

DEPARTMENT OF STATE HEALTH SERVICES



1100 WEST 49TH STREET  
AUSTIN, TEXAS 78756-3199

CATEGORICAL BUDGET CHANGE REQUEST

DSHS PROGRAM: CPS-BIOTERRORISM PREPAREDNESS  
 CONTRATOR: COLLIN COUNTY HEALTH CARE SERVICES  
 CONTRACT NO: 2009-031934  
 CONTRACT TERM: 08/01/2009 THRU: 07/31/2011  
 BUDGET PERIOD: 08/01/2009 THRU: 07/31/2011

CHG: 001B

DIRECT COST (OBJECT CLASS CATEGORIES)			
	Current Approved Budget (A)	Revised Budget (B)	Change Requested
Personnel	\$384,878.76	\$375,733.85	\$(9,144.91)
Fringe Benefits	\$130,281.46	\$126,697.44	\$(3,584.02)
Travel	\$15,131.00	\$10,270.50	\$(4,860.50)
Equipment	\$9,601.15	\$9,524.15	\$(77.00)
Supplies	\$44,352.57	\$65,425.00	\$21,072.43
Contractual	\$0.00	\$0.00	\$0.00
Other	\$63,162.00	\$59,756.00	\$(3,406.00)
<b>Total Direct Charges</b>	<b>\$647,406.94</b>	<b>\$647,406.94</b>	<b>\$0.00</b>
INDIRECT COST			
Base (\$)	\$0.00	\$0.00	\$0.00
Rate (%)	0.00%	0.00%	0.00%
<b>Indirect Total</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
PROGRAM INCOME			
Program Income	\$0.00	\$0.00	\$0.00
Other Match	\$0.00	\$0.00	\$0.00
<b>Income Total</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
LIMITS/RESTRICTIONS			
Advance Limit	\$0.00	\$0.00	\$0.00
Restricted Budget	\$0.00	\$0.00	\$0.00
SUMMARY			
Cost Total	\$647,406.94	\$647,406.94	\$0.00
Performing Agency Share	\$0.00	\$0.00	\$0.00
Receiving Agency Share	\$647,406.94	\$647,406.94	\$0.00
<b>Total Reimbursements Limit</b>	<b>\$647,406.94</b>	<b>\$647,406.94</b>	<b>\$0.00</b>
JUSTIFICATION			
This amendment is to reflect actual expenditures, transfer funds from Equipment Category to Supplies Category, and to change equipment models.			

Financial status reports are due: 11/30/2009, 03/02/2010, 05/31/2010, 08/31/2010, 11/30/2010, 03/03/2011, 05/30/2011, 09/29/2011