, 2008 is hereby amended as follows:

**I.** Article 1 of the contract is amended to reduce units of service from 41,858 to 38,971 and increase unit rate from \$13.50 to \$14.50 for Medical Case Management. A new Work Plan "A1" attached hereto showing the new total units of service shall replace the original work plan Exhibit "A" in its entirety. Unduplicated clients will remain the same at 335.

**II.** A new Budgets Exhibit "B1" attached hereto showing new total budget for funding for Medical Case Management shall replace the original Exhibit "B" in its entirety.

**III.** Total contract not to exceed amount will remain as \$565,076.

**OTHER PROVISIONS**

All provisions in the Contract or exhibits to the Contract in conflict with this First Amendment to the Contract shall be and are hereby changed to conform to this amendment.

All provisions not in conflict with this Amendment are still in effect and are to be performed at the same level as specified in the Contract.

IN WITNESS WHEREOF, the parties hereto have caused this two (2) page Amendment to be executed by their officials thereupon duly authorized.

**ATTEST:**

Sharon R. Bock  
Clerk and Comptroller

PALM BEACH COUNTY, FLORIDA,  
BY ITS BOARD OF COUNTY  
COMMISSIONERS

By: \_\_\_\_\_  
Deputy Clerk

By: \_\_\_\_\_  
John F. Koons, Chairman

\_\_\_\_\_  
Date

**WITNESS:**

                      
Signature

Robbin J. Rodriguez  
Witness Name

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

                      
Signature

Chief Executive Officer  
Yolette Bonnet

4-30-09  
Date

**APPROVED AS TO FORM AND  
LEGAL SUFFICIENCY**

\_\_\_\_\_  
County Attorney

**APPROVED AS TO TERMS  
AND CONDITIONS**

                      
Director

# TITLE I WORKPLAN

APPLICANT: Comprehensive AIDS Program

SERVICE: Medical Case Management -MAI

AREA TO BE SERVED: PALM BEACH COUNTY

| <u>OBJECTIVE(S)</u>   | <u>ACTIVITIES</u>  | <u>START DATE</u> | <u>END DATE</u>   | <u>NON-DUPLICATING STATEMENT</u>   |
|---|--|-------------------|-------------------|--|
| <p>1. Objective: Identify units of tangible services and # of unduplicated clients to be served. Define a Unit of Service</p> <p>2. Impact Statement: When the objective is accomplished, what impact will it have?</p>   | <p>Describe the sequential steps to be taken to accomplish the objective</p>   |                   |                   | <p>Indicate any other program in your agency or other agencies in the community which provides similar services. Explain how you will avoid duplication of services, or why additional units of services are needed.</p>   |
| <p>1. A unit of service is a quarter hour of case management. CAP will provide a total of 38,971 units of case management to an estimated 335 minority clients.</p> <p>2. 335 minority HIV+ men, women and children will have better health outcomes and longer life as a result of information; education; and medical &amp; social service support.</p> <p>3. 335 minority HIV+ men, women, and children will receive a referral and linkages to a medical provider and social services support as determined by a careplan.</p> <p>unit=quarter hour<br/>Unit cost = \$14.50 per quarter hour<br/>38,971 units of service<br/>plus State, county, and CAREware trainings at \$290 per day per staff<br/>equals 20 units at \$14.50 per unit per day (other H)<br/>plus actual cost of new computer upgrade needs (other M)</p> | <p>1. Upon contractual agreement, CAP will continue to provide medical case management activities to eligible Ryan White MAI clients, according to the State of Florida HIV Case Management standards.</p> | <p>8/1/2008</p>   | <p>7/31/2009*</p> | <p>Clients have a choice in which case management program they would like to be enrolled. Traditionally, CAP serves those clients who are asymptomatic, symptomatic, and diagnosed with AIDS.</p> <p>CAP meets with other providers for referral services, and uses the FACTORS system to prevent duplication of services and enhances overall approach.</p> |

\* or Date of Depletion of Funds, whichever comes first

## BUDGET NARRATIVE SUMMARY

PROPOSED SERVICE: MEDICAL CASE MANAGEMENT - MAI

AGENCY NAME: Comprehensive AIDS Program

BUDGET PERIOD: from 8/1/2008 to 7/31/2009\*

| Category           | Administration | Program        | Total          | Cost per Unit |
|--------------------|----------------|----------------|----------------|---------------|
| A. Personnel       | -              | 353,195        | 353,195        | 9.06          |
| B. Fringe Benefits | -              | 86,807         | 86,807         | 2.23          |
| C. Travel          | -              | 6,816          | 6,816          | 0.17          |
| D. Equipment       | -              | -              | -              |               |
| E. Supplies        | -              | 8,408          | 8,408          | 0.22          |
| F. Contractual     | -              | 1,500          | 1,500          | 0.04          |
| G. Other           | 51,371         | 56,980         | 108,351        | 2.78          |
| <b>Total</b>       | <b>51,371</b>  | <b>513,705</b> | <b>565,076</b> | <b>14.50</b>  |

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# BUDGET NARRATIVE

Service: **MEDICAL CASE MANAGEMENT - MAI**

Agency: **Comprehensive AIDS Program**

Budget Period: **8/1/2008**

to

**7/31/2009\***

| REVENUES  | Administration<br>Amount | Program<br>Amount | Total<br>Service Costs |
|---|--------------------------|-------------------|------------------------|
| 1. Funds from Government Sources Ryan White Title I | 51,371                   | 513,705           | 565,076                |
| 2. Foundations                                      |                          |                   | -                      |
| 3. Other Grants                                     | -                        | -                 | -                      |
| 4. Fund Raising                                     |                          |                   | -                      |
| 5. Contributions/Legacies/Bequests                  |                          |                   | -                      |
| 6. Membership dues                                  |                          |                   | -                      |
| 7. Program Service Fees and Sales to the Public     |                          |                   | -                      |
| 8. Investment Income                                |                          |                   | -                      |
| 9. In Kind  |                          |                   | -                      |
| 10. Miscellaneous Revenue                           |                          |                   | -                      |
| 11. Total Revenue                                   | 51,371                   | 513,705           | 565,076                |

BUDGET NARRATIVE

Service: MEDICAL CASE MANAGEMENT - MAI

Agency: Comprehensive AIDS Program

Budget Period: 8/1/2008 to 7/31/2009\*

| Expenditures                             | Administration<br>Amount | Program<br>Amount | Total<br>Service Costs |
|--|--------------------------|-------------------|------------------------|
| 12. Salaries (Must agree with Form C-1)  |                          | 353,195           | 353,195                |
| 13. Employee Benefits                    |                          |                   |                        |
| a. FICA .0765                            | -                        | 27,019            | 27,019                 |
| b. FI Unemployment \$7,000 x .0335 x FTE | -                        | 1,232             | 1,232                  |
| c. Workers' Compensation .02             | -                        | 7,064             | 7,064                  |
| d. Health Plan \$650 x 12 per mo per FTE | -                        | 40,895            | 40,895                 |
| e. Retirement .03                        | -                        | 10,596            | 10,596                 |
| 14. Sub-Total Employee Benefits          | -                        | 86,807            | 86,807                 |
| 15. Sub-Total Salaries & Benefits        | -                        | 440,001           | 440,001                |
| 16. Travel                               |                          |                   |                        |
| a. Travel/Transportation                 | -                        | 5,243             | 5,243                  |
| b. Conference/Registration/Travel        | -                        | 1,573             | 1,573                  |
| 17. Sub-Total Travel                     |                          | 6,816             | 6,816                  |



# BUDGET NARRATIVE

Service: MEDICAL CASE MANAGEMENT - MAI

Agency: Comprehensive AIDS Program

Budget Period: 8/1/2008 to 7/31/2009\*

| Expenditures   | Administration<br>Amount | Program<br>Amount | Total<br>Service Costs |
|--|--------------------------|-------------------|------------------------|
| 18. Equipment (Attach a page showing detail description)           | -                        |                   | -                      |
| 19. Supplies   |                          |                   |                        |
| a. Office Supplies   | -                        | 3,408             | 3,408                  |
| b. Program Supplies (actual purchase)                              |                          | 5,000             | 5,000                  |
| 20. Sub-Total Supplies   | -                        | 8,408             | 8,408                  |
| 21. Contractual (Part-time Case Managers @ \$15per hour x 100 hrs) |                          | 1,500             | 1,500                  |
| 22. Other  |                          |                   |                        |
| a. Communications/Utilities  |                          |                   |                        |
| 1. Telephone   | -                        | 4,719             | 4,719                  |
| 2. Postage & Shipping  | -                        | 786               | 786                    |
| 3. Utilities (Power/Water/Gas                                      | -                        | 3,408             | 3,408                  |
| Sub-Total Communications/Utilities                                 | -                        | 8,913             | 8,913                  |

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# BUDGET NARRATIVE

Service: **MEDICAL CASE MANAGEMENT - MAI**

Agency: Comprehensive AIDS Program

Budget Period: 8/1/2008 to 7/31/2009\*

| Expenditures                          | Administration<br>Amount | Program<br>Amount | Total<br>Service Costs |
|---------------------------------------|--------------------------|-------------------|------------------------|
| B. Food Service                       |                          |                   |                        |
| C. Rental                             |                          |                   |                        |
| 1. Building                           | -                        | 26,215            | \$26,215               |
| 2. Equipment                          |                          |                   |                        |
| Sub-Total Rental                      |                          | \$26,215          | \$26,215               |
| D. Repair & Maintenance               |                          |                   |                        |
| 1. Building Maintenance               | -                        | 3,902             | \$3,902                |
| 2. Equipment Maintenance              | -                        | -                 |                        |
| Sub-Total Repair & Maintenance        |                          | \$3,902           | \$3,902                |
| E. Specific Assistance to Individuals |                          |                   |                        |
| F. Dues & Membership                  | -                        | 79                | \$79                   |

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# BUDGET NARRATIVE

Service: **MEDICAL CASE MANAGEMENT - MAI**

Agency: **Comprehensive AIDS Program**

Budget Period: **8/1/2008**

to

**7/31/2009\***

| Expenditures   | Administration<br>Amount | Program<br>Amount | Total<br>Service Costs |
|--|--------------------------|-------------------|------------------------|
| G. Subscriptions   | -                        | 79                | 79                     |
| H. Training & Development<br>Includes Countywide & Statewide training required for all<br>staff. \$270 per day per staff=20units per day | -                        | 2,831             | 2,831                  |
| I. Printing  | -                        | 1,573             | 1,573                  |
| J. Copy Cost   | -                        | 1,573             | 1,573                  |
| K. Advertising/Recruitment/PR  | -                        | 524               | 524                    |
| L. Audit Fees  | -                        | -                 | -                      |
| M. Office Furniture and Equipment (needed for computer hardware and software upgrades)   | -                        | 5,000             | 5,000                  |
| N. Insurance/General Liability/Malpractice   | -                        | 6,292             | 6,292                  |
| N. Administrative expense allowed at 10%   | 51,371                   | -                 | 51,371                 |
| 23. Sub-Total Other  | 51,371                   | 56,980            | 108,351                |
| 24. Total Expenditures   | 51,371                   | 513,705           | 565,076                |
| 25a Total Cost per Unit of Service - (must match unit of service cost used in Workplan)  | 1.32                     | 13.18             | 14.50                  |
|  |                          |                   |                        |
| Total Units less statewide trainings and computer upgrades to be reimbursed  |                          |                   | 38,972                 |
|  |                          |                   |                        |

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# SALARIES PER SERVICE

Service: MEDICAL CASE MANAGEMENT - MAI  
Agency: Comprehensive AIDS Program  
Budget Period: 8/1/2008 to 7/31/2009\*

\*Total Salary = No. of days x Hrs per day x Hourly rate

\*\* Requested amount = Total salary x percent funded

| *Total Salary = No. of days x Hrs per day x Hourly rate |                |                  |                   |                |                 |                |                            |                       |       |         |         |
|---|----------------|------------------|-------------------|----------------|-----------------|----------------|----------------------------|-----------------------|-------|---------|---------|
| (1)   |                | (3)              | (4)               | (5)            | (6)             | (7)            | (8)                        | (9)                   | (10)  | (11)    | (12)    |
| PERSONNEL   | Admin/<br>Prog | Annual<br>Salary | Pay Per<br>Period | No. Of<br>Days | Hrs. Per<br>Day | Hourly<br>Rate | Total<br>Salary<br>(5x6x7) | Percentage<br>Charged | Admin | Program | Total   |
| Positions/Salaries                                      |                |                  |                   |                |                 |                |                            |                       |       |         |         |
| Chief Program Director/CPO                              | Prog           | 107,302          | 4,127             | 260            | 8               | 51.59          | 107,302                    | 20%                   |       | 21,460  | 21,460  |
| 1 Program Managers                                      | Prog           | 56,706           | 2,181             | 260            | 8               | 27.26          | 56,706                     | 70%                   |       | 39,694  | 39,694  |
| 2 Program Supervisors                                   | Prog           | 72,200           | 2,777             | 260            | 8               | 34.71          | 72,200                     | 70%                   |       | 50,540  | 50,540  |
| 2 Program Specialists                                   | Prog           | 50,000           | 1,923             | 260            | 8               | 24.04          | 50,000                     | 70%                   |       | 35,000  | 35,000  |
| 10 Case Managers/Techs                                  | Prog           | 295,000          | 11,346            | 260            | 8               | 141.83         | 295,000                    | 70%                   |       | 206,500 | 206,500 |
|   |                |                  |                   |                |                 |                |                            |                       |       |         |         |
|   |                |                  |                   |                |                 |                |                            |                       |       |         |         |
| Total Personnel (Line Item Budget Line A)               |                | 581,208          | 22,354            |                |                 |                | 581,208                    |                       |       | 353,195 | 353,195 |

FTE Admin

(need to add up)>>>>>>>> FTE Prog 10.70 actual fte's by %

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**TOTAL AGENCY BUDGET****Comprehensive AIDS Program of Palm Beach County, Inc.**

Agency Budget for Fiscal Year 3/1/2008 to 2/28/2009

| REVENUES                                | Ryan White<br>FORMULA | Ryan White<br>SUPPLM | Ryan White<br>MAI | PBC/BCC<br>Tax Dollars | Other *<br>Federal | Other *<br>State | Other *<br>Local | Total     |
|---|-----------------------|----------------------|-------------------|------------------------|--------------------|------------------|------------------|-----------|
| 1. Funds from<br>Gov.. Sources          | 1,322,535             | 576,697              | 565,076           | 193,722                | 1,422,278          | 100,000          | 463,333          | 4,643,641 |
| 2. Foundations                          |                       |                      |                   |                        |                    |                  | 100,000          | 100,000   |
| 3. Other Grants                         |                       |                      |                   |                        |                    |                  |                  |           |
| 4. Fund Raising                         |                       |                      |                   |                        |                    |                  | 150,000          | 150,000   |
| 5. Contributions/<br>Legacies/Bequests  |                       |                      |                   |                        |                    |                  | 60,000           | 60,000    |
| 6. Membership Dues                      |                       |                      |                   |                        |                    |                  |                  |           |
| 7. Program Svc Fees/<br>Sales to Public |                       |                      |                   |                        |                    |                  |                  |           |
| 8. Investment Income                    |                       |                      |                   |                        |                    |                  | 6,000            | 6,000     |
| 9. In-Kind                              |                       |                      |                   |                        |                    |                  |                  |           |
| 10. Miscellaneous                       |                       |                      |                   |                        |                    |                  |                  |           |
| 11. Total Revenues                      | 1,322,535             | 576,697              | 565,076           | 193,722                | 1,422,278          | 100,000          | 779,333          | 4,959,641 |

All Financial Information Rounded to Nearest Dollar

# **TOTAL AGENCY BUDGET**

## **Comprehensive AIDS Program of Palm Beach County, Inc.**

Agency Budget for Fiscal Year 3/1/2008 to 2/28/2009

| EXPENDITURES                    | Ryan White<br>FORMULA | Ryan White<br>SUPPLM | Ryan White<br>MAI | PBC/BCC<br>Tax Dollars | Other *<br>Federal | Other *<br>State | Other *<br>Local | Total     |
|---------------------------------|-----------------------|----------------------|-------------------|------------------------|--------------------|------------------|------------------|-----------|
| 12. Salaries                    | 659,579               | 294,760              | 353,194           | 72,881                 | 489,980            | 72,999           | 300,000          | 2,243,393 |
| Chief Program Director          | 21,460                | 10,730               | 21,460            |                        |                    |                  |                  |           |
| 1 Regional Program Managers     | 39,694                | 42,530               | 39,694            |                        |                    |                  |                  |           |
| 3 Program Supervisors           | 73,909                | 27,000               | 50,540            |                        |                    |                  |                  |           |
| 4 Program Support Specialists   | 67,553                | 15,000               | 35,000            |                        |                    |                  |                  |           |
| 21 Case Managers/Techs          | 425,250               | 199,500              | 206,500           |                        |                    |                  |                  |           |
| HIV Prevention Manager          | 2,412                 |                      |                   |                        |                    |                  |                  |           |
| Treatment Adherence Coordinator | 29,301                |                      |                   |                        |                    |                  |                  |           |
|                                 |                       |                      |                   |                        |                    |                  |                  |           |
|                                 |                       |                      |                   |                        |                    |                  |                  |           |
|                                 |                       |                      |                   |                        |                    |                  |                  |           |
|                                 |                       |                      |                   |                        |                    |                  |                  |           |
|                                 | 659,579               | 294,760              | 353,194           | 72,881                 | 489,980            | 72,999           | 300,000          | 2,243,393 |

all the above figures are calculated on the best estimated allocation as all grants have not been received and updated as of the date of preparation

**TOTAL AGENCY BUDGET****Comprehensive AIDS Program of Palm Beach County, Inc.**

Agency Budget for Fiscal Year 3/1/2008 to 2/28/2009

| EXPENDITURES                           | Ryan White<br>FORMULA | Ryan White<br>SUPPLM | Ryan White<br>MAI | PBC/BCC<br>Tax Dollars | Other *<br>Federal | Other *<br>State | Other *<br>Local | Total     |
|--|-----------------------|----------------------|-------------------|------------------------|--------------------|------------------|------------------|-----------|
| 12. Salaries                           | 659,579               | 294,760              | 353,194           | 72,881                 | 489,980            | 72,999           | 300,000          | 2,243,393 |
| 13. Employee Benefits                  |                       |                      |                   |                        |                    |                  |                  |           |
| a. FICA                                | 48,032                | 22,549               | 27,019            | 5,575                  | 37,483             | 5,584            | 22,950           | 169,194   |
| b. FI Unemployment                     | 3,092                 | 2,139                | 1,232             | 729                    | 4,900              | 730              | 3,000            | 15,822    |
| c. Workers' Comp                       | 12,557                | 5,895                | 7,064             | 1,458                  | 9,800              | 1,460            | 6,000            | 44,233    |
| d. Health Plan                         | 98,173                | 66,879               | 40,896            | 15,788                 | 125,569            | 7,947            | 72,720           | 427,972   |
| e. Retirement                          | 18,836                | 8,843                | 10,596            | 2,186                  | 14,699             | 2,190            | 9,000            | 66,351    |
| 14. Sub-Total<br>Employee Benefits     | 180,690               | 106,305              | 86,807            | 25,736                 | 192,451            | 17,911           | 113,670          | 723,571   |
| 15. Sub-Total<br>Salaries/Benefits     | 840,269               | 401,065              | 440,001           | 98,617                 | 682,431            | 90,910           | 413,670          | 2,966,964 |
| 16. Travel                             |                       |                      |                   |                        |                    |                  |                  |           |
| a. Travel/transportation               | 13,156                | 9,100                | 5,243             | 4,272                  | 24,957             |                  | 11,806           | 68,534    |
| b. Conferences/<br>Registration/Travel | 7,894                 | 5,460                | 1,573             | 3,784                  | 9,049              |                  | 6,400            | 34,160    |
| 17. Sub-Total Travel                   | 21,050                | 14,560               | 6,816             | 8,056                  | 34,006             |                  | 18,206           | 102,694   |

All Financial Information Rounded to Nearest Dollar

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**TOTAL AGENCY BUDGET****Comprehensive AIDS Program of Palm Beach County, Inc.**Agency Budget for Fiscal Year 3/1/2008 to 2/28/2009

| EXPENDITURES                          | Ryan White<br>FORMULA | Ryan White<br>SUPPLM | Ryan White<br>MAI | PBC/BCC<br>Tax Dollars | Other *<br>Federal | Other *<br>State | Other *<br>Local | Total   |
|---------------------------------------|-----------------------|----------------------|-------------------|------------------------|--------------------|------------------|------------------|---------|
| 18. Equipment                         |                       |                      |                   |                        |                    |                  |                  |         |
| 19. Supplies                          |                       |                      |                   |                        |                    |                  |                  |         |
| a. Office Supplies                    | 13,156                | 9,100                | 3,408             | 1,000                  |                    |                  | 10,000           | 36,664  |
| b. Program Supplies                   | 5,000                 | 5,000                | 5,000             | 32,750                 | 70,943             |                  | 8,100            | 126,793 |
| c. Computer Software                  |                       |                      |                   |                        |                    |                  |                  |         |
| 20. Sub-Total<br>Supplies             | 18,156                | 14,100               | 8,408             | 33,750                 | 70,943             |                  | 18,100           | 163,457 |
| 21. Contractual                       | 115,388               |                      | 1,500             | 14,560                 | 8,400              |                  |                  | 139,848 |
| 22. Other                             |                       |                      |                   |                        |                    |                  |                  |         |
| a. Communications/Utilities           |                       |                      |                   |                        |                    |                  |                  |         |
| 1. Telephone                          | 13,156                | 8,190                | 4,719             |                        |                    |                  | 3,000            | 29,065  |
| 2. Postage & Shipping                 | 1,973                 | 1,365                | 786               | 1,200                  |                    |                  | 1,000            | 6,324   |
| 3. Utilities<br>(Power/Water/Gas)     | 13,156                | 8,190                | 3,408             |                        |                    |                  | 6,000            | 30,754  |
| Sub-Total<br>Communications/Utilities | 28,285                | 17,745               | 8,913             | 1,200                  |                    |                  | 10,000           | 66,143  |

All Financial Information Rounded to Nearest Dollar



**TOTAL AGENCY BUDGET****Comprehensive AIDS Program of Palm Beach County, Inc.**

Agency Budget for Fiscal Year

3/1/2008

to

2/28/2009

| EXPENDITURES                             | Ryan White<br>FORMULA | Ryan White<br>SUPPLM | Ryan White<br>MAI | PBC/BCC<br>Tax Dollars | Other *<br>Federal | Other *<br>State | Other *<br>Local | Total   |
|--|-----------------------|----------------------|-------------------|------------------------|--------------------|------------------|------------------|---------|
| B. Food Service                          |                       |                      |                   |                        |                    |                  |                  |         |
| C. Rental                                |                       |                      |                   |                        |                    |                  |                  |         |
| 1. Building                              | 59,202                | 40,950               | 26,215            | 7,740                  | 76,920             |                  | 36,360           | 247,387 |
| 2. Equipment                             |                       |                      |                   |                        | 2,000              |                  |                  | 2,000   |
| Sub-Total Rental                         | 59,202                | 40,950               | 26,215            | 7,740                  | 78,920             |                  | 36,360           | 249,387 |
| D. Repair & Maintenance                  |                       |                      |                   |                        |                    |                  |                  |         |
| 1. Building Maintenance                  | 13,156                | 8,190                | 3,902             |                        |                    |                  | 6,000            | 31,248  |
| 2. Equipment Maintenance                 |                       |                      |                   |                        |                    |                  |                  |         |
| Sub-Total Repair &<br>Maintenance        | 13,156                | 8,190                | 3,902             |                        |                    |                  | 6,000            | 31,248  |
| E. Specific Assistance<br>to Individuals | 44,121                |                      |                   |                        | 416,023            |                  | 125,000          | 585,144 |
| F. Dues & Membership                     | 197                   | 137                  | 79                |                        |                    |                  | 100              | 513     |
| G. Subscriptions                         | 263                   | 137                  | 79                |                        |                    |                  | 100              | 579     |

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All Financial Information Rounded to Nearest Dollar

## TOTAL AGENCY BUDGET

Comprehensive AIDS Program of Palm Beach County, Inc.

Agency Budget for Fiscal Year

3/1/2008

to

2/28/2009

| EXPENDITURES                    | Ryan White<br>FORMULA | Ryan White<br>SUPPLM | Ryan White<br>MAI | PBC/BCC<br>Tax Dollars | Other *<br>Federal | Other *<br>State | Other *<br>Local | Total       |
|---------------------------------|-----------------------|----------------------|-------------------|------------------------|--------------------|------------------|------------------|-------------|
| H. Training & Development       | 6,841                 | 4,732                | 2,831             | 953                    |                    |                  | 3,500            | 18,857      |
| I. Printing                     | 4,605                 | 2,730                | 1,573             | 5,097                  |                    |                  | 2,000            | 16,005      |
| J. Copy Cost                    | 4,820                 | 2,730                | 1,573             |                        |                    |                  | 2,000            | 11,123      |
| K. Advertising                  | 3,289                 | 2,275                | 524               |                        | 10,000             |                  | 1,800            | 17,888      |
| L. Audit Fees                   |                       |                      |                   |                        |                    |                  |                  |             |
| M. Office Furniture & Equipment | 41,204                | 4,000                | 5,000             | 3,000                  |                    |                  | 4,000            | 57,204      |
| N. Insurance                    | 19,734                | 10,920               | 6,292             |                        |                    |                  | 12,000           | 48,946      |
| O. Fundraising                  |                       |                      |                   |                        |                    |                  | 76,926           | 76,926      |
| P. Vehicle Operation            |                       |                      |                   |                        |                    |                  |                  |             |
| Q. Promotional/PR               |                       |                      |                   |                        |                    |                  |                  |             |
| R. Fees/taxes/bank fees         |                       |                      |                   |                        |                    |                  |                  |             |
| S. Professional Fees            |                       |                      |                   |                        |                    |                  |                  |             |
| T. Indirect Costs               | 101,955               | 52,426               | 51,370            | 20,749                 | 121,555            | 9,090            | 49,571           | 406,716     |
| 25. Sub-Total Other             | 327,672               | 146,972              | 108,351           | 38,739                 | 626,498            | 9,090            | 329,357          | 1,586,679   |
| 26. Sub-Total Expenditures      | \$1,322,535           | \$576,697            | \$565,076         | \$193,722              | \$1,422,278        | \$100,000        | \$779,333        | \$4,959,641 |

All Financial Information Rounded to Nearest Dollar