FLORIDA DEPARTMENT OF ELDER AFFAIRS
SIMPLIFIED UNIT COST METHODOLOGY 05/2015
PERSONNEL COSTS WORKSHEET
BUDGET YEAR:
RECIPIENT NAME:

			% Increased by:												(Service
			0.00%								Management & General Cost Pool			Facilities & Mainter Pool	
STAFF	POSITION DESCRIPTION	CURRENT WAGES	PROPOSED INCREASE	PROPOSED BUDGET	GROSS AVAILABLE HOURS	HOLIDAY HOURS	SICK LEAVE	ANNUAL LEAVE	OTHER NON-BILLABLE TIME	NET AVAILABLE HOURS	% OF TIME	HR/ UNIT	WAGE COST	% OF TIME	HR/ UNIT
NAME		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00%	-	-	0.00%	-
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00%	-	-	0.00%	-
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00%	-	-	0.00%	-
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00%	-	-	0.00%	-
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00%	-	-	0.00%	-
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00%	-	-	0.00%	-
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00%	-	-	0.00%	-
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00%	-	-	0.00%	-
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00%	-	-	0.00%	-
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00%	-	-	0.00%	-
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00%	-	-	0.00%	-
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00%	-	-	0.00%	-
TOTAL WAGES		-	-	-									-		
PERCENTAGE OF WAGES				**#DIV/0!**									**#DIV/0!**		
TOTAL HOURS										**(0.00)**		**-**			**-**
PERCENTAGE OF HOURS										**0.0%**		**0.0%**			**0.0%**

FLORIDA DEPARTMENT OF ELDER AFFAIRS
SIMPLIFIED UNIT COST METHODOLOGY 05/2015
PERSONNEL COSTS WORKSHEET
BUDGET YEAR:
RECIPIENT NAME:

		Reference)						
		ance Cost	Non-DOEA Services & Activities			Fundraising & Unallowable Activities		
STAFF	**POSITION DESCRIPTION**	**WAGE COST**	**% OF TIME**	**HR /UNIT**	**WAGE COST**	**% OF TIME**	**HR /UNIT**	**WAGE COST**
NAME		-	0.00%	-	-	0.00%	-	-
		-	0.00%	-	-	0.00%	-	-
		-	0.00%	-	-	0.00%	-	-
		-	0.00%	-	-	0.00%	-	-
		-	0.00%	-	-	0.00%	-	-
		-	0.00%	-	-	0.00%	-	-
		-	0.00%	-	-	0.00%	-	-
		-	0.00%	-	-	0.00%	-	-
		-	0.00%	-	-	0.00%	-	-
		-	0.00%	-	-	0.00%	-	-
		-	0.00%	-	-	0.00%	-	-
		-	0.00%	-	-	0.00%	-	-
TOTAL WAGES		**-**			**-**			**-**
PERCENTAGE OF WAGES		**#DIV/0!**			**#DIV/0!**			**#DIV/0!**
TOTAL HOURS				**-**			**-**	
PERCENTAGE OF HOURS				**0.0%**			**0.0%**	

FLORIDA DEPARTMENT OF ELDER AFFAIRS
SIMPLIFIED UNIT COST METHODOLOGY 05/2015
PERSONNEL COSTS WORKSHEET
BUDGET YEAR:
RECIPIENT NAME:

		(1)			(2)			(3)			(4)			(5)	
		Service 1			Service 2			Service 3			Service 4			Service 5	
STAFF	POSITION DESCRIPTION	% OF TIME	HR/ UNIT	WAGE COST	% OF TIME	HR/ UNIT	WAGE COST	% OF TIME	HR/ UNIT	WAGE COST	% OF TIME	HR/ UNIT	WAGE COST	% OF TIME	HR/ UNIT
NAME		0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-
		0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-
		0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-
		0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-
		0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-
		0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-
		0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-
		0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-
		0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-
		0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-
		0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-
		0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-
TOTAL WAGES				-			-			-			-		
PERCENTAGE OF WAGES				#DIV/0!			#DIV/0!			#DIV/0!			#DIV/0!		
TOTAL HOURS			-			-			-			-			-
PERCENTAGE OF HOURS			0.0%			0.0%			0.0%			0.0%			0.0%
		# UNITS	-												
		ratio	#DIV/0!												
		4/1	-												

FLORIDA DEPARTMENT OF ELDER AFFAIRS
SIMPLIFIED UNIT COST METHODOLOGY 05/2015
PERSONNEL COSTS WORKSHEET
BUDGET YEAR:
RECIPIENT NAME:

			(6)			(7)			(8)			(9)			(10)	
			Service 6			Service 7			Service 8			Service 9			Service 10	
STAFF	POSITION DESCRIPTION	WAGE COST	% OF TIME	HR/ UNIT	WAGE COST	% OF TIME	HR/ UNIT	WAGE COST	% OF TIME	HR/ UNIT	WAGE COST	% OF TIME	HR/ UNIT	WAGE COST	% OF TIME	HR/ UNIT
NAME		-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-
		-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-
		-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-
		-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-
		-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-
		-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-
		-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-
		-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-
		-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-
		-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-
		-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-
		-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-	-	0.00%	-
TOTAL WAGES		-			-			-			-			-		
PERCENTAGE OF WAGES		#DIV/0!			#DIV/0!			#DIV/0!			#DIV/0!			#DIV/0!		
TOTAL HOURS				-			-			-			-			-
PERCENTAGE OF HOURS				0.0%			0.0%			0.0%			0.0%			0.0%

FLORIDA DEPARTMENT OF ELDER AFFAIRS
SIMPLIFIED UNIT COST METHODOLOGY 05/2015
PERSONNEL COSTS WORKSHEET
BUDGET YEAR:
RECIPIENT NAME:

			(62)			(63)			
			Service 62			Service 63			
STAFF	POSITION DESCRIPTION	WAGE COST	% OF TIME	HR/UNIT	WAGE COST	% OF TIME	HR/UNIT	WAGE COST	%'age Check Total
NAME		-	0.00%	-	-	0.00%	-	-	0.00%
		-	0.00%	-	-	0.00%	-	-	0.00%
		-	0.00%	-	-	0.00%	-	-	0.00%
		-	0.00%	-	-	0.00%	-	-	0.00%
		-	0.00%	-	-	0.00%	-	-	0.00%
		-	0.00%	-	-	0.00%	-	-	0.00%
		-	0.00%	-	-	0.00%	-	-	0.00%
		-	0.00%	-	-	0.00%	-	-	0.00%
		-	0.00%	-	-	0.00%	-	-	0.00%
		-	0.00%	-	-	0.00%	-	-	0.00%
		-	0.00%	-	-	0.00%	-	-	0.00%
		-	0.00%	-	-	0.00%	-	-	0.00%
TOTAL WAGES		-			-			-	
PERCENTAGE OF WAGES		#DIV/0!			#DIV/0!			#DIV/0!	
TOTAL HOURS				-			-		
PERCENTAGE OF HOURS				0.0%			0.0%		

FLORIDA DEPARTMENT OF ELDER AFFAIRS								
SIMPLIFIED UNIT COST METHODOLOGY 05/2015								
Total Cost Allocation Worksheet								
BUDGET YEAR:								
RECIPIENT NAME:	-							
-								
				(Service Reference)				(1)
LINE ITEM EXPENSES	**Prior Year Historical Costs**	**Proposed Increase/ Decrease**	**Proposed Budget Totals**	**Management & General Cost Pool**	**Facilities & Maintenance Cost Pool**	**Non-DOEA Services & Activities**	**Fundraising & Unallowable Activities**	**Service 1**
Wages	-	-	-	-	-	-	-	-
Fringe	-		-	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
Education/Training	-		-	-	-	-	-	-
Communications & Utilities	-		-	-	-	-	-	-
Printing & Supplies	-		-	-	-	-	-	-
Advertising	-		-	-	-	-	-	-
Insurance	-		-	-	-	-	-	-
Maintenance & Repair	-		-	-	-	-	-	-
Rent	-		-	-	-	-	-	-
Equipment	-		-	-	-	-	-	-
Professional fees/Legal/Audit	-		-	-	-	-	-	-
Sub-contractors #1 ($0)	-		-	-	-	-	-	-
Sub-contractors #2 ($0)	-		-	-	-	-	-	-
Sub-contractors #3 ($0)	-		-	-	-	-	-	-
Sub-contractors #4 ($0)	-		-	-	-	-	-	-
Sub-contractors #5 ($0)	-		-	-	-	-	-	-
Program Supplies	-		-	-	-	-	-	-
Depreciation	-		-	-	-	-	-	-
Food & Food Supplies	-		-	-	-	-	-	-
Other	-		-	0.00	0.00	0.00	0.00	0.00
TOTAL ALLOWABLE COSTS	**-**		**-**	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**
Service Subcontract Allowance (manually input $25,000/per contract)								
Service Subcontract Adjustment						-	-	-
Reallocate Management & General Costs				**#DIV/0!**		**#DIV/0!**	**#DIV/0!**	**#DIV/0!**
Total Modified Direct Costs						#DIV/0!	#DIV/0!	#DIV/0!
						-		
Reallocate Facilities & Maintenance (Space) costs					**#DIV/0!**	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**

FLORIDA DEPARTMENT OF ELDER AFFAIRS
SIMPLIFIED UNIT COST METHODOLOGY 05/2015
Total Cost Allocation Worksheet
BUDGET YEAR:
RECIPIENT NAME: -
-

LINE ITEM EXPENSES	Prior Year Historical Costs	Proposed Increase/ Decrease	Proposed Budget Totals	Management & General Cost Pool (Service Reference)	Facilities & Maintenance Cost Pool	Non-DOEA Services & Activities	Fundraising & Unallowable Activities	Service 1 (1)
Square Footage Occupied	-			-				
TOTAL COSTS BY SERVICE						**#DIV/0!**	**#DIV/0!**	**#DIV/0!**
Budgeted In-Kind Valuation							-	-
Total Costs Plus In-Kind by Service						**#DIV/0!**	**#DIV/0!**	**#DIV/0!**
Total Number of Service Units (estimated)								-
UNIT COST (Actual Cost)								**#DIV/0!**

Filename: C\Desktop\8cf606d7-79f5-4083-8272-bc6fb805e1b3

FLORIDA DEPARTMENT OF ELDE		
SIMPLIFIED UNIT COST METHOD		
Total Cost Allocation Worksheet		
BUDGET YEAR:		
RECIPIENT NAME:		
-		
	(2)	(3)
LINE ITEM EXPENSES	**Service 2**	**Service 3**
Wages	-	-
Fringe	#DIV/0!	#DIV/0!
Education/Training	-	-
Communications & Utilities	-	-
Printing & Supplies	-	-
Advertising	-	-
Insurance	-	-
Maintenance & Repair	-	-
Rent	-	-
Equipment	-	-
Professional fees/Legal/Audit	-	-
Sub-contractors #1 ($0)	-	-
Sub-contractors #2 ($0)	-	-
Sub-contractors #3 ($0)	-	-
Sub-contractors #4 ($0)	-	-
Sub-contractors #5 ($0)	-	-
Program Supplies	-	-
Depreciation	-	-
Food & Food Supplies	-	-
Other	0.00	0.00
TOTAL ALLOWABLE COSTS	**#DIV/0!**	**#DIV/0!**
Service Subcontract Allowance (ma	-	-
Service Subcontract Adjustment	-	-
Reallocate Management & Gener	**#DIV/0!**	**#DIV/0!**
Total Modified Direct Costs	#DIV/0!	#DIV/0!
Reallocate Facilities & Maintenar	**#DIV/0!**	**#DIV/0!**

FLORIDA DEPARTMENT OF ELDE		
SIMPLIFIED UNIT COST METHOD		
Total Cost Allocation Worksheet		
BUDGET YEAR:		
RECIPIENT NAME:		
-		
	(2)	(3)
LINE ITEM EXPENSES	**Service 2**	**Service 3**
Square Footage Occupied		
TOTAL COSTS BY SERVICE	**#DIV/0!**	**#DIV/0!**
Budgeted In-Kind Valuation	-	-
Total Costs Plus In-Kind by Servi	**#DIV/0!**	**#DIV/0!**
Total Number of Service Units (e	-	-
UNIT COST (Actual Cost)	**#DIV/0!**	**#DIV/0!**

FLORIDA DEPARTMENT OF ELDE							
SIMPLIFIED UNIT COST METHOD							
Total Cost Allocation Worksheet							
BUDGET YEAR:							
RECIPIENT NAME:							
-							
	(4)	(5)	(6)	(7)	(8)	(9)	(10)
LINE ITEM EXPENSES	**Service 4**	**Service 5**	**Service 6**	**Service 7**	**Service 8**	**Service 9**	**Service 10**
Wages	-	-	-	-	-	-	-
Fringe	#DIV/0!	#DIV/0!	-	-	-	-	-
Education/Training	-	-	-	-	-	-	-
Communications & Utilities	-	-	-	-	-	-	-
Printing & Supplies	-	-	-	-	-	-	-
Advertising	-	-	-	-	-	-	-
Insurance	-	-	-	-	-	-	-
Maintenance & Repair	-	-	-	-	-	-	-
Rent	-	-	-	-	-	-	-
Equipment	-	-	-	-	-	-	-
Professional fees/Legal/Audit	-	-	-	-	-	-	-
Sub-contractors #1 ($0)	-	-	-	-	-	-	-
Sub-contractors #2 ($0)	-	-	-	-	-	-	-
Sub-contractors #3 ($0)	-	-	-	-	-	-	-
Sub-contractors #4 ($0)	-	-	-	-	-	-	-
Sub-contractors #5 ($0)	-	-	-	-	-	-	-
Program Supplies	-	-	-	-	-	-	-
Depreciation	-	-	-	-	-	-	-
Food & Food Supplies	-	-	-	-	-	-	-
Other	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL ALLOWABLE COSTS	**#DIV/0!**	**#DIV/0!**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**
Service Subcontract Allowance (ma	-	-	-				
Service Subcontract Adjustment	-	-	-	-	-	-	-
Reallocate Management & Gener	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**
Total Modified Direct Costs	#DIV/0!	#DIV/0!	0.00	0.00	0.00	0.00	0.00
Reallocate Facilities & Maintenar	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**

FLORIDA DEPARTMENT OF ELDE							
SIMPLIFIED UNIT COST METHOD							
Total Cost Allocation Worksheet							
BUDGET YEAR:							
RECIPIENT NAME:							
-							
	(4)	(5)	(6)	(7)	(8)	(9)	(10)
LINE ITEM EXPENSES	**Service 4**	**Service 5**	**Service 6**	**Service 7**	**Service 8**	**Service 9**	**Service 10**
Square Footage Occupied							
TOTAL COSTS BY SERVICE	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**
Budgeted In-Kind Valuation	-		-	-	-	-	-
Total Costs Plus In-Kind by Servi	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**
Total Number of Service Units (e	-	-	-	-	-	-	-
UNIT COST (Actual Cost)	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**

FLORIDA DEPARTMENT OF ELDE			
SIMPLIFIED UNIT COST METHOD			
Total Cost Allocation Worksheet			
BUDGET YEAR:			
RECIPIENT NAME:			
-			
	(62)	(63)	
LINE ITEM EXPENSES	**Service 62**	**Service 63**	**Total Services Costs**
Wages	-	-	-
Fringe	-	#DIV/0!	#DIV/0!
Education/Training	-	-	-
Communications & Utilities	-	-	-
Printing & Supplies	-	-	-
Advertising	-	-	-
Insurance	-	-	-
Maintenance & Repair	-	-	-
Rent	-	-	-
Equipment	-	-	-
Professional fees/Legal/Audit	-	-	-
Sub-contractors #1 ($0)	-	-	-
Sub-contractors #2 ($0)	-	-	-
Sub-contractors #3 ($0)	-	-	-
Sub-contractors #4 ($0)	-	-	-
Sub-contractors #5 ($0)	-	-	-
Program Supplies	-	-	-
Depreciation	-	-	-
Food & Food Supplies	-	-	-
Other	0.00	0.00	0.00
TOTAL ALLOWABLE COSTS	**0.00**	**#DIV/0!**	**#DIV/0!**
Service Subcontract Allowance (ma			
Service Subcontract Adjustment	-	-	
Reallocate Management & Gener	**#DIV/0!**	**#DIV/0!**	
Total Modified Direct Costs	0.00	#DIV/0!	
Reallocate Facilities & Maintenar	**#DIV/0!**	**#DIV/0!**	

FLORIDA DEPARTMENT OF ELDE			
SIMPLIFIED UNIT COST METHOD			
Total Cost Allocation Worksheet			
BUDGET YEAR:			
RECIPIENT NAME:			
-			
	(62)	(63)	
LINE ITEM EXPENSES	**Service 62**	**Service 63**	**Total Services Costs**
Square Footage Occupied	-	-	
TOTAL COSTS BY SERVICE	**#DIV/0!**	**#DIV/0!**	
Budgeted In-Kind Valuation	-	-	
Total Costs Plus In-Kind by Servi	**#DIV/0!**	**#DIV/0!**	
Total Number of Service Units (e	-	-	
UNIT COST (Actual Cost)	**#DIV/0!**	**#DIV/0!**	

III.B. SUPPORTING BUDGET SCHEDULE BY PROGRAM ACTIVITY

SIMPLIFIED UNIT COST METHODOLOGY 05/2015

PSA 10: Broward County

Form Revised

Contract Period:

ORIGINAL DATE:

Contract Funding Source:

REVISED DATE:

RECIPIENT NAME:

REVISION NUMBER:

-

	(Service Reference)	(1)	(2)	(3)	(4)	(5)
DESCRIPTION	TOTAL SERVICES	Service 1	Service 2	Service 3	Service 4	Service 5
1. Total Budgeted Costs	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
2. Total Budgeted Units	0	0	0	0	0	0
(a) OAA Units		**0**	**0**	**0**	**0**	**0**
(b) ADI/LSP/CCE/HCE & Other Non-ADRC Units		0	0	0	0	0
3. Total Cost Per Unit of Service	n/a	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**
4. Provider Supporting Revenue						
(a) Provider Non-Matching Cash	0.00					
(b) Provider Non-Matching In-Kind Support	0.00					
(c) Provider Non-Matching Program Income	0.00					
(d) Co-payment Support	0.00					
(e) ADRC Funds	0.00					
Sub-Total Support & Other Contracts:	0.00	0.00	0.00	0.00	0.00	0.00
5. Aging & Disability Resource Center Contract Budget						
(a) OAA Funds	0.00					
(b) Council Local Match	0.00					
(c) Provider Match (Cash or In-Kind)	0.00					
Sub-Total Aging & Disability Resource Center Contract Budget	0.00	0.00	0.00	0.00	0.00	0.00
6. Contracted Unit Rate	n/a	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
7. Total Budgeted Support	0.00	0.00	0.00	0.00	0.00	0.00

III.B. SUPPORTING BUDGET SCHEDULE BY PROGRAM ACTIVITY

SIMPLIFIED UNIT COST METHODOLOGY 05/2015

PSA 10: Broward County

Form Revised

Contract Period:

ORIGINAL DATE:

Contract Funding Source:

REVISED DATE:

RECIPIENT NAME:

REVISION NUMBER:

8. Estimated Number of **UNDUPLICATED** Clients						

III.B. SUPPORTING BUDGET SCHEDULE BY PROGRAM AC

SIMPLIFIED UNIT COST METHODOLOGY 05/2015

PSA 10: Broward County

Contract Period:

Contract Funding Source:

RECIPIENT NAME:

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	(6)	(7)	(8)	(9)	(10)	(62)	(63)
DESCRIPTION	Service 6	Service 7	Service 8	Service 9	Service 10	Service 62	Service 63
1. Total Budgeted Costs	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
2. Total Budgeted Units	0	0	0	0	0	0	0
(a) OAA Units	**0**	**0**	**0**	**0**	**0**	**0**	**0**
(b) ADI/LSP/CCE/HCE & Other Non-ADRC Units	0	0	0	0	0	0	0
3. Total Cost Per Unit of Service	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**	**#DIV/0!**
4. Provider Supporting Revenue							
(a) Provider Non-Matching Cash							
(b) Provider Non-Matching In-Kind Support							
(c) Provider Non-Matching Program Income							
(d) Co-payment Support							
(e) ADRC Funds							
Sub-Total Support & Other Contracts:	0.00	0.00	0.00	0.00	0.00	0.00	0.00
5. Aging & Disability Resource Center Contract Budget							
(a) OAA Funds							
(b) Council Local Match							
(c) Provider Match (Cash or In-Kind)							
Sub-Total Aging & Disability Resource Center Contract Budget	0.00	0.00	0.00	0.00	0.00	0.00	0.00
6. Contracted Unit Rate	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
7. Total Budgeted Support	0.00	0.00	0.00	0.00	0.00	0.00	0.00

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