

Office of Lt. Governor/  
Department of Culture, Recreation & Tourism  
Funding Agreement Checklist

Agency/Program : Louisiana Serve Commission/AmeriCorps

Recipient: Trinity Christian Community (TCC)

Indicate:

- Cooperative Endeavor
- Professional Services Contract
- Personal Services Contract
- Consulting Services Contract
- Social Services Contract
- Grant: Indicate Specific Program
- Line Item Appropriation
- Letter of Agreement

09RFHLLA001-0001

- | Yes                                 | No                       |  |
|-------------------------------------|--------------------------|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Does the agreement include budget worksheet?   |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Does the agreement include anticipated uses?   |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Does the agreement include estimated duration of the project?  |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Does the agreement include goals, objectives, and measures of performance?                           |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Does the agreement indicate requirement of written progress report every six (6) months?             |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Does the agreement notify the recipient of Louisiana Audit Law (R.S.24:513)? (See attached schedule) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Has the comprehensive budget been approved by the appointing authority?                              |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Has the comprehensive budget been properly transmitted to the Louisiana Legislative Auditor?         |

Signatures: \_\_\_\_\_ Stephanie White \_\_\_\_\_ 8/26/10  
Contract Monitor Date

\_\_\_\_\_  
Appointing Authority

\_\_\_\_\_  
Date

## Recovery Formula TCC number two Trinity Christian Community

Application ID: 09AC100437

Budget Dates:  
Total Amt      CNCS Share      Grantee Share

**Section I. Program Operating Costs**

A. Personnel Expenses			
B. Personnel Fringe Benefits			
C. Travel			
Staff Travel	260	260	0
Member Travel			
<b>Total</b>	<b>\$260</b>	<b>\$260</b>	<b>\$0</b>

D. Equipment			
E. Supplies	2,320	2,320	0
F. Contractual and Consultant Services			
G. Training			
Staff Training			
Member Training	2,250	2,250	0
<b>Total</b>	<b>\$2,250</b>	<b>\$2,250</b>	<b>\$0</b>

H. Evaluation			
I. Other Program Operating Costs			
Travel to CNCS-Sponsored Meetings	2,500	2,500	0
<b>Total</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

<b>Section I. Subtotal</b>	<b>\$0</b>	<b>\$7,330</b>	<b>\$0</b>
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<b>Section I Percentage</b>	<b>100%</b>		<b>0%</b>
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**Section II. Member Costs**

A. Living Allowance			
Full Time (1700 hrs)	114,000	90,750	23,250
1-Year Half Time (900 hours)	0	0	0
Reduced Half Time (675 hrs)	0	0	0
Quarter Time (450 hrs)	0	0	0
Minimum Time (300 hrs)	0	0	0
2-Year Half Time (2nd Year)	0	0	0
2-Year Half Time (1st Year)	0	0	0
<b>Total</b>	<b>\$114,000</b>	<b>\$90,750</b>	<b>\$23,250</b>

B. Member Support Costs			
FICA for Members	8,721	8,721	0
Worker's Compensation	9,850	9,850	0
Health Care	17,600	17,600	0
<b>Total</b>	<b>\$36,171</b>	<b>\$36,171</b>	<b>\$0</b>

<b>Section II. Subtotal</b>	<b>\$150,171</b>	<b>\$126,921</b>	<b>\$23,250</b>
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<b>Section II. Percentages</b>	<b>85%</b>		<b>16%</b>
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**Section III. Administrative/Indirect Costs**

A. Corporation Fixed Percentage			
Corporation Fixed Amount	5,039	5,039	0
Commission Fixed Amount	1,257	1,257	0
<b>Total</b>	<b>\$6,296</b>	<b>\$6,296</b>	<b>\$0</b>

B. Federally Approved Indirect Cost Rate			
<b>Section III. Subtotal</b>	<b>\$6,296</b>	<b>\$6,296</b>	<b>\$0</b>

<b>Section III Percentage</b>	<b>100%</b>		<b>0%</b>
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<b>Section I + III. Funding Percentages</b>	<b>100%</b>		<b>0%</b>
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<b>Budget Totals</b>	<b>\$163,797</b>	<b>\$140,547</b>	<b>\$23,250</b>
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<b>Budget Total Percentage</b>	<b>86%</b>		<b>14%</b>
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<b>Required Match</b>	<b>0%</b>		
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<b># of years Receiving CNCS Funds</b>	<b>1</b>		
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