# BUDGET REQUEST FORM

# LA CROSSE COUNTY HUMAN SERVICES DEPARTMENT

## FACE SHEET

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Agency Name: | Rest Haven Inc. | | | | |
| Type of Agency: | \_\_\_\_\_ Non-Profit &/or Governmental Agency \_\_\_\_\_Hospitals/Clinics \_\_X\_\_For-Profit | | | | |
| Fiscal Year: | 1/1/2002 | through | | | 12/31/2002 |
| Person to Contact with Budget Questions: | Jennifer Smith, Financial Manager | | | | |
| Name of Agency Administrator: | Jack Jones, Director | | | | |
| Agency Phone Number: | (608) 787-7654 | | | | |
| Service(s): | CBRF – Sleepy Hollow | |  | CBRF – Idle Hour | |
| License Capacity(if applicable): | 8 | |  | 6 | |
| Agency Hours of Operation | Office 8:00am – 5:00 pm / Home 24 hours | |  | 24 hours | |
|  |  | |  |  | |

## PER UNIT COST CALCULATION

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Program Name |  | Sleepy Hollow |  | **Idle Hour** |
|  |  | Program 1 |  | **Program 2** |
| Total Expenses from Page 3 |  | $211,899 |  | $216,182 |
| (Less): Cost Offsets\* |  |  |  |  |
| Staff Meals |  | $730 |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| (=) Adjusted Total Expenses |  | $211,169 |  | $216,182 |
| (+) Profit \*\* |  | $ 16,663 |  | $ 18,329 |
| (=) Allowable Costs |  | $227,832 |  | $234,511 |
| (divided by) Units of Care |  | 2190 |  | 1825 |
| (=) Cost per Unit |  | $104.03 |  | $128.50 |
| Identify Type of Unit (i.e. per day, hour)\*\*\* |  | Per day |  | Per day |

\*Cost Offsets include things such as in-kind *staff meals, different county funding, revenues, USDA funding, United Way*

*Contributions, etc.*

\*\*FOR PROFIT AGENCIES ONLY! – Please refer to Page 4 to calculate.

\*\*\*On a separate piece of paper, describe in detail your unit type – definition, proposed number of units, calculation as to how you arrived at this number of units, etc.

## La Crosse County Human Services Department

## Salary and Fringe Breakdown

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Agency Name: | Rest Have Inc | | | Fiscal Year: | \_\_1\_/\_1\_/02\_\_ |  | \_\_12/31/02\_\_ |
| Service: | Sleepy Hollow |  | Idle Hour | | | | |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Employee Name** Or Position | Full-time (FT) or  Part-time (PT) | Administrative | | **Program 1** | | **Program 2** | | **Total** | |
| Salary | Fringe Benefits | Salary | Fringe Benefits | Salary | Fringe Benefits | Salary | Fringe Benefits |
| Director | FT | 35,000 | 4,358 | 5,000 | 622 | 10,000 | 1,245 | 50,000 | 6,225 |
| Lead Worker | FT |  |  | 28,000 | 4,542 |  |  | 28,000 | 4,542 |
| Lead Worker | FT |  |  |  |  | 28,000 | 4,542 | 28,000 | 4,542 |
| Residential Care Worker | FT |  |  | 24,000 | 4,236 |  |  | 24,000 | 4,236 |
| Residential Care Worker | FT |  |  |  |  | 24,000 | 4,236 | 24,000 | 4,236 |
| Residential Care Worker | FT |  |  | 20,800 | 3,991 |  |  | 20,800 | 3,991 |
| Residential Care Worker | FT |  |  | 20,800 | 3,991 |  |  | 20,800 | 3,991 |
| Residential Care Worker | FT |  |  |  |  | 20,800 | 3,991 | 20,800 | 3,991 |
| Residential Care Worker | FT |  |  |  |  | 20,800 | 3,991 | 20,800 | 3,991 |
| Residential Care Worker | FT |  |  | 10,400 | 1,995 | 10,400 | 1,996 | 20,800 | 3,991 |
| Residential Care Worker | PT – 30 |  |  | 7,800 | 1,197 | 7,800 | 1,196 | 15,600 | 2,393 |
| Administrative Assistant | PT – 20 | 10,400 | 1,996 |  |  |  |  | 10,400 | 1,996 |
| Totals | | 45,400 | 6,354 | 116,800 | 20,574 | 121,800 | 21,197 | 284,000 | 48,125 |

**La Crosse County Human Services Department**

## Expense Distribution Form

|  |  |  |
| --- | --- | --- |
| **Agency Name:** | Rest Haven Inc. |  |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name of Program | |  | |  |  | **Sleepy** |  | **Idle** |  |  |
|  | |  | | **Administration** |  | **Program 1** |  | **Program 2** |  | **Total** |
| 1. Salaries | |  | | 45,400 |  | 116,800 |  | 121,800 |  | 284,000 |
| 1. Fringe Benefits | |  | | 6,354 |  | 20,574 |  | 21,197 |  | 48,125 |
| 1. Workmen’s Compensation Insurance | | | | 666 |  |  |  |  |  | 666 |
| 1. Rent | |  | | 9,000 |  |  |  |  |  | 9,000 |
| 1. Mortgage Interest | |  | |  |  | 6,000 |  | 4,000 |  | 10,000 |
| 1. Other Interest | |  | |  |  |  |  |  |  |  |
| 1. Real Estate Taxes | |  | | 1,000 |  | 3,200 |  | 2,800 |  | 7,000 |
| 1. Utilities | |  | | 900 |  | 3,000 |  | 2,800 |  | 6,700 |
| 1. Telephone | |  | | 800 |  | 1,000 |  | 1,000 |  | 2,800 |
| 1. Garbage | |  | |  |  |  |  |  |  |  |
| 1. Household Supplies | |  | |  |  | 600 |  | 500 |  | 1,100 |
| 1. Office & Professional Supplies | | | | 800 |  |  |  |  |  | 800 |
| 1. Repairs & Maintenance: | | | |  |  |  |  |  |  |  |
|  | - Home or Building | | |  |  |  |  |  |  |  |
|  | - Equipment | | |  |  |  |  |  |  |  |
| 1. Depreciation: | |  | |  |  |  |  |  |  |  |
|  | - Home or Building | | |  |  | 6,000 |  | 5,000 |  | 11,000 |
|  | - Equipment & Vehicle(s) | | |  |  | 1,000 |  | 3,600 |  | 4,600 |
| 1. Insurance: | |  | |  |  |  |  |  |  |  |
|  | - Home or Building | | |  |  | 1,000 |  | 900 |  | 1,900 |
|  | - Vehicle(s) | | |  |  |  |  |  |  |  |
|  | - Other | | |  |  |  |  |  |  |  |
| 1. Food | |  | |  |  | 13,140 |  | 12,500 |  | 25,640 |
| 1. Audit and/or Accounting fees | | | | 10,000 |  |  |  |  |  | 10,000 |
| 1. Consultant fees | |  | |  |  |  |  |  |  |  |
| 1. Dues & Subscriptions | |  | |  |  |  |  |  |  |  |
| 1. Licensing/Certification | | | |  |  |  |  |  |  |  |
| 1. Employee Training | |  | |  |  | 1,000 |  | 1,000 |  | 2,000 |
| 1. Personal Mileage Reimbursement | | | |  |  | 1,500 |  | 1,250 |  | 2,750 |
| 1. Agency Vehicle(s): | |  | |  |  |  |  |  |  |  |
|  | - Gas & Oil | | |  |  |  |  |  |  |  |
|  | - Repairs & Maintenance | | |  |  |  |  |  |  |  |
|  | - License/Registration | | |  |  |  |  |  |  |  |
| 1. Other transportation Costs | | | |  |  |  |  |  |  |  |
| 1. Bank Charges | |  | |  |  |  |  |  |  |  |
| 1. Recruitment | |  | |  |  |  |  |  |  |  |
| 1. Production Expenses | |  | |  |  |  |  |  |  |  |
| 1. Miscellaneous | |  | |  |  |  |  |  |  |  |
| Total Expenses | | |  | 74,920 |  | 174,814 |  | 178,347 |  | 428,081 |
| Allocated Administration by program \*(see top of page 4) | | |  | 74,920 |  | 37,085 |  | 37,835 |  | 0 |
| Grand Total Expenses | | | | |  | 49.5%  211,899 |  | 50.5%  216,182 |  | 428,081 |

* **Identify method used to allocate administrative costs on page 3.**

$174,814 + $178,347 = $353,161

$174,814 divided by $353,161 = 49.5%

$178,347 divided by $353,161 = 50.5%

-SIMPLIFIED METHOD-

**PROFIT CALCULATION**

**FOR PROFIT AGENCIES ONLY**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Profit Calculation  (the total profit pursuant to the Wisconsin Department of Health and Family Services *Allowable Cost Policy Manual* can not exceed 10% of allowable costs): |  |  |  |  |
| Allowable Costs |  | 211,169 |  | 216,182 |
| Multiply - Profit Percentage |  | x .075 |  | x .075 |
| Profit on Allowable Costs |  | 1. 15,838 |  | 1. 16,214 |
| Plus:  Agency Average Net Equity |  | 5,500 |  | 14,100 |
| Multiply - Net Equity Percentage |  | x .15 |  | x .15 |
| Profit on Average Net Equity |  | 825 |  | 1. 2,115 |
| Total Profit  (Profit on Allowable Costs (a) + Profit on Average Net Equity (b)) |  | 16,663 |  | 18,329 |

# Average Net Equity Calculation

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Program 1 | | |  | Program 2 | | |
|  | Balance at theBeginning period |  | Balance at theEnd Period |  | Balance at theBeginning period |  | Balance at theEnd Period |
| Cost of Equipment | 15,000 |  | 20,000 |  | 18,000 |  | 18,000 |
| Cost of Buildings | 180,000 |  | 180,000 |  | 150,000 |  | 150,000 |
| Cost of Land | 10,000 |  | 10,000 |  | 8,000 |  | 8,000 |
| Less:  Accumulated Depreciation | 205,000  81,000 |  | 210,000  88,000 |  | 176,000  8,600 |  | 176,000  17,200 |
| Long Term liabilities | 120,000 |  | 115,000 |  | 152,000 |  | 146,000 |
| Total Equity | 201,000   1. 4,000 |  | 203,000   1. 7,000 |  | 160,600  (a)15,400 |  | 163,200  (b)12,800 |

Add the total equity from the beginning of the period (a) and the end of the period (b) and divide that sum by 2 to determine the average net equity for each program.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Program 1** |  | **Program 2** |
| Balance at the Beginning Period (a) | 4,000 |  | 15,400 |
| Balance at the End of the Period (b) | 7,000 |  | 12,800 |
|  | 11,000 ÷ 2 |  | 28,200 ÷ 2 |
| Average Net Equity | 5,500 |  | 14,100 |