

# ***Network for a Healthy California***

## **Monthly Expenditure Projections**

**PURPOSE:** Due to the American Taxpayer Relief Act of 2012 (Fiscal Cliff Bill), California has received a reduction to its FFY 2013 award. In order to not amend your current agreement, and enable CDPH to closely monitor the overall California expenditure rate for FFY 2013, CDPH requests that your organization complete this form on a monthly basis and submit to your contract manager.

**Please only complete this form for each month an invoice is not submitted.**

**Agency Name:** \_\_\_\_\_

**Agreement Number:** \_\_\_\_\_

**Expenditure Projection for:** March 2013

### **Budget Line-Items**

Please input your projected expenditures for the specified month in the boxes below.

- |                               |                   |
|-------------------------------|-------------------|
| <b>1. Personnel:</b>          | _____             |
| <b>2. Fringe:</b>             | _____             |
| <b>3. Operating Expenses:</b> | _____             |
| <b>4. Equipment:</b>          | _____             |
| <b>5. Travel:</b>             | _____             |
| <b>6. Subcontractors*:</b>    | _____             |
| <b>7. Other:</b>              | _____             |
| <b>8. Indirect:</b>           | _____             |
| <b>9. Total Projections:</b>  | <b>\$ _____ -</b> |

\*Do not submit a separate Monthly Expenditure Projection for Sub-Contractors/Grants. This form is only needed for the Prime contractor and we only need the expenditure projections of the sub-contractor/grantee line item as a whole.