

HICAP BUDGET - SUMMARY (All Years)

CONTRACT NO: HI 1718-25

BUDGET PERIOD: 7/1/2017 - 6/30/20		<input checked="" type="checkbox"/> ORIGINAL <input type="checkbox"/> REVISION #		SUBMISSION DATE: 4/13/17		PSA No: 25	
COST CATEGORY	Federal Funds	State Funds		Local Funds	TOTAL FUNDS		
AAA ADMINISTRATION	HICAP Federal Admin	HICAP Reimb. Admin	HICAP Fund Admin	Program Income / Other Funds	TOTAL		
Personnel	0	71,328	35,643	0	106,971		
Operating Expenses	0	0	0	0	0		
Indirect Admin	0	0	0	0	0		
TOTAL HICAP ADMINISTRATION	0	71,328	35,643	0	106,971		
HICAP PROGRAM	HICAP Federal Program	HICAP Reimb. Program	HICAP Fund Program	Program Income / Other Funds	TOTAL FUNDS		
Direct Services	0	0	0	0	0		
Subcontractor Subrecipient Services	685,513	804,839	402,313	0	1,892,665		
TOTAL HICAP PROGRAM	685,513	804,839	402,313	0	1,892,665		
TOTAL HICAP BUDGET	685,513	876,167	437,956	0	1,999,636		

HICAP Legal Representation Services are provided: Yes
 [W&I Code, Section 9541 (c) (3)]

Amount Budgeted: \$ 189267

Payment Method: Reimbursement Request for Funds

HHS Approved Indirect Cost Rate(s):

FOR STATE USE ONLY

AAA-BASED TEAM / FISCAL SPECIALIST

DATE

TEAM COACH

DATE

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AAA ADMINISTRATION BUDGET - FEDERAL & LOCAL FUNDS

CONTRACT NO: HI 1718-25

BUDGET PERIOD: 7/1/2017 - 6/30/2018		[X] ORIGINAL [] REVISION #		SUBMISSION DATE: 4/13/2017		PSA No: 25	
PERSONNEL		Monthly	Total Annual FTE	9 Month	3 Month	Local Funds	TOTAL
Position Classification:	Wage Rate	FTE	% of Time Worked	Salaries & Wages	Salaries & Wages	Salaries & Wages	
							0
							0
							0
							0
							0
							0
							0
							0
							0
							0
TOTAL SALARIES & WAGES				0	0	0	0
STAFF BENEFITS							0
TOTAL PERSONNEL				0	0	0	0
OPERATING EXPENSES				9 Month	3 Month	Local Funds	TOTAL
Rent:	Sq ft:		Sq ft Rate/mo.:				0
*Equipment (List Item below):				Quantity			0
							0
							0
							0
							0
							0
							0
TOTAL OPERATING EXPENSES				0	0	0	0
INDIRECT COSTS							0
TOTAL FEDERAL & LOCAL ADMINISTRATION				0	0	0	0

* Equipment exceeding \$500 must be reported on Property page
 For questions or accessibility assistance with this financial document, please contact CDAFiscalTeam@aging.ca.gov.

AAA ADMINISTRATION BUDGET - STATE & LOCAL FUNDS (12 MONTH)

CONTRACT NO: HI 1718-25						
BUDGET PERIOD: 7/1/2017 - 6/30/2018	[X] ORIGINAL [] REVISION #	SUBMISSION DATE: 4/13/2017	PSA No: 25			
PERSONNEL	Monthly Wage Rate FTE	Total Annual FTE % of Time Worked	HICAP Reimb. Salaries & Wages	HICAP Fund Salaries & Wages	Local Funds Salaries & Wages	TOTAL
Senior Management Analyst I	9,873	7.00%	8,000	1,000		9,000
Management Analyst	8,359	21.00%	13,000	9,000		22,000
Accountant II	6,558	5.00%	2,776	1,881		4,657
						0
						0
						0
						0
						0
TOTAL SALARIES & WAGES			23,776	11,881	0	35,657
STAFF BENEFITS						0
TOTAL PERSONNEL			23,776	11,881	0	35,657
OPERATING EXPENSES			HICAP Reimb.	HICAP Fund	Local Funds	TOTAL
Rent:	Sq ft:	Sq ft Rate (mo.):				0
*Equipment (List Item below)		Quantity				0
						0
						0
						0
						0
						0
Travel:						0
Other Operating Expenses (List):						0
						0
						0
						0
						0
						0
TOTAL OPERATING EXPENSES			0	0	0	0
INDIRECT COSTS						0
TOTAL STATE & LOCAL ADMINISTRATION			23,776	11,881	0	35,657

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HICAP DIRECT SERVICES BUDGET - FEDERAL & LOCAL FUNDS

CONTRACT NO: HI 1718-25

BUDGET PERIOD: 7/1/2017 - 6/30/2018		[X] ORIGINAL [] REVISION #	SUBMISSION DATE: 4/13/2017		PSA No: 25	
PERSONNEL		Monthly	Total Annual FTE	9 Month	3 Month	Local Funds
Position Classification:		Wage Rate FTE	% of Time Worked	Salaries & Wages	Salaries & Wages	Salaries & Wages
						TOTAL
						0
						0
						0
						0
						0
						0
						0
						0
						0
TOTAL SALARIES & WAGES				0	0	0
STAFF BENEFITS						0
TOTAL PERSONNEL				0	0	0
OPERATING EXPENSES				9 Month	3 Month	Local Funds
Rent:	Sq ft:		Sq ft Rate (mo.):			TOTAL
*Equipment (List Item below):			Quantity			0
						0
						0
						0
						0
						0
TOTAL OPERATING EXPENSES				0	0	0
INDIRECT COSTS						0
TOTAL FEDERAL & LOCAL DIRECT SERVICES				0	0	0

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AAA DIRECT SERVICES BUDGET - STATE & LOCAL FUNDS (12 MONTH)

CONTRACT NO: HI 1718-25						
BUDGET PERIOD: 7/1/2017 - 6/30/2018	<input checked="" type="checkbox"/> ORIGINAL <input type="checkbox"/> REVISION #		SUBMISSION DATE: 4/13/2017	PSA No: 25		
PERSONNEL	Monthly Wage Rate FTE	Total Annual FTE % of Time Worked	HICAP Reimb. Salaries & Wages	HICAP Fund Salaries & Wages	Local Funds Salaries & Wages	TOTAL
Position Classification:						0
						0
						0
						0
						0
						0
						0
						0
						0
TOTAL SALARIES & WAGES			0	0	0	0
STAFF BENEFITS						0
TOTAL PERSONNEL			0	0	0	0
OPERATING EXPENSES			HICAP Reimb.	HICAP Fund	Local Funds	TOTAL
Rent:	Sq ft:	Sq ft Rate (mo.):				0
*Equipment (List Item below):		Quantity				0
						0
						0
						0
						0
						0
Travel (describe):						0
Other Operating Expenses (List below):						0
						0
						0
						0
						0
						0
						0
TOTAL OPERATING EXPENSES			0	0	0	0
INDIRECT COSTS						0
TOTAL STATE & LOCAL DIRECT SERVICES			0	0	0	0

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HICAP SUBCONTRACTOR SUBRECIPIENT SERVICES SCHEDULE - 12 Month

CONTRACT NO: HI 1718-25

BUDGET PERIOD: 7/1/2017 - 6/30/2018	[X] ORIGINAL [] REVISION #		SUBMISSION DATE: 4/13/2017		PSA No: 25	
SubContractors Subrecipients	HICAP 9 Month Federal Funds	HICAP 3 Month Federal Funds	HICAP Reimbursement Program	HICAP Fund Program	Program Income and Other Local Funds	TOTAL CONTRACTED SERVICES
Name: Center for Health Care Rights	172,199	62,052	268,279	134,105		636,635
Address: 520 S. La Fayette Park Pl., LA, CA						
Telephone: (213) 383-4519						
Contact Person: Ms. Aileen Harper						
Name:						0
Address:						
Telephone:						
Contact Person:						
Name:						0
Address:						
Telephone:						
Contact Person:						
Name:						0
Address:						
Telephone:						
Contact Person:						
TOTAL HICAP CONTRACTED SERVICES	172,199	62,052	268,279	134,105	0	636,635

Budget Contracted expenses from all funding sources

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HICAP PROPERTY/EQUIPMENT BUDGETED

CONTRACT NO: HI 1718-25

BUDGET PERIOD: 7/1/2017 - 6/30/2018		[X] ORIGINAL [] REVISION #		SUBMISSION DATE: 4/13/2017		PSA No: 25	
ITEM DESCRIPTION	EXPECTED ACQUIRE DATE	Purpose/Justification	Per Unit Cost	FUNDING USED Select from dropdown	HICAP COST		
AAA ADMIN EQUIPMENT		Include all property with a unit cost exceeding \$500					
				HICAP Federal			
				HICAP Reimb.			
				HICAP Fund			
				None			
				None			
					AAA ADMINISTRATION - EQUIPMENT PURCHASES TOTAL		0
AAA DIRECT PROGRAM EQUIPMENT		Include all property with a unit cost exceeding \$500					
				HICAP Federal			
				None			
				None			
				None			
				None			
					AAA DIRECT PROGRAM - EQUIPMENT PURCHASES TOTAL		0
					TOTAL AAA EQUIPMENT PURCHASES		0
SUBCONTRACTOR SUBRECIPIENT EQUIPMENT		Include all property with a unit cost exceeding \$500					
				HICAP Reimb.			
				None			
				None			
				None			
				None			
				None			
				None			
				None			
					SUBRECIPIENT CONTRACTOR EQUIPMENT PURCHASES TOTAL		0
					TOTAL EQUIPMENT PURCHASES BUDGETED		0

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AAA ADMINISTRATION BUDGET - FEDERAL & LOCAL FUNDS

CONTRACT NO: HI 1718-25

BUDGET PERIOD: 7/1/2018 - 6/30/2019		[X] ORIGINAL [] REVISION #		SUBMISSION DATE: 4/13/2017		PSA No: 25	
PERSONNEL		Monthly	Total Annual FTE	9 Month	3 Month	Local Funds	TOTAL
Position Classification:		Wage Rate FTE	% of Time Worked	Salaries & Wages	Salaries & Wages	Salaries & Wages	
							0
							0
							0
							0
							0
							0
							0
							0
							0
							0
							0
TOTAL SALARIES & WAGES				0	0	0	0
STAFF BENEFITS							0
TOTAL PERSONNEL				0	0	0	0
OPERATING EXPENSES				9 Month	3 Month	Local Funds	TOTAL
Rent:	Sq ft:	Sq ft Rate/mo.:					0
*Equipment (List Item below):			Quantity				0
							0
							0
							0
							0
							0
							0
Travel:							0
Other Operating Expenses (List below):							0
							0
							0
							0
							0
							0
							0
							0
TOTAL OPERATING EXPENSES				0	0	0	0
INDIRECT COSTS							0
TOTAL FEDERAL & LOCAL ADMINISTRATION				0	0	0	0

* Equipment exceeding \$500 must be reported on Property page
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AAA ADMINISTRATION BUDGET - STATE & LOCAL FUNDS (12 MONTH)

CONTRACT NO: HI 1718-25

BUDGET PERIOD: 7/1/2018 - 6/30/2019		<input checked="" type="checkbox"/> ORIGINAL	<input type="checkbox"/> REVISION #	SUBMISSION DATE: 4/13/2017		PSA No: 25		
PERSONNEL			Monthly Wage Rate FTE	Total Annual FTE % of Time Worked	HICAP Reimb. Salaries & Wages	HICAP Fund Salaries & Wages	Local Funds Salaries & Wages	TOTAL
Position Classification:								
Senior Management Analyst I			10,096	7.00%	8,000	1,000		9,000
Management Analyst			8,547	21.00%	13,000	9,000		22,000
Accountant II			6,706	5.00%	2,776	1,881		4,657
								0
								0
								0
								0
								0
TOTAL SALARIES & WAGES					23,776	11,881	0	35,657
STAFF BENEFITS								0
TOTAL PERSONNEL					23,776	11,881	0	35,657
OPERATING EXPENSES					HICAP Reimb.	HICAP Fund	Local Funds	TOTAL
Rent:	Sq ft:		Sq ft Rate (mo.):					0
*Equipment (List Item below):				Quantity				0
								0
								0
								0
								0
								0
Travel:								0
Other Operating Expenses (List):								0
								0
								0
								0
								0
								0
								0
TOTAL OPERATING EXPENSES					0	0	0	0
INDIRECT COSTS								0
TOTAL STATE & LOCAL ADMINISTRATION					23,776	11,881	0	35,657

* Equipment exceeding \$500 must be reported on Property page

HICAP DIRECT SERVICES BUDGET - FEDERAL & LOCAL FUNDS

CONTRACT NO: HI 1718-25

BUDGET PERIOD: 7/1/2018 - 6/30/2019		[X] ORIGINAL [] REVISION #	SUBMISSION DATE: 4/13/2017		PSA No: 25		
PERSONNEL		Monthly	Total Annual FTE	9 Month	3 Month	Local Funds	
Position Classification:	Wage Rate	FTE	% of Time Worked	Salaries & Wages	Salaries & Wages	Salaries & Wages	TOTAL
							0
							0
							0
							0
							0
							0
							0
							0
							0
TOTAL SALARIES & WAGES				0	0	0	0
STAFF BENEFITS							0
TOTAL PERSONNEL				0	0	0	0
OPERATING EXPENSES				9 Month	3 Month	Local Funds	TOTAL
Rent:	Sq ft:		Sq ft Rate (mo.):				0
*Equipment (List Item below):			Quantity				0
							0
							0
							0
							0
							0
Travel:							0
Other Operating Expenses (List):							0
							0
							0
							0
							0
							0
TOTAL OPERATING EXPENSES				0	0	0	0
INDIRECT COSTS							0
TOTAL FEDERAL & LOCAL DIRECT SERVICES				0	0	0	0

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AAA DIRECT SERVICES BUDGET - STATE & LOCAL FUNDS (12 MONTH)

CONTRACT NO: HI 1718-25

BUDGET PERIOD: 7/1/2018 - 6/30/2019		<input checked="" type="checkbox"/> ORIGINAL <input type="checkbox"/> REVISION #		SUBMISSION DATE: 4/13/2017		PSA No: 25	
PERSONNEL		Monthly	Total Annual FTE	HICAP Reimb.	HICAP Fund	Local Funds	TOTAL
Position Classification:		Wage Rate FTE	% of Time Worked	Salaries & Wages	Salaries & Wages	Salaries & Wages	
							0
							0
							0
							0
							0
							0
							0
							0
TOTAL SALARIES & WAGES				0	0	0	0
STAFF BENEFITS							0
TOTAL PERSONNEL				0	0	0	0
OPERATING EXPENSES				HICAP Reimb.	HICAP Fund	Local Funds	TOTAL
Rent:	Sq ft:		Sq ft Rate (mo.):				0
*Equipment (List Item below)				Quantity			0
							0
							0
							0
							0
							0
Travel (describe):							0
Other Operating Expenses (List below):							0
							0
							0
							0
							0
							0
TOTAL OPERATING EXPENSES				0	0	0	0
INDIRECT COSTS							0
TOTAL STATE & LOCAL DIRECT SERVICES				0	0	0	0

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HICAP SUBCONTRACTOR SUBRECIPIENT SERVICES SCHEDULE - 12 Month

CONTRACT NO: HI 1718-25

BUDGET PERIOD: 7/1/2018 - 6/30/2019	[X] ORIGINAL [] REVISION #		SUBMISSION DATE 4/13/2017		PSA No.	25
SubContractors Subrecipients	HICAP 9 Month Federal Funds	HICAP 3 Month Federal Funds	HICAP Reimbursement Program	HICAP Fund Program	Program Income and Other Local Funds	TOTAL CONTRACTED SERVICES
Name: Center for Health Care Rights	186,155	66,277	268,280	134,104		654,816
Address: 520 S. La Fayette Park Pl., LA, CA						
Telephone: (213) 383-4519						
Contact Person: Ms. Aileen Harper						
Name:						0
Address:						
Telephone:						
Contact Person:						
Name:						0
Address:						
Telephone:						
Contact Person:						
Name:						0
Address:						
Telephone:						
Contact Person:						
TOTAL HICAP CONTRACTED SERVICES	186,155	66,277	268,280	134,104	0	654,816

Budget Contracted expenses from all funding sources

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HICAP PROPERTY/EQUIPMENT BUDGETED

CONTRACT NO: HI 1718-25

BUDGET PERIOD: 7/1/2018 - 6/30/2019		<input checked="" type="checkbox"/> ORIGINAL	<input type="checkbox"/> REVISION #	SUBMISSION DATE: 4/13/2017	PSA No: 25	
ITEM DESCRIPTION	EXPECTED ACQUIRE DATE	Purpose/Justification		Per Unit Cost	FUNDING USED Select from dropdown	HICAP COST
AAA ADMIN EQUIPMENT		Include all property with a unit cost exceeding \$500				
					HICAP Federal	
					HICAP Reimb.	
					HICAP Fund	
					None	
					None	
AAA ADMINISTRATION - EQUIPMENT PURCHASES TOTAL						0
AAA DIRECT PROGRAM EQUIPMENT		Include all property with a unit cost exceeding \$500				
					HICAP Federal	
					None	
					None	
					None	
					None	
AAA DIRECT PROGRAM - EQUIPMENT PURCHASES TOTAL						0
TOTAL AAA EQUIPMENT PURCHASES						0
SUBCONTRACTOR SUBRECIPIENT EQUIPMENT		Include all property with a unit cost exceeding \$500				
					HICAP Reimb.	
					None	
					None	
					None	
					None	
					None	
					None	
					None	
SUBRECIPIENT CONTRACTOR EQUIPMENT PURCHASES TOTAL						0
TOTAL EQUIPMENT PURCHASES BUDGETED						0

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AAA ADMINISTRATION BUDGET - FEDERAL & LOCAL FUNDS

CONTRACT NO: HI 1718-25

BUDGET PERIOD: 7/1/2019 - 6/30/2020		[X] ORIGINAL [] REVISION #		SUBMISSION DATE: 4/13/2017		PSA No: 25	
PERSONNEL		Monthly	Total Annual FTE	9 Month	3 Month	Local Funds	TOTAL
Position Classification:	Wage Rate	FTE	% of Time Worked	Salaries & Wages	Salaries & Wages	Salaries & Wages	
							0
							0
							0
							0
							0
							0
							0
							0
							0
							0
TOTAL SALARIES & WAGES				0	0	0	0
STAFF BENEFITS							0
TOTAL PERSONNEL				0	0	0	0
OPERATING EXPENSES				9 Month	3 Month	Local Funds	TOTAL
Rent:	Sq ft:		Sq ft Rate/mo.:				0
*Equipment (List Item below):				Quantity			0
							0
							0
							0
							0
							0
Travel:							0
Other Operating Expenses (List below):							0
							0
							0
							0
							0
							0
							0
TOTAL OPERATING EXPENSES				0	0	0	0
INDIRECT COSTS							0
TOTAL FEDERAL & LOCAL ADMINISTRATION				0	0	0	0

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AAA ADMINISTRATION BUDGET - STATE & LOCAL FUNDS (12 MONTH)

CONTRACT NO: HI 1718-25

BUDGET PERIOD: 7/1/2019 - 6/30/2020		[X] ORIGINAL [] REVISION #		SUBMISSION DATE: 4/13/2017		PSA No: 25	
PERSONNEL				HICAP Reimb.	HICAP Fund	Local Funds	TOTAL
Position Classification:	Monthly Wage Rate FTE	Total Annual FTE % of Time Worked	Salaries & Wages	Salaries & Wages	Salaries & Wages		
Senior Management Analyst I	10,096	7.00%	8,000	1,000			9,000
Management Analyst	8,547	21.00%	13,000	9,000			22,000
Accountant II	6,706	5.00%	2,776	1,881			4,657
							0
							0
							0
							0
							0
TOTAL SALARIES & WAGES			23,776	11,881	0		35,657
STAFF BENEFITS							0
TOTAL PERSONNEL			23,776	11,881	0		35,657
OPERATING EXPENSES				HICAP Reimb.	HICAP Fund	Local Funds	TOTAL
Rent:	Sq ft:	Sq ft Rate (mo.):					0
*Equipment (List Item below):		Quantity					0
							0
							0
							0
							0
							0
Travel:							0
Other Operating Expenses (List):							0
							0
							0
							0
							0
							0
							0
TOTAL OPERATING EXPENSES			0	0	0		0
INDIRECT COSTS							0
TOTAL STATE & LOCAL ADMINISTRATION			23,776	11,881	0		35,657

* Equipment exceeding \$500 must be reported on Property page

AAA DIRECT SERVICES BUDGET - STATE & LOCAL FUNDS (12 MONTH)

CONTRACT NO: HI 1718-25

BUDGET PERIOD: 7/1/2019 - 6/30/2020		<input checked="" type="checkbox"/> ORIGINAL	<input type="checkbox"/> REVISION #	SUBMISSION DATE: 4/13/2017		PSA No: 25	
PERSONNEL		Monthly	Total Annual FTE	HICAP Reimb.	HICAP Fund	Local Funds	TOTAL
Position Classification:		Wage Rate FTE	% of Time Worked	Salaries & Wages	Salaries & Wages	Salaries & Wages	
							0
							0
							0
							0
							0
							0
							0
							0
							0
TOTAL SALARIES & WAGES				0	0	0	0
STAFF BENEFITS							0
TOTAL PERSONNEL				0	0	0	0
OPERATING EXPENSES				HICAP Reimb.	HICAP Fund	Local Funds	TOTAL
Rent:	Sq ft:		Sq ft Rate (mo.):				0
*Equipment (List Item below):				Quantity			0
							0
							0
							0
							0
							0
Travel (describe):							0
Other Operating Expenses (List below):							0
							0
							0
							0
							0
							0
							0
TOTAL OPERATING EXPENSES				0	0	0	0
INDIRECT COSTS							0
TOTAL STATE & LOCAL DIRECT SERVICES				0	0	0	0

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HICAP SUBCONTRACTOR SUBRECIPIENT SERVICES SCHEDULE - 12 Month

CONTRACT NO: HI 1718-25

BUDGET PERIOD: 7/1/2019 - 6/30/2020	<input checked="" type="checkbox"/> ORIGINAL	<input type="checkbox"/> REVISION #	SUBMISSION DATE: 4/13/2017	PSA No: 25		
SubContractors Subrecipients	HICAP 9 Month Federal Funds	HICAP 3 Month Federal Funds	HICAP Reimbursement Program	HICAP Fund Program	Program Income and Other Local Funds	TOTAL CONTRACTED SERVICES
Name: Center for Health Care Rights	149,121	49,709	268,280	134,104		601,214
Address: 520 S. La Fayette Park Pl., LA, CA						
Telephone: (213) 383-4519						
Contact Person: Ms. Aileen Harper						
Name:						0
Address:						
Telephone:						
Contact Person:						
Name:						0
Address:						
Telephone:						
Contact Person:						
Name:						0
Address:						
Telephone:						
Contact Person:						
TOTAL HICAP CONTRACTED SERVICES	9 MONTH FED. 149,121	3 MONTH FED. 49,709	HICAP REIMB. 268,280	HICAP FUND 134,104	LOCAL FUNDS 0	TOTAL 601,214

Budget Contracted expenses from all funding sources

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HICAP PROPERTY/EQUIPMENT BUDGETED

CONTRACT NO: HI 1718-25

BUDGET PERIOD: 7/1/2019 - 6/30/2020		[X] ORIGINAL [] REVISION #		SUBMISSION DATE: 4/13/2017		PSA No: 25	
ITEM DESCRIPTION	EXPECTED ACQUIRE DATE	Purpose/Justification	Per Unit Cost	FUNDING USED Select from dropdown	HICAP COST		
AAA ADMIN EQUIPMENT		Include all property with a unit cost exceeding \$500					
				HICAP Federal			
				HICAP Reimb.			
				HICAP Fund			
				None			
				None			
AAA ADMINISTRATION - EQUIPMENT PURCHASES TOTAL						0	
AAA DIRECT PROGRAM EQUIPMENT		Include all property with a unit cost exceeding \$500					
				HICAP Federal			
				None			
				None			
				None			
				None			
AAA DIRECT PROGRAM - EQUIPMENT PURCHASES TOTAL						0	
TOTAL AAA EQUIPMENT PURCHASES						0	
SUBCONTRACTOR SUBRECIPIENT EQUIPMENT		Include all property with a unit cost exceeding \$500					
				HICAP Reimb.			
				None			
				None			
				None			
				None			
				None			
				None			
				None			
SUBRECIPIENT CONTRACTOR EQUIPMENT PURCHASES TOTAL						0	
TOTAL EQUIPMENT PURCHASES BUDGETED						0	

For questions or accessibility assistance with this financial document, please contact CDAFiscalTeam@aging.ca.gov