Attachment A.3

Mental Health Triage Personnel Grant
Annual Fiscal Report

County: TRINITY

Fiscal Year: 2013/2014

Date:

	Total Hours Worked	County Staff FTEs	County Staff	Contract Staff FTEs	Contract Staff
A. Expenditures					
1. Personnel Expenditures (Staff Title)					
a. Peer Specialist	910	1.5	$ 15,129		$
b. BH Case Manager II	867.33332	3	$ 19,481		$
c. MH Clinician II	322.66666	0.5	$ 7,467		$
d.			$		$
e.			$		$
f.			$		$
g.			$		$
h.					$
i.			$		$
Total FTEs and Salaries		**5**	**$ 42,077**		**$**
Total Employee Benefits			**$ 38,590**		**$**
2. Total Personnel Expenditures					**$ 80,667**
3. Evaluation					$ 1,500
4. Direct					$ -
5. Indirect					$ 9,178
6. County Administration Expenditures					$ 5,120
7. Subtotal (Personnel, Evaluation, Admin)					**$ 96,465**
B. Received Revenues					
1. Medi-Cal (FFP Only)					$ 5,879
2. Other Revenue					$ 29,889
3. Total Revenue					**$ 35,768**
C. Grant Funding					
1. Total Awarded					$ 60,697
2. Total Spent					$ 60,697
3. Total Unspent					**$ -**
D. Interest Earned					$

15,129.00
19,481.00
7,467.00
42,077.00

0.00

42,077.00
38,590.00
80,667.00

0.00

80,667.00
1,500.00
9,178.00
5,120.00
96,465.00

0.00

96,465.00
5,879.00
29,889.00
60,697.00

X [signature] 6/3/15
Signature of Mental Health/Behavioral Health Director or De Date

X [signature] 6/12/15
Signature of County Auditor/Controller Date

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Annual Fiscal Report

County: TRINITY

Fiscal Year: 2013/2014

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Total Employee Benefits			$ 38,590		$
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2. Total Spent					$ 60,697
3. Total Unspent					$ -
D. Interest Earned					$

X [signature] MFT 6/2/15 — Signature of Mental Health/Behavioral Health Director or D Date

X [signature] — Signature of County Auditor/Controller

6/12/15 — Date