

COUNTY DISABILITIES AND SPECIAL NEEDS BOARDS
SUPPLEMENTAL SCHEDULE OF REVENUE AND EXPENSES
 For the Fiscal Year Ended June 30, 20____

Program Revenues

Federal

HUD HAP
 SCDOT
 DOL
 FEMA
 USDA CACFP
 SCDD Council

Total Federal

State

DDSN:
 Program Revenue
 Less: Waiver Direct Billed
 Less: Medicare Part D
 Waiver Reimbursements

Equipment/Special Grant
 Supplemental Revenue
 DSS Optional State Supplement
 State of SC PEBA Credit

Total State

Local

County
 Contributions
 County ARC
 United Way
 Donations
 Fundraising (Net of direct benefit cost)
 Miscellaneous

Total Local

In-Kind

Rent
 Services
 Supplies
 Equipment

Total In-Kind

**COUNTY DISABILITIES AND SPECIAL NEEDS BOARDS
SUPPLEMENTAL SCHEDULE OF REVENUE AND EXPENSES**

For the Fiscal Year Ended June 30, 20____

Other	
Interest	_____
Vending	_____
Room and Board	_____
Work Activity	_____
Care and Maintenance	_____
Sub-contracted Services	_____
Leased Employees	_____
Miscellaneous	_____
Total Other	_____
Total Program Revenues	=====
Program Expenses	
Personnel	
Employee Salaries	_____
Consumer Wages	_____
Total Personnel	=====
Fringe Benefits	
Health Insurance	_____
Health Insurance – OPEB	_____
Retirement	_____
Retirement – Net Pension Liability	_____
Social Security	_____
Unemployment Insurance	_____
Workers’ Compensation	_____
Other	_____
Total Fringe Benefit	=====
Contractual Services	
Accounting	_____
Cable TV	_____
Consultants	_____
Contracted Third-Party Services	_____
Electric, Gas, Water, and Sewer	_____
Fiscal Agent Respite Care	_____
Fiscal Agent Self-Directed Care	_____
Internet	_____
Legal Fees	_____
Repairs and Maintenance - Building	_____
Repairs and Maintenance - Equipment	_____
Repairs and Maintenance - Motor Vehicle	_____
Telephone - Landline	_____
Telephone - Mobile	_____
Travel	_____
Work Activity	_____
Other	_____
Total Contractual Services	=====

**COUNTY DISABILITIES AND SPECIAL NEEDS BOARDS
SUPPLEMENTAL SCHEDULE OF REVENUE AND EXPENSES**

For the Fiscal Year Ended June 30, 20____

Supplies	
Educational	_____
Food	_____
Household	_____
Maintenance	_____
Medical	_____
Minor Equipment	_____
Motor Vehicle	_____
Office	_____
Other	_____
Total Supplies	=====
Fixed Charges	
Audit Fees	_____
Dues, Subscriptions, and Licenses	_____
Insurance - Individual	_____
Insurance - Real Property	_____
Insurance - Equipment	_____
Insurance - Tort Liability	_____
Insurance - Other	_____
Lease – Real Property	_____
Lease – Equipment	_____
Lease – Motor Vehicle	_____
Other	_____
Total Fixed Charges	=====
Capital	
Amortization	_____
Amortization of lease	_____
Depreciation	_____
Interest	_____
Other	_____
Total Capital	=====
Allocated Costs	
Administration	_____
Building Maintenance	_____
Day Program	_____
Shared Facility	_____
Residential Management	_____
Transportation	_____
Total Allocated Costs	=====
Total Expenses	
Net Program Revenue (Expense)	_____
Non-Program Revenues (Expenses)	_____
Gain (Loss) on Retirement of Capital Assets	_____
Current Year Anticipated Settlements on Contracts	_____
Prior Year Settlements on Contracts	_____
Total Non-Program Revenues (Expenses)	=====
Change in Net Position	_____