

DEPARTMENT OF STATE HEALTH SERVICES



1100 WEST 49TH STREET
AUSTIN, TEXAS 78756-3199

CATEGORICAL BUDGET CHANGE REQUEST

DSHS PROGRAM: IMMUNIZATION BRANCH - LOCALS
 CONTRATOR: CORPUS CHRISTI-NUECES COUNTY PUBLIC HEALTH DISTRICT
 CONTRACT NO: 2012-039103
 CONTRACT TERM: 09/01/2011 THRU: 08/31/2012
 BUDGET PERIOD: 09/01/2011 THRU: 08/31/2012 CHG: 001C

DIRECT COST (OBJECT CLASS CATEGORIES)			
	Current Approved Budget (A)	Revised Budget (B)	Change Requested
Personnel	\$181,908.00	\$181,908.00	\$0.00
Fringe Benefits	\$44,968.00	\$44,968.00	\$0.00
Travel	\$5,580.00	\$14,800.00	\$9,220.00
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$6,301.00	\$8,541.00	\$2,240.00
Contractual	\$0.00	\$0.00	\$0.00
Other	\$2,880.00	\$3,920.00	\$1,040.00
Total Direct Charges	\$241,637.00	\$254,137.00	\$12,500.00
INDIRECT COST			
Base (\$)	\$0.00	\$0.00	\$0.00
Rate (%)	0.00%	0.00%	0.00%
Indirect Total	\$0.00	\$0.00	\$0.00
PROGRAM INCOME			
Program Income	\$140,183.00	\$140,183.00	\$0.00
Other Match	\$0.00	\$0.00	\$0.00
Income Total	\$140,183.00	\$140,183.00	\$0.00
LIMITS/RESTRICTIONS			
Advance Limit	\$0.00	\$0.00	\$0.00
Restricted Budget	\$0.00	\$0.00	\$0.00
SUMMARY			
Cost Total	\$241,637.00	\$254,137.00	\$12,500.00
Performing Agency Share	\$140,183.00	\$140,183.00	\$0.00
Receiving Agency Share	\$241,637.00	\$254,137.00	\$12,500.00
Total Reimbursements Limit	\$241,637.00	\$254,137.00	\$12,500.00
JUSTIFICATION			
funds added to promote coalition collaboration activities within their jurisdiction to increase child immunization rates.			

Financial status reports are due: 12/30/2011, 03/30/2012, 07/02/2012, 10/30/2012