

Region C Workforce Development Board
WORKFORCE INNOVATION & OPPORTUNITY ACT (WIOA)
BUDGET SUMMARY

CONTRACTOR: Cleveland County Schools

PROGRAM (FUND): 0

PROGRAM YEAR: 2020-2021

CONTRACTOR-ADMINISTRATIVE COSTS:

| | | |
|---|----|-----------|
| STAFF SALARIES | \$ | 95,457.72 |
| STAFF PAYROLL EXPENSE & FRINGE BENEFITS | \$ | 42,973.81 |
| OPERATING/OCCUPANCY COSTS | \$ | 1,100.00 |
| PROGRAM DEVELOPMENT | \$ | 2,275.00 |
| STAFF TRAVEL | \$ | 4,099.24 |
| EQUIPMENT & PROPERTY | \$ | 1,200.00 |

CONTRACTOR - PARTICIPANT COSTS:

| | | |
|-----------------------------|----|------------|
| PARTICIPANT EDUCATION COSTS | \$ | 6,400.00 |
| PARTICIPANT FRINGE BENEFITS | \$ | 11,335.50 |
| PARTICIPANT SUPPORT COSTS | \$ | 11,314.00 |
| PARTICIPANT WORK EXPERIENCE | \$ | 114,600.00 |
| INDIRECT PROGRAM COSTS | \$ | 5,815.11 |

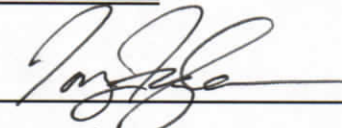
TOTAL STAFF & PARTICIPANT COSTS \$ 296,570.37

PROGRAM PROFIT ALLOCATION \$ -
(For-Profit Program Operators Only)

GRAND TOTAL PROGRAM COST \$ 296,570.37

Contractor - Authorized Signature: _____

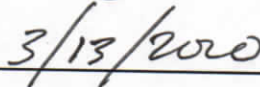
Date: _____


3/13/2020

Approved By - Authorized Signature:

A handwritten signature in black ink, appearing to be 'PJL', written over a horizontal line.

Date:

A handwritten date '3/13/2020' in black ink, written over a horizontal line.

CONTRACTOR: Cleveland County Schools

PROGRAM (FUND): _____

PROGRAM YEAR: 2020-2021

STAFF SALARIES:

| PROGRAM POSITION/TITLE | EMPLOYEE NAME/NUMBER | MONTHLY SALARY | % OF TIME APPLIED-PROG | MONTHS APPLIED-PROG | TOTAL SALARY APPLIED TO PROG. |
|------------------------|----------------------|----------------|------------------------|---------------------|-------------------------------|
| Dan McCabe | | \$ 3,909.88 | 100% | 12 | \$ 46,918.56 |
| Kiley Stubbiefield | | \$ 3,909.88 | 100% | 12 | \$ 46,918.56 |
| Lon Gardner | | \$ 135.05 | 100% | 12 | \$ 1,620.60 |
| | | \$ - | 0% | 0 | \$ - |
| | | \$ - | 0% | 0 | \$ - |
| | | \$ - | 0% | 0 | \$ - |
| | | \$ - | 0% | 0 | \$ - |
| | | \$ - | 0% | 0 | \$ - |
| | | \$ - | 0% | 0 | \$ - |
| | | \$ - | 0% | 0 | \$ - |
| | | \$ - | 0% | 0 | \$ - |
| | | \$ - | 0% | 0 | \$ - |
| | | \$ - | 0% | 0 | \$ - |
| | | \$ - | 0% | 0 | \$ - |
| | | \$ - | 0% | 0 | \$ - |
| | | \$ - | 0% | 0 | \$ - |
| | | \$ - | 0% | 0 | \$ - |
| | | \$ - | 0% | 0 | \$ - |
| | | \$ - | 0% | 0 | \$ - |
| | | \$ - | 0% | 0 | \$ - |
| TOTAL | | | | | \$ 95,457.72 |

PAYROLL EXPENSE & FRINGE BENEFITS:

| | | | |
|------------------------|-------------|-------|--|
| FICA | \$ 7,302.52 | 7.65% | |
| OTHER PAYROLL TAXES | \$ - | | <i>*Insert percentage rate if applicable</i> |
| WORKERS COMP INSURANCE | \$ 1,909.15 | 2.00% | <i>*Insert percentage rate if applicable</i> |
| UNEMPLOYMENT INSURANCE | \$ - | | |

*Payroll Expense & Fringe Benefits - Continued to page (2)

HEALTH INSURANCE:

| EMPLOYEE NAME/NUMBER | INS. PREMIUM - MTH RATE | % OF PROG TIME | MONTHS-PROG TIME | TOTAL |
|-------------------------------------|-------------------------|----------------|------------------|---------------------|
| 0 | \$ 554.00 | 100% | 12 | \$ 6,648.00 |
| 0 | \$ 554.00 | 100% | 12 | \$ 6,648.00 |
| 0 | \$ - | 100% | 12 | \$ - |
| 0 | \$ - | 0% | 0 | \$ - |
| 0 | \$ - | 0% | 0 | \$ - |
| 0 | \$ - | 0% | 0 | \$ - |
| 0 | \$ - | 0% | 0 | \$ - |
| 0 | \$ - | 0% | 0 | \$ - |
| 0 | \$ - | 0% | 0 | \$ - |
| 0 | \$ - | 0% | 0 | \$ - |
| 0 | \$ - | 0% | 0 | \$ - |
| 0 | \$ - | 0% | 0 | \$ - |
| 0 | \$ - | 0% | 0 | \$ - |
| 0 | \$ - | 0% | 0 | \$ - |
| 0 | \$ - | 0% | 0 | \$ - |
| 0 | \$ - | 0% | 0 | \$ - |
| 0 | \$ - | 0% | 0 | \$ - |
| 0 | \$ - | 0% | 0 | \$ - |
| 0 | \$ - | 0% | 0 | \$ - |
| 0 | \$ - | 0% | 0 | \$ - |
| 0 | \$ - | 0% | 0 | \$ - |
| 0 | \$ - | 0% | 0 | \$ - |
| TOTAL GROUP HEALTH INSURANCE | | | TOTAL | \$ 13,296.00 |

PARTICIPANT COSTS

PARTICIPANT EDUCATION COSTS:

| | NUMBER OF PARTICIPANTS | COST PER PARTICIPANT | TOTAL |
|---|------------------------|----------------------|--------------------|
| TUITION, BOOKS & FEES | 4 | \$ 1,500.00 | \$ 6,000.00 |
| STUDENT SUPPLIES (Ex: Nursing Uniforms) | 0 | \$ - | \$ - |
| STUDENT INSURANCE | 0 | \$ - | \$ - |
| INSTRUCTIONAL MATERIALS | 4 | \$ 100.00 | \$ 400.00 |
| OTHER: | 0 | \$ - | \$ - |
| TOTAL | | | \$ 6,400.00 |

PARTICIPANT WORK EXPERIENCE/PAYROLL COSTS:

| | NUMBER OF PARTICIPANTS | TOTAL PROG WORK HOURS | RATE PER HOUR | TOTAL |
|------------------------------|------------------------|-----------------------|---------------|----------------------|
| ADULT | 0 | 0 | \$ - | \$ - |
| DISLOCATED WORKER | 0 | 0 | \$ - | \$ - |
| YOUTH (IN-SCHOOL) 14 - 17 | 15 | 250 | \$ 8.00 | \$ 30,000.00 |
| YOUTH (OUT OF SCHOOL) 16-17 | 20 | 235 | \$ 8.00 | \$ 37,600.00 |
| YOUTH (OUT OF SCHOOL) 18 -24 | 25 | 235 | \$ 8.00 | \$ 47,000.00 |
| OTHER: | 0 | 0 | \$ - | \$ - |
| TOTAL | | | | \$ 114,600.00 |

PARTICIPANT FRINGE BENEFITS:

| | | | |
|-----------------------|-------------|---------------------|---------------------------------------|
| FICA | \$ 7,735.50 | 6.75% | |
| OTHER PAYROLL TAXES | \$ - | 0.00% | *Insert percentage rate if applicable |
| WORKMANS COMPENSATION | \$ 3,600.00 | 2.00% | *Insert percentage rate if applicable |
| HEALTHCARE | \$ - | | |
| OTHER: | \$ - | *SPECIFY COST | *Attach Detailed Itemization |
| TOTAL | | \$ 11,335.50 | |

PARTICIPANT SUPPORT COSTS:

LIST & DETAIL EACH LINE ITEM:

| | | | | |
|--|-------------|---------------------|--------------------------|------------------------------|
| Example | \$ - | *SPECIFY COST | **Info & Detail attached | *Attach Detailed Itemization |
| Transportation (Mileage Reimbursement) | \$ 2,500.00 | *SPECIFY COST | | *Attach Detailed Itemization |
| Incentives | \$ 5,000.00 | *SPECIFY COST | | *Attach Detailed Itemization |
| Support services | \$ 2,500.00 | *SPECIFY COST | | *Attach Detailed Itemization |
| Operating supplies | \$ 600.00 | *SPECIFY COST | | *Attach Detailed Itemization |
| Insurance | \$ 270.00 | *SPECIFY COST | | *Attach Detailed Itemization |
| Communications | \$ 444.00 | *SPECIFY COST | | *Attach Detailed Itemization |
| | \$ - | *SPECIFY COST | | *Attach Detailed Itemization |
| | \$ - | *SPECIFY COST | | *Attach Detailed Itemization |
| TOTAL | | \$ 11,314.00 | | |

INDIRECT /PROGRAM COSTS:

| | BASE AMOUNT | APPROVED % RATE | TOTAL |
|--------------|---------------|-----------------|--|
| INDIRECT | \$ 290,755.27 | 2% | \$ 5,815.11 *Attach Detailed Itemization |
| TOTAL | | | \$ 5,815.11 |

TOTAL STAFF & PARTICIPANT PROG COS **\$ 296,570.37**

PROGRAM PROFIT ALLOCATION:

(*For-Profit Program Operators Only)

| | | | | |
|---------------------------------|----------------------|-------|-----------------|--|
| | \$ 0.00 | 0.00% | ◀Enter Profit % | **Profit added will be reimbursement with monthly program expenditures - not as lump sum from total program funding. |
| GRAND TOTAL PROGRAM COST | \$ 296,570.37 | | | |

Comments & Other Information:

Pre-Approved Program Operator Allocation \$ -