

Moderate Needs Flexible Funds Excel Budget Worksheet (CFC MOD 906 02/2015)

Participant Name:			Date of Birth:	
Surrogate (If applicable):			Relationship:	
Service Authorization Start Date:		End Date:		

Goals related to services:

<u>Running Totals:</u>	<u>Maximum</u>	<u>Budgeted</u>	<u>Available</u>
Year	\$3,500	\$0	\$3,500
Monthly	\$292	\$0	\$292
Bi-Weekly	\$135	\$0	\$135

Identify Goods & Services and Self-Hired services based on participant goals and assessed needs.

A. Goods & Services	# Units/Year	Cost per Unit	Annual Cost
#1.			\$0
#2.			\$0
#3.			\$0
#4.			\$0
#5.			\$0
Total Year:			\$0

B. ARIS Self-Hire Attendant	# Hours/2wks	Hourly Wage	Annual Cost
#1.			\$0
#2.			\$0
#3.			\$0
#4.			\$0
#5.			\$0
Total Wages/Year:			\$0

Hourly wage = no less than \$10.80/hr and no more than \$19.38. Annual cost column = hourly wage X 13.3% unemploy/workers comp insurance)

C. ARIS Fiscal ISO Cost/Month	# Months/Year	Cost per Mon.	Annual Cost
		\$38.00	\$0

D. Admin Fee	# Months/Year	Cost per Mon.	Annual Cost
Admin fee to the case management agency for processing payments.		\$25	\$0

Signatures:

_____	_____	_____	_____
Consumer/Surrogate	Date	Case Manager	Date