Revised: July 2021

Exhibit F

Local DWI Distribution Program

Financial Status Report

			Financial Status Report No.: 3							_
I. A. Program Name	Los Alamos Cou	nty	II. Distribution Re	eceived:		III. Distribution	Balance:]
B. Address:	1000 Central Ave	enue, Suite 300	A. September:		22,375.99	A. Distribution Year To Date:			\$67,693.09	
	Los Alamos, NM	, 87545	B. December:		22,085.12	B. Expenditure	es Year To Date:		\$31,007.41	
			C. March:		23,231.98	C. Expenditure	s This Quarter:		\$7,319.46	
C. Telephone No.:	505-662-8062		D. June:		0.00	D. Distribution	n Balance:		\$36,685.68	36685.68
D. Distribution No.:	22-D-D-16		E. Total Year T	o Date:	67,693.09	IV. Report Peri	od Ending:		31-Mar-22	
		Distr	ibution				In-Kine	d Match		J
Budget Line Items	Approved	Expenditures	Remaining	Expenditures		Approved	Expenditures	Remaining	Expenditures	
	Budget	This Report	Budget	YTD		Budget	This Report	Budget	YTD	
ADMINISTRATIVE*										
Personnel Services						0.00	0.00	0.00	0.00	Per. Serv.
Employee Benefits						0.00	0.00	0.00	0.00	Empl. Ben.
PROGRAM										
Personnel Services	36,040.00	1,166.99	24,635.71	11,404.29		0.00	0.00	0.00	0.00	Per. Serv.
Employee Benefits	10,500.00	267.28	7,235.96	3,264.04		0.00	0.00	0.00	0.00	Empl. Ben.
Travel (In-State)	0.00	0.00	0.00	0.00		0.00	0.00	0.00	0.00	Travel In
Travel (Out-of-State)	0.00	0.00	0.00	0.00		0.00	0.00	0.00	0.00	Travel Out
Supplies	3,815.00	0.00	2,822.04	992.96		1,000.00	0.00	917.49	82.51	Supplies
Operating Costs	11,797.00	901.20	9,218.52	2,578.48		7,950.00	0.00	7,950.00		Operating
Contractual Services	18,348.00	4,983.99	5,580.36	12,767.64		129,000.00	32,540.87	77,595.39	51,404.61	Contractual
Minor Equipment	0.00	0.00	0.00	0.00		0.00	0.00	0.00	0.00	Minor Equip
Capital Purchases	0.00	0.00	0.00	0.00		0.00	0.00	0.00		Cap Purch
TOTALS	80,500.00	7,319.46	49,492.59	31,007.41		137,950.00	32,540.87	86,462.88	51,487.12	J

CERTIFICATION: Under penalty of law, I hereby certify to the best of my knowledge and belief, the above information is correct, expenditures are properly documented, required matching funds have been spent/obligated in the reported amount, and the copies of all required documentation are attached, or on file for review. The documentation for this payment is true and reflects correct copies of the originals. All payment requests listed are not funded by any other funding source. The service provider shall not bill the grantee and another funding source for the same client at the same time.

Program Fiscal Officer (Printed Name and Title)

Program Fiscal Officer (Signature)

Date

Program Representative (Signature)

Program Representative (Printed Name and Title)

Date

(DFA/Local Government Division Use Only)

Local Government Division Fiscal Officer

Date

Local Government Division Program Manager

Date

LOCAL DWI DISTRIBUTION PROGRAM

Distribution Program Financial Status Report Breakdown By Component

Program: <u>#REF!</u>	Total Distribution Reported This Quarter	7,319.46
Dist No.: Los Alamos County	Total In-Kind Match This Quarter	32,540.87
Report No 3	Total Expenditures Reported This Quarter	39,860.33

Distribution:

		Budget	This Report	Remaining Budget	Expenditures YTD
Prevention		29,832.00	5,885.19	14,619.60	15,212.40
Enforcement		3,840.00		2,669.59	1,170.41
Screening		0.00		0.00	0.00
Treatment:Outpatient/Jailbased		0.00		0.00	0.00
Compliance Monitoring/Tracking		16,500.00	1,434.27	11,382.22	5,117.78
Coor, Plan & Eval		30,328.00		20,821.18	9,506.82
Alternative Sentencing		0.00		0.00	0.00
	Totals:	80,500.00	7,319.46	49,492.59	31,007.41

In-Kind Match:							Additional
		<u>Budget</u>	This Report	Remaining Budget	Expenditures YTD		In-Kind/Match
Prevention		136,950.00	32,540.87	85,545.39	51,404.61		
Enforcement	_	0.00	-	0.00	0.00	_	
Screening	_	0.00	-	0.00	0.00	_	
Treatment:Outpatient/Jailbased	_	0.00	-	0.00	0.00	_	
Compliance Monitoring/Tracking	_	1,000.00		917.49	82.51	_	
Coor, Plan & Eval	_	0.00		0.00	0.00	-	
Alternative Sentencing	_	0.00		0.00	0.00	-	
	Totals:	137,950.00	32,540.87	86,462.88	51,487.12	=	0.00
							Checks:
			Total Expe	enditures This Period:	39,860.33	\leftrightarrow	39,860.33
			Total Expe	82,494.53	\leftrightarrow	82,494.53	
			Total Additional In-Kin	d Match Year to Date:	0.00	-	

I hereby certify to the best of my knowledge and belief, the above information is correct, expenditures are properly documented, required matching funds have been spent/obligated in the reported amount, and the copies of all required documentation are attached. The documentation for this payment is true and reflects correct copies of the originals. All payment requests listed are not funded by any other funding source. The service provider shall not bill the grantee and another funding source for the same client at the same time.

Program Representative (Signature)

Title

Date

Exhibit F (1)

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LOCAL DWI GRANT PROGRAM Request For Payment/Financial Status Report

								Paym	ent Request No.:	3	_
I. A. Grantee:	Incorporated Cou	nty of Los Alamos			П.	Payment	:				
B. Address:	1000 Central Ave	., Suite 130				A. Grant	t Award:			\$35,455.00	
	Los Alamos, NM	87544				B. Fund	Is Received To	Date:		\$10,628.67	
						C. Amou	unt Requested [·]	This Payment:		\$8,802.00	
C. Telephone No.:	505-662-8062					D. Gran	t Balance:			\$16,024.33	16,024.33
D. Grant No.:	22-D-G-16 Amen	dment #1			III.	Report P	Period Ending:			31-Mar-22	
		Gi	rant					In-Kin	d Match		Ĩ
Budget Line Items	Approved	Expenditures	Remaining	Total YTD			Approved	Expenditures	Remaining	Total YTD	
	Budget	This Request	Budget	Expenditures			Budget	This Request	Budget	Expenditures	
ADMINISTRATIVE											
Personnel Services							0.00	0.00	0.00	0.00	Per. Serv.
Employee Benefits							0.00	0.00	0.00	0.00	Empl. Ben.
PROGRAM											
Personnel Services	0.00	0.00	0.00	0.00			0.00	0.00	0.00	0.00	Per. Serv.
Employee Benefits	0.00	0.00	0.00	0.00			0.00	0.00	0.00	0.00	Empl. Ben.
Travel (In-State)	0.00	0.00	0.00	0.00			0.00	0.00	0.00		Travel In
Travel (Out-of-State)	16,000.00	1,000.00	8,185.33	,			0.00	0.00	0.00	0.00	Travel Out
Supplies	2,455.00	2,455.00	0.00	2,455.00			0.00	0.00	0.00		Supplies
Operating Costs	2,000.00	0.00	2,000.00	0.00			5,046.00	2,025.32	3,020.68		Operating
Contractual Services	15,000.00	5,347.00	5,839.00	9,161.00			0.00	0.00	0.00		Contractual
Minor Equipment	0.00	0.00	0.00	0.00			0.00	0.00	0.00		Minor Equip.
Capital Purchases	0.00	0.00	0.00	0.00			0.00	0.00	0.00		Capital Purch
TOTALS	35,455.00	8,802.00	16,024.33	19,430.67			5,046.00	2,025.32	3,020.68	2,025.32	J

CERTIFICATION: Under penalty of law, I hereby certify to the best of my knowledge and belief, the above information is correct, expenditures are properly documented, required matching funds have been spent/obligated in the reported amount, and the copies of all required documentation are attached, or on file for review. The documentation for this payment is true and reflects correct copies of the originals. All payment requests listed are not funded by any other funding source. The service provider shall not bill the grantee and another funding source for the same client at the same time.

(DFA/Local Government Division Use Only)

Grantee Fiscal Officer (Printed Name and Title)

Grantee Representive (Printed Name and Title)

Grantee Fiscal Officer (Signature)

Date

Grantee Representive (Signature)

Date

Local Government Division Fiscal Officer

Date

Local Government Division Program Manager

Date

Exhibit D

LOCAL DWI GRANT PROGRAM **Request for Payment/Financial Status Report**

Breakdown By Component

Grantee:	Incorporated County of Los Alamos	Total Grant Funds Requested This Request:	8,802.00
Grant No.:	22-D-G-16 Amendment #1	Total In-Kind Match This Request:	2,025.32
Request No. 3		Total Expenditures Reported This Request:	10,827.32

Grant:

	<u>Budget</u>	<u>This Request</u>	Remaining Budget	Expenditures YTD
Prevention	20,455.00	3,455.00	10,185.33	10,269.67
Enforcement	0.00	0.00	0.00	0.00
Screening	0.00	0.00	0.00	0.00
Treatment: Outpatient/Jailbased	15,000.00	5,347.00	5,839.00	9,161.00
Compliance Monitoring/Tracking	0.00	0.00	0.00	0.00
Coordination, Planning & Evaluation	0.00	0.00	0.00	0.00
Alternative Sentencing	0.00	0.00	0.00	0.00
Tot	als: 35,455.00	8,802.00	16,024.33	19,430.67

In-Kind Match:

		Budget		This Request	Remaining Budget	Expenditures YT	<u>)</u>	In-Kind Match
Prevention		5,046.00		2,025.32	3,020.68	2,025.32		
Enforcement	_	0.00		0.00	0.00	0.00		. <u></u>
Screening	_	0.00		0.00	0.00	0.00		. <u></u>
Treatment: Outpatient/Jailbased	_	0.00		0.00	0.00	0.00		
Compliance Monitoring/Tracking	_	0.00		0.00	0.00	0.00		
Coordination, Planning & Evaluation	_	0.00		0.00	0.00	0.00		
Alternative Sentencing	_	0.00		0.00	0.00	0.00		
	Totals:	5,046.00		2,025.32	3,020.68	2,025.32		0.00
			_			10.827.32		Checks:
			Total Expenditures This Reimbursement:				\leftrightarrow	10,827.32
				Total Expe	enditures Year to Date:	21,455.99	\leftrightarrow	21,455.99

Total Expenditures Year to Date: Total Additional In-Kind Match Year to Date:

I hereby certify to the best of my knowledge and belief, the above information is correct, expenditures are properly documented, required matching funds have been spent/obligated in the reported amount, and the copies of all required documentation are attached. The documentation for this payment is true and reflects correct copies of the originals. All payment requests listed are not funded by any other funding source. The service provider shall not bill the grantee and another funding source for the same client at the same time.

Grantee Representive (Signature)

Title

Date

0.00

Exhibit D (1) 0

Additional