SPECIAL NEEDS REFERENCE MATERIAL

10/01/02

Schedule A	١
Enrollmen	ıt

Developmental Day Care Cost Report for FY 20__ - 20__

Name of Center:

ENROL INFORM		Typically Developing	SPECIAL NEEDS Children	
Month	TOTAL * ENROLLMENT	Children		
July				
August				Total enrollment should = TDC + SNC
September				
October				
November				
December				
January				
February				
March				
April				
May				
June				
TOTAL Child-		_		
Months				

0

DISTRIBUTION PERCENTAGE CALCULATIONS

ADMINISTRATIVE/CLERICAL/FISCAL:

Total Children (from above)

Multiplier	1	2	TOTAL
Sum (Child-Mo. X Multiplier)			0
Percentage Distribution			100.00%
INSTRUCTIONAL/CARE PERSON	NEL:		
Total Children (from above)	0	0	
Multiplier (2, 3, or 4)	1		TOTAL
Sum (Child-Mo. X Multiplier)	0		0
Percentage Distribution			100.00%
FACILITY/OTHER COSTS:			TOTAL
Use "Child-Months"			100.000/
Percentage Distribution			100.00%
Prepared By:			
Address:			
			
Telephone Number:			
	Signed:		

Return to: Karen Takas

Early Intervention Branch

Women's & Children's Health Section Chief

Division of Public Health 3202 Mail Service Center Raleigh, NC 27699-2302 Fax: 919-733-3075

E-mail: Karen.Takas@ncmail.net

^{*}use FTE for children enrolled on a part-time basis; assign a percentage (i.e., half time =. 5)

	SPECIAL NEEDS REFERENCE MATERIAL	10/01/02
Schedule B – Page 1	Developmental Day Cost Report for FY 20 20	
EXPENDITURES	Name of Center:	

	Actual Cost for Twelve (12) Months Ending June 30, 20				
	Total Cost	Typically Developing Children		Amounts Identified for Special Needs Children	
Expenditures By Category		Percentage	Amount	Percentage	Amount
100 Personnel Cost (List All Positions except Trans	portation				
Staff);	1				
120 Salaries & Wages					
121 Salaries & Wages - Regular					
Habilitation Spec					
Habilitation asst (1/2 time)					
Habilitation asst (PRN)					
Habilitation asst (PRN)					
Habilitation asst (PRN)					
Cult total Calarias & Wassa	0.00		0.00		0.00
Sub-total Salaries & Wages Calculate percentage of Total Salaries ->	100.00%		0.00		0.00
170 Board Member Expenses	100.00%				
180 Fringe Benefits 181 Social Security					
181 Social Security 182 Retirement					
182 Kettrement 183 Health Insurance					
184 Disability Insurance Contribution					
186 Worker's Compensation Insurance					
189 Other Fringe Benefits		D: «4-«: h	4. Cb 4.4.1 1	Danadan Danasat	
Sub-Total Board Member & Fringe Benefits	0.00	%	te Sub-totai	Based on Percenta	ige (above)
Sub-Total Board Memoer & Tringe Benefits	0.00	70		70	
190 Professional Services (List by Position/consu	ltant):				
(Contract Personnel)	,				
(23)					
TOTAL PERSONNEL COSTS	0.00		0.00		0.00
	1		,		

^{* -} Example of Costs Exclusively for Special Needs children include speech, Physical and Occupational Therapy, Social work/Case Management for special Needs Children, Psychologist and other diagnostic personnel, specialized equipment (and related maintenance) for communication, mobility, etc.

SUB-TOTAL

SPECIAL NEEDS REFERENCE MATERIAL			
		P EN 20 20	

Schedule B – Page	2
Expenditures	

Developmental Day Care Cost Report for FY 20__ - 20__

Name of Ce	enter:						
Actual Cost for Twelve (12) Months Ending June 30, 20							
	Total Cost			Amounts Identified Or Special Needs Children			
Expenditure By Category		Percentage	Amount	Percentage Amount			
200 Supplies & Materials							
210 Household & Cleaning Supplies							
220 Food & Provisions							
230 Education & Medical Supplies							
240 Construction & Repair Supplies							
250 Vehicle Supplies (Gas, Oil, Tires, etc.)							
260 Office Supplies & Materials							
280 Heating & Utility Supplies							
290 Other Supplies & Materials							
SUB-TOTAL							
300 Current Obligations & Services							
310 Travel & Transportation							
Transportation of Clients:							
Personnel Cost (List All Positions);							
1 210011112 0000 (210011111 000110110);							
Social Security							
Retirement							
Health Insurance							
Disability Insurance Contribution							
Worker's Compensation Insurance							
Other Fringe Benefits							
Total transportation of Children							
311 Staff Travel							
312 Staff Travel Subsistence							
313 Transportation of Clients							
320 Telephone & Postage							
330 Utilities							
340 Printing, Binding, Reproduction							
350 Repairs & Maintenance							
380 Data Processing Services							
390 Other Services							

	SPECIAL NEEDS REFERENCE MATERIAL	10/01/02
Schedule B – Page 3	Developmental Day Care Cost Report for FY 20 20	
Expenditures	Name of Center:	

	Actual Cost for Twelve (12) Months Ending June 30, 20				
	Total Cost			Amounts Identified fo Special Needs Childre	
Expenditures by Category		Percentage	Amount	Percentage	Amount
400 Fixed Charges & Other Expenses					
410 Rental Of Real Property					
430 Rental of Other Equipment					
440 Service & Maintenance Contracts					
450 Insurance & Bonds					
460 Depreciation					
480 Indirect Cost (attach explanation)					
490 Other Fixed/Current Operating Expenses					
Mortgage Payments					
SUB-TOTAL			ı	1	•
500 Capital Outlay					
510 Office Furniture & Equipment					
520 Data Processing Equipment					
530 Education & Medical Equipment					
540 Motor Vehicles					
550 Other Equipment					
570 Land					
580 Building, Structures, Improvements					
SUB-TOTAL					
600 Contracts, Grants, Etc. (List)					
SUB-TOTAL					
800 Transfers, Refunds, Non-Operating (List)					
(include any outside administrative cost & explain basis f	or allocation)				
(· · · · · · · · · · · · · · · · · · ·					
SUB-TOTAL					
GRAND TOTAL					
Total Child Months					
Gross Cost per Child per Month					
Total Revenues from Schedule C					
Net Cost per Child per Month					