

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

Agency/Program: Louisiana Serve Commission/AmeriCorps

Recipient: Impact Lake Charles

- Indicate:**
- Cooperative Endeavor
 - Professional Services Contract
 - Personal Services Contract
 - Consulting Services Contract
 - Social Services Contract
 - Grant: Indicate Specific Program 06AFHLA001-0019
 - Line Item Appropriation
 - Letter of Agreement

- | 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: Patrick L. Roque
Contract Monitor

9-16-10
Date

Appointing Authority

Date

Impact Lake Charles AmeriCorps Program

City of Lake Charles

Application ID: 10AC108943

Budget Dates:

	Total Amt	CNCS Share	Grantee Share
Section I. Program Operating Costs			
A. Personnel Expenses	66,400	30,800	35,600
B. Personnel Fringe Benefits	12,139	4,249	7,890
C. Travel			
Staff Travel	2,435	1,805	630
Member Travel			
Total	\$2,435	\$1,805	\$630
D. Equipment			
E. Supplies	3,800	2,624	1,176
F. Contractual and Consultant Services	6,590	1,885	4,705
G. Training			
Staff Training			
Member Training	700	400	300
Total	\$700	\$400	\$300
H. Evaluation	500	200	300
I. Other Program Operating Costs	9,620	1,768	7,852
Travel to CNCS-Sponsored Meetings	0	0	0
Total	\$9,620	\$1,768	\$7,852
Section I. Subtotal	\$102,184	\$43,731	\$58,453
Section I Percentage		43%	57%
Section II. Member Costs			
A. Living Allowance			
Full Time (1700 hrs)	0	0	0
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)	42,000	28,437	13,563
2-Year Half Time (2nd Year)	0	0	0
2-Year Half Time (1st Year)	0	0	0
Total	\$42,000	\$28,437	\$13,563
B. Member Support Costs			
FICA for Members	3,220	2,254	966
Worker's Compensation	8,540	4,040	4,500
Health Care	0	0	0
Total	\$11,760	\$6,294	\$5,466
Section II. Subtotal	\$53,760	\$34,731	\$19,029
Section II. Percentages		65%	35%
Section III. Administrative/Indirect Costs			
A. Corporation Fixed Percentage			
Corporation Fixed Amount	0	0	0
Commission Fixed Amount	824	824	0
Total	\$824	\$824	\$0
B. Federally Approved Indirect Cost Rate			
Section III. Subtotal	\$824	\$824	\$0
Section III Percentage		100%	0%
Section I + III. Funding Percentages		43%	57%
Budget Totals	\$156,768	\$79,286	\$77,482
Budget Total Percentage		51%	49%
Required Match		30%	
# of years Receiving CNCS Funds		5	