#### **AMENDMENT NO. 2 TO SERVICE AGREEMENT**

This Amendment No. 2 to Service Agreement ("Amendment No. 2") is dated

June 24, 2025

and is between each provider listed in Exhibit A, titled "Provider

List",(collectively referred to as "Contractor"), and the County of Fresno, a political subdivision of the State of California ("County").

#### Recitals

- A. On June 20, 2023, the County and the Contractor(s) entered into Agreement No. 23-276 ("Agreement"), as amended by County Agreement No. A-23-455 effective September 5, 2023, for the provision of a Mental Health Services Act (MHSA) funded Children's Full-Service Partnership (FSP) program for underserved or unserved high-risk children between the ages of 0-10 years with serious emotional disturbance (SED) and their families. The agreement combined and superseded Agreement Nos. 18-366 and 18-366-1.
- B. The County and Contractor(s) now desire to further amend the Agreement to extend the term for an additional three (3) month base and optional three (3) month renewal term and increasing the maximum compensation by Four Million Two Hundred Fifty-Seven Thousand Eight Hundred Ninety-Seven and No/100 Dollars (\$4,257,897.00).

The parties therefore agree as follows:

- 1. **Term.** This Amendment extends the term of the Agreement through September 30, 2025. The term of this Agreement may be extended for no more than one three-month period only upon written approval of both parties at least thirty (30) days before the first day of the three-month extension period. The County's DBH Director, or designee, is authorized to sign the written approval on behalf of the County based on the Contractor(s)'s satisfactory performance. The extension of this Agreement by the County is not a waiver or compromise of any default or breach of this Agreement by the Contractor(s) existing at the time of the extension whether or not known to the County.
- 2. All references to Exhibit H shall be deemed references to "Revised Exhibit H." Revised Exhibit H is attached and incorporated by this reference.

3. Section 1 of the Amendment No. 1 (Agreement No. 23-455), beginning on Page 2, Line 8, is amended to add the following:

"The maximum compensation payable to the Contractor(s) under this Agreement for the period of July 1, 2025, through September 30, 2025, is Two Million One Hundred Twenty-Three Thousand Two Hundred Twenty-Six and No/100 Dollars (\$2,123,226.00), which is not a guaranteed sum but shall be paid only for services rendered and received. The maximum compensation payable to the Contractor(s) under this Agreement for the period of October 1, 2025, through December 31, 2025, is Two Million One Hundred Twenty-Three Thousand Two Hundred Twenty-Five and No/100 Dollars (\$2,123,225.00), which is not a guaranteed sum but shall be paid only for services rendered and received. The maximum compensation payable to Pacific Clinics for Specialty Mental Health Services for the period of July 1, 2025, through September 30, 2025, is One Million Two Hundred Thirty-Eight Thousand One Hundred Twenty-Nine and No/100 Dollars (\$1,238,129.00), which is not a guaranteed sum but shall be paid only for services rendered and received. The maximum compensation payable to Pacific Clinics for Specialty Mental Health Services for the period of October 1, 2025, through December 31, 2025, is One Million Two Hundred Thirty-Eight Thousand One Hundred Thirty and No/100 Dollars (\$1,238,130.00), which is not a guaranteed sum but shall be paid only for services rendered and received. The maximum compensation payable to Exceptional Parents Unlimited, Inc. for Specialty Mental Health Services for the period of July 1, 2025, through September 30, 2025, is Four Hundred Seventy-Seven Thousand Eight Hundred and No/100 Dollars (\$477,800.00), which is not a guaranteed sum but shall be paid only for services rendered and received. The maximum compensation payable to Exceptional Parents Unlimited, Inc. for Specialty Mental Health Services for the period of October 1, 2025, through December 31, 2025, is Four Hundred Seventy-Seven Thousand Seven Hundred Ninety-Nine and No/100

Dollars (\$477,799.00), which is not a guaranteed sum but shall be paid only for services rendered and received. The maximum compensation payable to Comprehensive Youth Services of Fresno, Inc. for Specialty Mental Health Services for the period of July 1, 2025, through September 30, 2025, is Four Hundred Seven Thousand Two Hundred Ninety-Seven and No/100 Dollars (\$407,297.00), which is not a guaranteed sum but shall be paid only for services rendered and received. The maximum compensation payable to Comprehensive Youth Services of Fresno, Inc. for Specialty Mental Health Services for the period of October 1, 2025, through December 31, 2025, is Four Hundred Seven Thousand Two Hundred Ninety-Six and No/100 Dollars (\$407,296.00), which is not a guaranteed sum but shall be paid only for services rendered and received."

4. Section 1 of Amendment No. 1 (Agreement No. 23-455), beginning on Page 2, Line 19, is amended to add the following:

"The maximum compensation payable to the Contractor(s) under this Agreement for the period of July 1, 2025, through September 30, 2025, is Five Thousand Seven Hundred Twenty-Three and No/100 Dollars (\$5,723.00). The maximum compensation payable to the Contractor(s) under this Agreement for the period of October 1, 2025, through December 31, 2025, is Five Thousand Seven Hundred Twenty-Three and No/100 Dollars (\$5,723.00). The maximum compensation payable to Pacific Clinics under this Agreement for Non-Medi-Cal Supports for the period of July 1, 2025, through September 30, 2025, is Two Thousand Four Hundred Ten and No/100 Dollars (\$2,410.00). The maximum compensation payable to the Pacific Clinics for Non-Medi-Cal Supports for the period of October 1, 2025, through December 31, 2025, is Two Thousand Four Hundred Eleven and No/100 Dollars (\$2,411.00). The maximum compensation payable to Exceptional Parents Unlimited, Inc. for Non-Medi-Cal Supports for the period of July 1, 2025, through September 30, 2025, is Two Thousand and No/100 Dollars (\$2,000.00). The maximum compensation payable to Exceptional

Parents Unlimited, Inc. for Non-Medi-Cal Supports for the period of October 1, 2025, through December 31, 2025, is Two Thousand and No/100 Dollars (\$2,000.00). The maximum compensation payable to Comprehensive Youth Services of Fresno, Inc. for Non-Medi-Cal Supports for the period of July 1, 2025, through September 30, 2025, is One Thousand Three Hundred Thirteen and No/100 Dollars (\$1,313.00). The maximum compensation payable to Comprehensive Youth Services of Fresno, Inc. for Non-Medi-Cal Supports for the period of October 1, 2025, through December 31, 2025, is One Thousand Three Hundred Twelve and 50/100 Dollars (\$1,312.00)."

- 5. Section 1 of Amendment No. 1 (Agreement No. 23-455), beginning on Page 3, Lines 1 through 23 is deleted in its entirety and replaced with the following:
  - "4.5 Total Maximum Compensation. In no event shall the maximum contract amount for all the services provided by the Contractor(s) to County under the terms and conditions of this Agreement be in excess of Twenty-Two Million Thirty-Nine Thousand Four Hundred Eighty-Three and No/100 Dollars (\$22,039,483.00) during the entire term of this Agreement. In no event shall the maximum contract amount for all the services provided by Pacific Clinics to County be in excess of Twelve Million Six Hundred Fifty-Five Thousand Four Hundred and No/100 Dollars (\$12,655,400.00). In no event shall the maximum contract amount for all the services provided by Exceptional Parents Unlimited, Inc. be in excess of Five Million Forty-Seven Thousand Nine Hundred Ninety-Five and No/100 Dollars (\$5,047,995.00). In no event shall the maximum contract amount for all the services provided by Comprehensive Youth Services of Fresno, Inc. to County be in excess of Four Million Three Hundred Thirty-Six Thousand Eighty-Eight and No/100 Dollars (\$4,336,088.00). The Contractor(s) acknowledges that the County is a local government entity and does so with notice that the County's powers are limited by the California Constitution and by State law, and with notice that the Contractor(s) may receive compensation

under this Agreement only for services performed according to the terms of this Agreement and while this Agreement is in effect, and subject to the maximum amount payable under this section. The Contractor(s) further acknowledges that County employees have no authority to pay the Contractor(s) except as expressly provided in this Agreement. The Contractor(s) will be compensated for performance of its services under this Agreement as provided in this Article. The Contractor(s) is not entitled to any compensation except as expressly provided in this Agreement."

- When both parties have signed this Amendment No. 2, the Agreement, Amendment No.
   and this Amendment No. 2 together constitute the Agreement.
  - 2. The Contractor(s) represents and warrants to the County that:
    - a. The Contractor(s) is duly authorized and empowered to sign and perform its obligations under this Amendment.
    - b. The individual signing this Amendment on behalf of the Contractor(s) is duly authorized to do so and his or her signature on this Amendment legally binds the Contractor(s) to the terms of this Amendment.
- 3. The parties agree that this Amendment may be executed by electronic signature as provided in this section.
  - a. An "electronic signature" means any symbol or process intended by an individual signing this Amendment to represent their signature, including but not limited to (1) a digital signature; (2) a faxed version of an original handwritten signature; or (3) an electronically scanned and transmitted (for example by PDF document) version of an original handwritten signature.
  - b. Each electronic signature affixed or attached to this Amendment (1) is deemed equivalent to a valid original handwritten signature of the person signing this Amendment for all purposes, including but not limited to evidentiary proof in any administrative or judicial proceeding, and (2) has the same force and effect as the valid original handwritten signature of that person.

- c. The provisions of this section satisfy the requirements of Civil Code section 1633.5, subdivision (b), in the Uniform Electronic Transaction Act (Civil Code, Division 3, Part 2, Title 2.5, beginning with section 1633.1).
- d. Each party using a digital signature represents that it has undertaken and satisfied the requirements of Government Code section 16.5, subdivision (a), paragraphs (1) through (5), and agrees that each other party may rely upon that representation.
- e. This Amendment is not conditioned upon the parties conducting the transactions under it by electronic means and either party may sign this Amendment with an original handwritten signature.
- 4. This Amendment may be signed in counterparts, each of which is an original, and all of which together constitute this Amendment.
- 5. The Agreement as previously amended and as amended by this Amendment No. 2 is ratified and continued. All provisions of the Agreement as previously amended and not amended by this Amendment No. 2 remain in full force and effect.

[SIGNATURE PAGE FOLLOWS]

1	The parties are signing this Amendme	ent No. 2 on the date stated in the introductory
2	clause.	
3	PLEASE SEE SIGNATURE PAGE	COUNTY OF FRESNO
5	ATTACHED	41 1 2 1
6		Ernest Buddy Mendes, Chairman of the Board of Supervisors of the County of Fresno
7		Attest:
8		Bernice E. Seidel Clerk of the Board of Supervisors County of Fresno, State of California
10		By: Hanamo Deputy
12	For accounting use only:	
13	Org No.: 56304320 Account No.: 7295/0	
14	Fund No.:0001 Subclass No.: 10000	
15		
16		
17		
18		
19		
20		
21		•
22		
23		
24		
25		
26		
27		
28		

The parties are signing this Amendment No. 2 on the date stated in the introductory clause. Pacific Clinics Authorized Signature Kim M. Wells Chief Legal Officer (Print Name & Title) 499 Loma Alta Avenue Losa Gatos, CA 95030 Mailing Address 

The parties are signing this Amendment No. 2 on the date stated in the introductory clause. Exceptional Parents Unlimited, Inc. Authorized Signature 4440 N. First Street Fresno, Ca. 93726 Mailing Address 

The parties are signing this Amendment No. 2 on the date stated in the introductory clause.

Comprehensive Youth Services of Fresno, Inc.

**Authorized Signature** 

Cynthia Burton, LCSW Executive Director

(Print Name & Title)

4545 N. West Ave. Fresno, Ca. 93705 Mailing Address

### **Bright Beginnings for Families**

### Full Service Partnership Services for Children Ages 0-10 Years

### **PROVIDER LIST**

### **Pacific Clinics**

251 Llewellyn Avenue Campbell, CA 95008 Phone: (408) 379-3790 (559) 446-3054

Contact: Marilyn Sliney, Executive Director, Central Region

### Comprehensive Youth Services of Fresno, Inc.

4545 N. West Avenue Fresno, CA 93705 Phone: (559) 229-3561

Contact: Becky Kramer, Executive Director

### **Exceptional Parents Unlimited, Inc.**

4440 N. First Street Fresno, CA 93726 Phone: (559) 229-2000

Contact: Lowell Ens, Executive Director

## BRIGHT BEGINNINGS FOR FAMILIES COMPREHENSIVE YOUTH SERVICES OF FRESNO, INC. Fiscal Year (FY) 2025-2026 | July 1, 2025 to September 30, 2025

### PROGRAM EXPENSES

	1000: DIRECT SALARIES & BENEFITS					
	mployee Salaries Administrative Position	CTC.	A dunin	Duaguaga	Total	
1101	Autililistrative Position	FTE	Admin	Program	Total	
1101					-	
1103			-		_	
1104			-		-	
1105			-		-	
1106			-		-	
1107			-		-	
1108			-		-	
1109			-		-	
1110			-		-	
1111 1112			-		-	
1112			-		_	
1114			_		_	
1115			_		_	
	Direct Personnel Admin Salaries Subtotal	0.00	\$ -		\$ -	
Acct #	Program Position	FTE	Admin	Program	Total	
1116			7.5		\$ -	
1117				-	-	
1118				-	_	
1119				-	-	
1120				-	-	
1121				-	-	
1122				-	-	
1123				-	-	
1124				-	-	
1125				-	-	
1126 1127				-	_	
1128					_	
1129				_	_	
1130				-	-	
1131				-	-	
1132				-	-	
1133				-	-	
1134				-	-	
	Direct Personnel Program Salaries Subtotal	0.00		\$ -	\$ -	
			T .	T	1 -	
			Admin	Program	Total	
	Direct Personnel Salaries Subtotal	0.00	\$ -	\$ -	\$ -	
Direct E	mployee Benefits					
Acct #	Description		Admin	Program	Total	
1201	Retirement				\$ -	
1202	Worker's Compensation		-	-	-	
1203	Health Insurance		-	1	-	
1204	Other (Benefits listed under ARPA Grant)			-	-	
1205	Other (specify)		-		-	
1206	Other (specify)	ofite Cubtatel	- 6	-	-   e	
	Direct Employee Ben	ents subtotal:	\$ -	\$ -	\$ -	
Direct P	ayroll Taxes & Expenses:					
Acct #	Description		Admin	Program	Total	
	OASDI		\$ -	\$ -	\$ -	
1302	FICA/MEDICARE		-	-	-	
	SUI		-	-	-	
1304	Other (specify)		-	-	-	
1305	Other (specify)		-	1	-	
1306	Other (specify)	aaa Culataat	-		-	
	Direct Payroll Taxes & Exper	ises Subtotal:	\$ -	\$ -	\$ -	
	DIDECT EMBLOYEE CALABITE & DEN	EEITC TOTAL	A alma !	D======	Taksi	
	DIRECT EMPLOYEE SALARIES & BEN	EFIIS IUIAL:	Admin	Program	Total	

\$ - \$ - \$

DIRECT EMPLOYEE SALARIES & BENEFITS PERCENTAGE:	Admin	Program
	#DIV/0!	#DIV/0!

2000: DI	2000: DIRECT CLIENT SUPPORT			
Acct #	Line Item Description	Amou	ınt	
2001	Child Care			
2002	Client Housing Support			
2003	Client Transportation & Support		263	
2004	Clothing, Food, & Hygiene		650	
2005	Education Support		400	
2006	Employment Support			
2007	Household Items for Clients			
2008	Medication Supports			
2009	Program Supplies - Medical			
2010	Utility Voucher			
2011	Other			
2012	Other			
2013	Other			
2014	Other			
2015	Other			
2016	Other		-	
	DIRECT CLIENT CARE TOTAL	\$	1,313	

Acct #	Line Item Description	Amount
3001	Telecommunications	\$ -
3002	Printing/Postage	-
3003	Office, Household & Program Supplies	-
3004	Advertising	-
3005	Staff Development & Training	-
3006	Staff Mileage	-
3007	Subscriptions & Memberships	-
3008	Vehicle Maintenance	-
3009	Other (specify)	-
3010	Other (specify)	-
3011	Other (specify)	-
3012	Other (specify)	-
	DIRECT OPERATING EXPENSES TOTAL:	\$ -

Acct #	‡ Line Item Description	
4001	Building Maintenance	\$
4002	Rent/Lease Building	
4003	Rent/Lease Equipment	
4004	Rent/Lease Vehicles	
4005	Security	
4006	Utilities	
4007	Other (specify)	
4008	Other (specify)	
4009	Other (specify)	
4010	Other (specify)	
	DIRECT FACILITIES/EQUIPMENT TOTAL:	\$

Acct #	Line Item Description	Amount
5001	Consultant (Network & Data Management)	\$
5002	HMIS (Health Management Information System)	
5003	Contractual/Consulting Services (Specify)	
5004	Translation Services	
5005	Other (specify)	
5006	Other (specify)	
5007	Other (specify)	
5008	Other (specify)	
	DIRECT SPECIAL EXPENSES TOTAL:	\$

6000: IN	IDIRECT EXPENSES	
Acct #	Line Item Description	Amount

	Administrative Overhead	ĺ
6001	Use this line and only this line for approved indirect cost rate	\$ -
	Administrative Overhead	
6002	Professional Liability Insurance	-
6003	Accounting/Bookkeeping	-
6004	External Audit	-
6005	Insurance (Specify):	-
6006	Payroll Services	-
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	-
6008	Personnel (Indirect Salaries & Benefits)	ı
6009	Other (Indirect Cost under ARPA Grant)	
6010	Other (specify)	-
6011	Other (specify)	-
6012	Other (specify)	-
6013	Other (specify)	-
	INDIRECT EXPENSES TOTAL	\$ -

INDIRECT COST RATE 0.00%
--------------------------

Acct #	Line Item Description	Amoun	t
7001	Computer Equipment & Software	\$	-
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data		-
7003	Furniture & Fixtures		-
7004	Leasehold/Tenant/Building Improvements		-
7005	Other Assets over \$500 with Lifespan of 2 Years +		-
7006	Assets over \$5,000/unit (Specify)		-
7007	Other (specify)		-
7008	Other (specify)		-
	FIXED ASSETS EXPENSES TOTAL	\$	-

TOTAL PROGRAM EXPENSES \$ 1,313

### PROGRAM FUNDING SOURCES

	8100 - SUBSTANCE USE DISORDER FUNDS		
Acct # Line Item Description		Amo	unt
8101	Drug Medi-Cal	\$	-
8102	SABG	\$	-
	SUBSTANCE USE DISORDER FUNDS TOTAL	\$	-

	8200 - REALIGNMENT				
Acct #	Line Item Description	Amount			
8201	Realignment	\$ -			
	REALIGNMENT TOTAL	\$ -			

	8300 - MENTAL HEALTH SERVICE ACT (MHSA)				
Acct #	MHSA Component	MHSA Program Name		Amount	
8301	CSS - Community Services & Supports		\$	1,313	
8302	PEI - Prevention & Early Intervention			-	
8303	INN - Innovations			-	
8304	WET - Workforce Education & Training			-	
8305	CFTN - Capital Facilities & Technology			-	
	MHSA TOTAL			1,313	

	8400 - OTHER REVENUE				
Acct #	Line Item Description	Amount			
8401	Client Fees				
8402	Client Insurance	-			
8403	Grants (ARPA)				
8404	Other (Specify)	-			
8405	Other (Specify)	-			
	OTHER REVENUE TOTAL	\$ -			

TOTAL PROGRAM FUNDING SOURCES:	\$	1,313
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NET PROGRAM COST: \$ -

### BRIGHT BEGINNINGS FOR FAMILIES COMPREHENSIVE YOUTH SERVICES OF FRESNO, INC.

Fiscal Year (FY) 2025-2026 | July 1, 2025 to September 30, 2025 | Budget Narrative

PROGRAM EXPENSE						
ACCT#	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE			
	SALARIES & BENEFITS	-				
dministrative	Positions	-				
1101	0	-				
1102		-				
1103		-				
1104		-				
1105		-				
1106		-				
		-				
1108		-				
1109 1110	0	-				
	0	-				
1111		-				
1113						
1113						
1114						
ogram Positi		-				
1116						
1117						
1118		_				
1119		_				
1120		_				
1121		_				
1122		-				
		-				
1124		-				
1125	0	-				
1126	0	-				
1127	0	-				
1128	0	-				
1129		-				
1130		-				
		-				
1132		-				
1133		-				
1134	0	-				
ect Employe		1				
	Retirement	-				
	Worker's Compensation	-				
	Health Insurance Other (Benefits listed under ARPA Grant)	-				
1204	Other (Benefits listed under ARPA Grant) Other (specify)	-				
1205	Other (specify) Other (specify)	-				
1200	Other (specify)					
ect Pavroll T	Taxes & Expenses:	-				
1301	OASDI	-				
1302	FICA/MEDICARE	-				
1303	SUI	-				
1304	Other (specify)	-				
1305	Other (specify)	-				
1306	Other (specify)	-				
00: DIRECT C	CLIENT SUPPORT	1,313				
2001	Child Care	-				
2002	Client Housing Support	-				
2003	Client Transportation & Support	262	Gas cards are distributed to clients who need financial assistance to travel to therapy			

appointments consistently.

sessions at the CYS main office. Transportation challenges are a known barrier to accessing mental health services, and this funding ensures that clients can attend their

			PROGRAN	/I EXPENSE
	ACCT#	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
	2004	Clothing, Food, & Hygiene	650	Gift cards are provided to clients to assist with purchasing essential items such as food, toiletries, and hygiene products. By addressing these basic needs, the funds help alleviate immediate stressors that may hinder a client's focus on mental health treatment. To align with MHSA's focus on health and well-being, the cards are restricted from being used for alcohol, tobacco, firearms, or lottery items. This ensures funds are utilized in a manner consistent with supporting clients' health and stability. By providing this resource, clients experience reduced financial strain, enabling them to focus more fully on their therapeutic goals and mental health improvement.
	2005	Education Support		Zoo tickets or event tickets are utilized as an incentive for young clients participating in Parent-Child Interaction Therapy (PCIT). These tickets are awarded either after a few sessions or at the program's conclusion to recognize progress, reinforce commitment, and strengthen the therapeutic relationship. By offering enriching family activities such as zoo visits, the program fosters positive family interactions, reinforces learned skills in a real-world setting, and provides clients with meaningful experiences that contribute t emotional well-being.
		Employment Support	-	
		Household Items for Clients  Medication Supports	-	
-		Program Supplies - Medical	_	
	2010	Utility Voucher	-	
	2011	Other	-	
	2012	Other	-	
	2013	Other	-	
		Other	-	
		Other	-	
	2016	Other	-	
3000 · D	IRECT O	PERATING EXPENSES	_	
3000. D		Telecommunications	_	
		Printing/Postage	_	
		Office, Household & Program Supplies	-	
	3004	Advertising	-	
	3005	Staff Development & Training	-	
	3006	Staff Mileage	-	
		Subscriptions & Memberships	-	
-		Vehicle Maintenance	-	
	3009 3010	Other (specify) Other (specify)	-	
		Other (specify)	_	
		Other (specify)	-	
4000: D	IRECT F	ACILITIES & EQUIPMENT	-	
	4001	Building Maintenance	-	
	4002	Rent/Lease Building	-	
		Rent/Lease Equipment	-	
		Rent/Lease Vehicles	-	
-	4005 4006	Security Utilities	-	
		Other (specify)	_	
		Other (specify)	-	
		Other (specify)	-	
	4010	Other (specify)	-	
5000: D		PECIAL EXPENSES	-	
		Consultant (Network & Data Management)	-	
		HMIS (Health Management Information System)	-	
		Contractual/Consulting Services (Specify)  Translation Services	-	
		Other (specify)		
		Other (specify)	_	
		Other (specify)	-	
	5008	Other (specify)	-	
6000: IN	NDIRECT	EXPENSES	-	
		Administrative Overhead	-	
	6002	Professional Liability Insurance	-	
		LA constitute (Decalificación)	1	
		Accounting/Bookkeeping  External Audit	-	

	PROGRAM EXPENSE					
ACCT#	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE			
6005	Insurance (Specify):	-				
6006	Payroll Services	-				
6007	Depreciation (Provider-Owned Equipment to be Used	-				
6008	Personnel (Indirect Salaries & Benefits)	-				
6009	Other (Indirect Cost under ARPA Grant)	-				
6010	Other (specify)	-				
6011	Other (specify)	-				
6012	Other (specify)	1				
6013	Other (specify)	-				

7000: D	7000: DIRECT FIXED ASSETS -					
	7001	Computer Equipment & Software	-			
	7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA	-			
	7003	Furniture & Fixtures	-			
	7004	Leasehold/Tenant/Building Improvements	-			
	7005	Other Assets over \$500 with Lifespan of 2 Years +	-			
	7006	Assets over \$5,000/unit (Specify)				
	7007	Other (specify)				
	7008	Other (specify)	-			

TOTAL PROGRAM EXPENSES FROM BUDGET TEMPLATE:	1,313
TOTAL PROGRAM EXPENSE FROM BUDGET NARRATIVE:	1,313

BUDGET CHECK:

# BRIGHT BEGINNINGS FOR FAMILIES COMPREHENSIVE YOUTH SERVICES OF FRESNO, INC. Fiscal Year (FY) 2025-2026 | October 1, 2025 to December 31, 2025

### PROGRAM EXPENSES

	PROGRAI				-1	
	1000: DIRECT SA	LARIES & BENI	FITS	· · · · · · · · · · · · · · · · · · ·		
	mployee Salaries					
	Administrative Position	FTE	Admin	Program	Tot	al
1101					\$	
1102						
1103 1104			-			
1104						
1106			_			
1107			-			_
1108			-			_
1109			-			-
1110			-			-
1111			-			-
1112			-			-
1113			-			-
1114			-			
1115	Direct Description Calculate College	0.00	-			
Acct #	Direct Personnel Admin Salaries Subtotal	0.00	\$ -	Drogram	\$	- al
1116	Program Position	FTE	Admin	Program	Tot \$	al
1117				_	ب	
1117				-		
1119				-		
1120				-		_
1121				-		-
1122				-		-
1123				-		-
1124				-		-
1125				-		-
1126				-		-
1127				-		
1128 1129				-		
1130				-		
1131				_		
1132				-		
1133				-		_
1134				-		-
	Direct Personnel Program Salaries Subtotal	0.00		\$ -	\$	-
			Admin	Program	Tot	al
	Direct Personnel Salaries Subtotal	0.00	\$ -	\$ -	\$	-
Direct E	imployee Benefits					
Acct #	Description		Admin	Program	Tot	al
	Retirement				\$	-
1202	Worker's Compensation		-	-		-
	Health Insurance		-	-		-
1204	Other (Benefits listed under ARPA Grant)			-		
1205	Other (specify)		-	-		
1206	Other (specify)  Direct Employee Ben	afite Subtatal	-	-   ¢	Ċ	
	Direct Employee Ben	CITES SUDIDIGIE	\$ -	\$ -	\$	
Direct P	ayroll Taxes & Expenses:					
Acct #	•		Admin	Program	Tot	al
	OASDI		\$ -	\$ -	\$	-
	FICA/MEDICARE		-	-		
1303	SUI		-	-		
1304	Other (specify)		-	-		
1305	Other (specify)		-	-		
1306	Other (specify)  Direct Payroll Taxes & Exper	ises Suhtotal		\$ -	\$	
	Direct rayion raxes & Exper	ises sustitial.	<del>-</del>	<del>-</del>	۶	
1			1	I .	1	

DIRECT EMPLOYEE SALARIES & BENEFITS TOTAL:	Admin	Program	Total
	\$ -	\$ -	\$ -

DIRECT EMPLOYEE SALARIES & BENEFITS PERCENTAGE:	Admin	Program
	#DIV/0!	#DIV/0!

2000: DI	RECT CLIENT SUPPORT	
Acct #	Line Item Description	Amount
2001	Child Care	
2002	Client Housing Support	
2003	Client Transportation & Support	262
2004	Clothing, Food, & Hygiene	650
2005	Education Support	400
2006	Employment Support	
2007	Household Items for Clients	
2008	Medication Supports	
2009	Program Supplies - Medical	
2010	Utility Voucher	
2011	Other	
2012	Other	
2013	Other	
2014	Other	
2015	Other	
2016	Other	-
	DIRECT CLIENT CARE TOTAL	\$ 1,312

Acct #	Line Item Description	Amount
3001	Telecommunications	\$
3002	Printing/Postage	
3003	Office, Household & Program Supplies	
3004	Advertising	
3005	Staff Development & Training	
3006	Staff Mileage	
3007	Subscriptions & Memberships	
3008	Vehicle Maintenance	
3009	Other (specify)	
3010	Other (specify)	
3011	Other (specify)	
3012	Other (specify)	
	DIRECT OPERATING EXPENSES TOTAL:	\$

Acct #	Line Item Description	Amount
4001	Building Maintenance	\$
4002	Rent/Lease Building	
4003	Rent/Lease Equipment	
4004	Rent/Lease Vehicles	
4005	Security	
4006	Utilities	
4007	Other (specify)	
4008	Other (specify)	
4009	Other (specify)	
4010	Other (specify)	
	DIRECT FACILITIES/EQUIPMENT TOTAL:	\$

Acct #	Line Item Description	Amount
5001	Consultant (Network & Data Management)	\$
5002	HMIS (Health Management Information System)	
5003	Contractual/Consulting Services (Specify)	
5004	Translation Services	
5005	Other (specify)	
5006	Other (specify)	
5007	Other (specify)	
5008	Other (specify)	
	DIRECT SPECIAL EXPENSES TOTAL:	\$

6000: INDIRECT EXPENSES
-------------------------

Acct #	Line Item Description	Amount
	Administrative Overhead	
6001	Use this line and only this line for approved indirect cost rate	\$ -
	Administrative Overhead	
6002	Professional Liability Insurance	-
6003	Accounting/Bookkeeping	-
6004	External Audit	-
6005	Insurance (Specify):	-
6006	Payroll Services	-
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	
6008	Personnel (Indirect Salaries & Benefits)	-
6009	Other (Indirect Cost under ARPA Grant)	
6010	Other (specify)	-
6011	Other (specify)	-
6012	Other (specify)	-
6013	Other (specify)	-
	INDIRECT EXPENSES TOTAL	\$ -

INDIRECT COST RATE	0.00%

Acct #	Line Item Description	Amount
7001	Computer Equipment & Software	\$ -
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-
7003	Furniture & Fixtures	-
7004	Leasehold/Tenant/Building Improvements	-
7005	Other Assets over \$500 with Lifespan of 2 Years +	-
7006	Assets over \$5,000/unit (Specify)	-
7007	Other (specify)	-
7008	Other (specify)	-
	FIXED ASSETS EXPENSES TOTAL	\$ -

#### TOTAL PROGRAM EXPENSES \$ 1,312

### PROGRAM FUNDING SOURCES

8100 - SUBSTANCE USE DISORDER FUNDS		
Acct #	Line Item Description	Amount
8101	Drug Medi-Cal	\$ -
8102	SABG	\$ -
	SUBSTANCE USE DISORDER FUNDS TOTAL	\$ -

	8200 - REALIGNMENT			
Acct #	Line Item Description		Amount	
8201	Realignment	\$		
	REALIGNMENT TOTAL	\$		

	8300 - MENTAL HEALTH SERVICE ACT (MHSA)			
Acct #	MHSA Component	MHSA Program Name	Α	mount
8301	CSS - Community Services & Supports		\$	1,312
8302	PEI - Prevention & Early Intervention			-
8303	INN - Innovations			-
8304	WET - Workforce Education & Training			-
8305	CFTN - Capital Facilities & Technology			-
		MHSA TOTAL	Ś	1.312

	8400 - OTHER REVENUE			
Acct #	Line Item Description	Amount		
8401	Client Fees			
8402	Client Insurance	-		
8403	Grants (ARPA)			
8404	Other (Specify)	-		
8405	Other (Specify)	1		
	OTHER REVENUE TOTAL	\$ -		

TOTAL PROGRAM FUNDING SOURCES:	\$ 1,312

NET PROGRAM COST:	\$ -

## BRIGHT BEGINNINGS FOR FAMILIES COMPREHENSIVE YOUTH SERVICES OF FRESNO, INC.

Fiscal Year (FY) 2025-2026 | October 1, 2025 to December 31, 2025 Budget Narrative

	PROGRAM EXPENSE				
	ACCT#	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
1000:		SALARIES & BENEFITS	-		
Admin	istrative	Positions	-		
	1101	0	-		
	1102	0	-		
	1103	0	-		
	1104		-		
		0	-		
	1106		-		
	1107		-		
		0	-		
		0	-		
	1110	0	-		
		0	-		
-	1112		-		
	1113		-		
-		0	-		
Droor	1115 m Position	0	-		
riogra			-		
-	1116 1117		-		
-	1117				
	1119				
	1119		_		
		0	_		
	1122		_		
	1123		_		
	1124	0	-		
•	1125	0	_		
	1126		-		
	1127		-		
	1128		-		
	1129		-		
	1130		-		
	1131		-		
	1132		-		
	1133		-		
	1134	0	-		
Direct		e Benefits			
		Retirement	-		
		Worker's Compensation	-		
		Health Insurance	-		
-		Other (Benefits listed under ARPA Grant)	-		
	1205	Other (specify)	-		
	1206	Other (specify)	-		
Direc+	Dayroll T	axes & Expenses:	-		
שויפנו		OASDI			
		FICA/MEDICARE	_		
		SUI	_		
}	1304	Other (specify)	_		
}	1305	Other (specify)	-		
ŀ	1306	Other (specify)	_		

2000: I	DIRECT C	LIENT SUPPORT	1,312	
	2001	Child Care	-	
	2002	Client Housing Support	-	
	2003	Client Transportation & Support	262	Gas cards are distributed to clients who need financial assistance to travel to therapy
				sessions at the CYS main office. Transportation challenges are a known barrier to
				accessing mental health services, and this funding ensures that clients can attend their
				appointments consistently.

	PROGRAM EXPENSE				
ACCT#		AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE		
2004	Clothing, Food, & Hygiene	650	Gift cards are provided to clients to assist with purchasing essential items such as food, toiletries, and hygiene products. By addressing these basic needs, the funds help alleviate immediate stressors that may hinder a client's focus on mental health treatment. To align with MHSA's focus on health and well-being, the cards are restricted from being used for alcohol, tobacco, firearms, or lottery items. This ensures funds are utilized in a manner consistent with supporting clients' health and stability. By providing this resource, clients experience reduced financial strain, enabling them to focus more fully on their therapeutic goals and mental health improvement.		
2005	Education Support	400	Zoo tickets or event tickets are utilized as an incentive for young clients participating in Parent-Child Interaction Therapy (PCIT). These tickets are awarded either after a few sessions or at the program's conclusion to recognize progress, reinforce commitment, and strengthen the therapeutic relationship. By offering enriching family activities such as zoo visits, the program fosters positive family interactions, reinforces learned skills in a real-world setting, and provides clients with meaningful experiences that contribute temotional well-being.		
	Employment Support	-			
	Household Items for Clients	-			
	Medication Supports	-			
	Program Supplies - Medical	-			
2010	Utility Voucher Other	-			
2011	Other	_			
<u> </u>	Other	-			
	Other	-			
	Other	-			
2016	Other	-			
2000 212507 0					
	PERATING EXPENSES Telecommunications	-			
	Printing/Postage	_			
	Office, Household & Program Supplies	-			
	Advertising	-			
	Staff Development & Training	-			
3006	Staff Mileage	-			
3007	Subscriptions & Memberships	-			
	Vehicle Maintenance	-			
	Other (specify)	-			
	Other (specify) Other (specify)	-			
	Other (specify) Other (specify)	-			
3012	other (specify)				
4000: DIRECT FA	ACILITIES & EQUIPMENT	-			
4001	Building Maintenance	-			
	Rent/Lease Building	-			
	Rent/Lease Equipment	-			
	Rent/Lease Vehicles	-			
	Security Utilities	-			
	Other (specify)	_			
	Other (specify)	_			
	Other (specify)	-			
	Other (specify)	-			
	PECIAL EXPENSES	-	1		
	Consultant (Network & Data Management)	-			
	HMIS (Health Management Information System) Contractual/Consulting Services (Specify)	-			
	Translation Services  Translation Services				
	Other (specify)	-			
	Other (specify)	-			
	Other (specify)	-			
5008	Other (specify)	-			
6000: INDIRECT		-	1		
	Administrative Overhead	-			
	Professional Liability Insurance	-			
	Accounting/Bookkeeping External Audit	-			
	Insurance (Specify):	-			
3003		i	<u> </u>		

	PROGRAM EXPENSE					
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE			
6006	Payroll Services	-				
6007	Depreciation (Provider-Owned Equipment to be Used	-				
6008	Personnel (Indirect Salaries & Benefits)	-				
6009	Other (Indirect Cost under ARPA Grant)	-				
6010	Other (specify)	-				
6011	Other (specify)	-				
6012	Other (specify)	-				
6013	Other (specify)	-				

7000:	7000: DIRECT FIXED ASSETS -				
	7001	Computer Equipment & Software	-		
	7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA	-		
	7003	Furniture & Fixtures	-		
	7004	Leasehold/Tenant/Building Improvements			
	7005	Other Assets over \$500 with Lifespan of 2 Years +			
	7006	Assets over \$5,000/unit (Specify)			
	7007	Other (specify)			
	7008	Other (specify)	-		

TOTAL PROGRAM EXPENSE FROM BUDGET NARRATIVE:	1,312
TOTAL PROGRAM EXPENSES FROM BUDGET TEMPLATE:	1,312
BUDGET CHECK:	-

## BRIGHT BEGINNINGS FOR FAMILIES EXCEPTIONAL PARENTS UNLIMITED, INC Fiscal Year (FY) 2025-2026 | July 1, 2025 to September 30, 2025

### PROGRAM EXPENSES

	1000: DIRECT SALARIES & BENEFITS				
	mployee Salaries Administrative Position	CTC.	A dunin	Duaguaga	Total
1101	Autililistrative Position	FTE	Admin	Program	Total
1101					-
1103			-		_
1104			-		-
1105			-		-
1106			-		-
1107			-		-
1108			-		-
1109			-		-
1110			-		-
1111 1112			-		-
1112			-		_
1114			_		_
1115			_		_
	Direct Personnel Admin Salaries Subtotal	0.00	\$ -		\$ -
Acct #	Program Position	FTE	Admin	Program	Total
1116			7.5		\$ -
1117				-	-
1118				-	_
1119				-	-
1120				-	-
1121				-	-
1122				-	-
1123				-	-
1124				-	-
1125				-	-
1126 1127				-	_
1128					_
1129				-	_
1130				-	-
1131				-	-
1132				-	-
1133				-	-
1134				-	-
	Direct Personnel Program Salaries Subtotal	0.00		\$ -	\$ -
			T .	T	1 -
			Admin	Program	Total
	Direct Personnel Salaries Subtotal	0.00	\$ -	\$ -	\$ -
Direct E	mployee Benefits				
Acct #	Description		Admin	Program	Total
1201	Retirement				\$ -
1202	Worker's Compensation		-	-	-
1203	Health Insurance		-	1	-
1204	Other (Benefits listed under ARPA Grant)			-	-
1205	Other (specify)		-		-
1206	Other (specify)	ofite Cubtatel	-	-	-   e
	Direct Employee Ben	ents subtotal:	\$ -	\$ -	\$ -
Direct P	ayroll Taxes & Expenses:				
Acct #	Description		Admin	Program	Total
	OASDI		\$ -	\$ -	\$ -
1302	FICA/MEDICARE		-	-	-
	SUI		-	-	-
1304	Other (specify)		-	-	-
1305	Other (specify)		-	1	-
1306	Other (specify)	aaa Culataat	-		-
	Direct Payroll Taxes & Exper	ises Subtotal:	\$ -	\$ -	\$ -
	DIDECT EMBLOYEE CALABITE & DEN	EEITC TOTAL	A alma !	D======	Taksi
	DIRECT EMPLOYEE SALARIES & BEN	EFIIS IUIAL:	Admin	Program	Total

\$ - \$ - \$ -

DIRECT EMPLOYEE SALARIES & BENEFITS PERCENTAGE:	Admin	Program
	#DIV/0!	#DIV/0!

2000: DI	RECT CLIENT SUPPORT	
Acct #	Line Item Description	Amount
2001	Child Care	
2002	Client Housing Support	250
2003	Client Transportation & Support	650
2004	Clothing, Food, & Hygiene	250
2005	Education Support	
2006	Employment Support	
2007	Household Items for Clients	250
2008	Medication Supports	
2009	Program Supplies - Medical	
2010	Utility Voucher	600
2011	Other	
2012	Other	
2013	Other	
2014	Other	
2015	Other	
2016	Other	-
	DIRECT CLIENT CARE TOTAL	\$ 2,000

3000: DI	RECT OPERATING EXPENSES	
Acct #	ct # Line Item Description	
3001	Telecommunications	\$ -
3002	Printing/Postage	-
3003	Office, Household & Program Supplies	-
3004	Advertising	-
3005	Staff Development & Training	-
3006	Staff Mileage	-
3007	Subscriptions & Memberships	-
3008	Vehicle Maintenance	-
3009	Other (specify)	-
3010	Other (specify)	-
3011	Other (specify)	-
3012	Other (specify)	-
	DIRECT OPERATING EXPENSES TOTAL:	\$ -

Acct #	Line Item Description	
4001	Building Maintenance	\$
4002	Rent/Lease Building	
4003	Rent/Lease Equipment	
4004	Rent/Lease Vehicles	
4005	Security	
4006	Utilities	
4007	Other (specify)	
4008	Other (specify)	
4009	Other (specify)	
4010	Other (specify)	
	DIRECT FACILITIES/EQUIPMENT TOTAL:	\$

Acct #	Line Item Description	Amount	
5001	Consultant (Network & Data Management)	\$	
5002	HMIS (Health Management Information System)		
5003	Contractual/Consulting Services (Specify)		
5004	Translation Services		
5005	Other (specify)		
5006	Other (specify)		
5007	Other (specify)		
5008	Other (specify)		
	DIRECT SPECIAL EXPENSES TOTAL:	\$	

6000: IN	IDIRECT EXPENSES	
Acct #	Line Item Description	Amount

	Administrative Overhead	ĺ
6001	Use this line and only this line for approved indirect cost rate	
	Administrative Overhead	
6002	Professional Liability Insurance	-
6003	Accounting/Bookkeeping	-
6004	External Audit	-
6005	Insurance (Specify):	-
6006	Payroll Services	-
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	
6008	Personnel (Indirect Salaries & Benefits) -	
6009	Other (Indirect Cost under ARPA Grant)	
6010	Other (specify)	-
6011	Other (specify)	-
6012	Other (specify)	-
6013	Other (specify)	1
	INDIRECT EXPENSES TOTAL	\$ -

INDIRECT COST RATE	0.00%
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7000: DI	7000: DIRECT FIXED ASSETS		
Acct #	t # Line Item Description		
7001	Computer Equipment & Software	\$ -	
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-	
7003	Furniture & Fixtures	-	
7004	Leasehold/Tenant/Building Improvements	-	
7005	Other Assets over \$500 with Lifespan of 2 Years +	-	
7006	Assets over \$5,000/unit (Specify)	-	
7007	Other (specify)	-	
7008	Other (specify)	-	
	FIXED ASSETS EXPENSES TOTAL	\$ -	

TOTAL PROGRAM EXPENSES \$ 2,000

### PROGRAM FUNDING SOURCES

	8100 - SUBSTANCE USE DISORDER FUNDS		
Acct #	Line Item Description	Amo	unt
8101	Drug Medi-Cal	\$	-
8102	SABG	\$	-
	SUBSTANCE USE DISORDER FUNDS TOTAL	\$	-

	8200 - REALIGNMENT	
Acct #	Line Item Description	Amount
8201	Realignment	\$ -
	REALIGNMENT TOTAL	\$ -

	8300 - MENTAL HEALTH SERVICE ACT (MHSA)			
Acct #	MHSA Component	MHSA Program Name		Amount
8301	CSS - Community Services & Supports		\$	2,000
8302	PEI - Prevention & Early Intervention			1
8303	INN - Innovations			-
8304	WET - Workforce Education & Training			-
8305	CFTN - Capital Facilities & Technology			-
		MHSA TOTAL	\$	2,000

	8400 - OTHER REVENUE		
Acct #	Acct # Line Item Description		
8401	Client Fees		
8402	Client Insurance	-	
8403	Grants (ARPA)		
8404	Other (Specify)	-	
8405	Other (Specify)	-	
	OTHER REVENUE TOTAL	\$ -	

TOTAL PROGRAM FUNDING SOURCES:	\$	2,000
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NET PROGRAM COST: \$ -

### BRIGHT BEGINNINGS FOR FAMILIES EXCEPTIONAL PARENTS UNLIMITED, INC

Fiscal Year (FY) 2025-2026 | July 1, 2025 to September 30, 2025 | Budget Narrative

	PROGRAM	EXPENSE
ACCT # LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
): DIRECT SALARIES & BENEFITS	- '	
inistrative Positions	-	
1101 0	-	
1102 0	-	
1103 0	-	
1104 0	-	
1105 0	-	
1106 0	-	
1107 0	-	
1108 0	-	
1109 0	-	
1110 0	-	
1111 0	-	
1112 0	-	
1113 0	-	
1114 0	-	
1115 0	-	
ram Positions	-	
1116 0	-	
1117 0	-	
1118 0	-	
1119 0	-	
1120 0	-	
1121 0	-	
1122 0	-	
1123 0	-	
1124 0	-	
1125 0	-	
1126 0	-	
1127 0	-	
1128 0	-	
1129 0	-	
1130 0	-	
1131 0	-	
1132 0	-	
1133 0	-	
1134 0	-	
t Employee Benefits		
1201 Retirement	_	
1202 Worker's Compensation	-	
1203 Health Insurance	-	
1204 Other (Benefits listed under ARPA Grant)	-	
1205 Other (specify)	-	
1206 Other (specify)	-	
The state of the s	ı	
t Payroll Taxes & Expenses:	-	
1301 OASDI	-	
1302 FICA/MEDICARE	-	
1303 SUI	-	
	_	
1304 Other (specify)		
1304 Other (specify) 1305 Other (specify)	-	

DIRECT C	CLIENT SUPPORT	2,000	2,000		
2001	Child Care	-			
2002	Client Housing Support	250	Partial assistance with emergency rent/ housing for clients' family (\$250 x1 familie \$250.		
2003	Client Transportation & Support	650	Bus passes or gas cards for clients to access services (\$25 x 26 families = \$650).		
2004	Clothing, Food, & Hygiene	250	Basic needs support with food, clothing diapers for financially insecure families (\$2 10 families = \$250).		
2005	Education Support	-			
2006	Employment Support	-			
2007	Household Items for Clients		Basic necessities for client households (estimated that up to 5 of the clients served will need such assistance), \$50 x 5 = \$250).		

	PROGRAM EXPENSE				
	ACCT#	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
	2008	Medication Supports	-		
		Program Supplies - Medical	-		
	2010	Utility Voucher	600	Provide partial assistance for utility expenses for client households who are financially insecure (6 families $\times $100 = $600$ ).	
	2011	Other	-		
		Other	-		
		Other	-		
		Other Other	-		
		Other	-		
	2010	otic.			
3000:	DIRECT O	PERATING EXPENSES	-		
		Telecommunications	-		
		Printing/Postage	-		
		Office, Household & Program Supplies	-		
		Advertising Staff Development & Training			
		Staff Mileage	_		
		Subscriptions & Memberships	-		
	3008	Vehicle Maintenance	-		
		Other (specify)	-		
		Other (specify)	-		
		Other (specify)	-		
	3012	Other (specify)	-		
4000:	DIRECT FA	ACILITIES & EQUIPMENT			
		Building Maintenance	_		
		Rent/Lease Building	-		
		Rent/Lease Equipment	-		
		Rent/Lease Vehicles	-		
		Security	-		
		Utilities Other (specify)	-		
		Other (specify)	_		
		Other (specify)	-		
	4010	Other (specify)	-		
5000:		PECIAL EXPENSES	-		
		Consultant (Network & Data Management) HMIS (Health Management Information System)	-		
		Contractual/Consulting Services (Specify)			
		Translation Services	-		
		Other (specify)	-		
		Other (specify)	-		
		Other (specify)	-		
	5008	Other (specify)	-		
6000:	INDIRECT	EXPENSES	-		
		Administrative Overhead	-		
		Professional Liability Insurance	-		
	6003	Accounting/Bookkeeping	-		
		External Audit	-		
		Insurance (Specify):	-		
		Payroll Services  Depreciation (Provider-Owned Equipment to be Used	<u> </u>		
		Personnel (Indirect Salaries & Benefits)	-		
		Other (Indirect Cost under ARPA Grant)	-		
		Other (specify)	-		
		Other (specify)	-		
		Other (specify)	-		
	6013	Other (specify)	-		
7000-	DIRECT C	XED ASSETS			
7000:		Computer Equipment & Software			
		Copiers, Cell Phones, Tablets, Devices to Contain HIPAA			
		Furniture & Fixtures	-		
		Leasehold/Tenant/Building Improvements	-		
	7005	Other Assets over \$500 with Lifespan of 2 Years +	-		

PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
7006	Assets over \$5,000/unit (Specify)	-		
7007	Other (specify)	-		
7008	Other (specify)	-		

TOTAL PROGRAM EXPENSES FROM BUDGET TEMPLATE:	2,000
TOTAL PROGRAM EXPENSE FROM BUDGET NARRATIVE:	2,000

BUDGET CHECK: -

## BRIGHT BEGINNINGS FOR FAMILIES EXCEPTIONAL PARENTS UNLIMITED, INC

### Fiscal Year (FY) 2025-2026 | October 1, 2025 to December 31, 2025

#### PROGRAM EXPENSES

1201   Retirement		1000: DIRECT SALARIES & BENEFITS				
100			FTF	Admin	Program	Total
1102			112	Admin	rrogram	
1104						-
1105	1103			-		-
1106				-		-
1107				-		-
1108						-
1100						-
1110						
1112				-		_
1113	1111			-		-
1114	1112			-		-
Direct Personnel Admin Salaries Subtotal   0.00   \$ -	1113			-		-
Direct Personnel Admin Salaries Subtotal   0.00   \$ -	1114			-		-
Acct # Program Position	1115			-		-
1116			0.00	\$ -		\$ -
1117	Acct #	Program Position	FTE	Admin	Program	
1118						\$ -
1119						-
1120						-
1121						-
1122						-
1123						-
1124						-
1125						_
1126					-	_
1128					-	-
1129	1127				-	-
1131	1128				-	-
1131	1129				-	-
1132					-	-
1133						-
Direct Personnel Program Salaries Subtotal   0.00   \$ - \$						-
Direct Personnel Program Salaries Subtotal 0.00 \$ - \$ - \$    Admin   Program   Total						-
Direct Personnel Salaries Subtotal   0.00   \$ -	1134	Discret Bosses and Bosses Colories Colories	0.00			-
Direct Payroll Taxes & Expenses:     Description   Admin   Program   Total		Direct Personnel Program Salaries Subtotal	0.00		\$ -	\$ -
Direct Payroll Taxes & Expenses:     Description   Admin   Program   Total				Admin	Program	Total
Direct Employee Benefits   Description   Admin   Program   Total		Direct Personnel Salaries Subtotal	0.00			
Acct #   Description   Admin   Program   Total			0.00	,	,	,
1201   Retirement	Direct E	mployee Benefits				
1202   Worker's Compensation	Acct #	•		Admin	Program	
1203   Health Insurance						\$ -
1204   Other (Benefits listed under ARPA Grant)						-
1205   Other (specify)				-		-
1206   Other (specify)						-
Direct Employee Benefits Subtotal: \$ - \$ - \$						_
Direct Payroll Taxes & Expenses:   Acct #   Description   Admin   Program   Total	1200		ofite Subtatal			
Acct #   Description   Admin   Program   Total		Direct Employee Ben	ents subtotal:	<del>-</del>	<b>?</b> -	-
Acct #   Description   Admin   Program   Total	Direct P	ayroll Taxes & Expenses:				
1302   FICA/MEDICARE	Acct #			Admin	Program	Total
1303   SUI				\$ -	\$ -	\$ -
1304   Other (specify)				-	-	-
1305   Other (specify)				-	-	-
1306 Other (specify)    Direct Payroll Taxes & Expenses Subtotal: \$ - \$ - \$						-
Direct Payroll Taxes & Expenses Subtotal: \$ - \$ - \$						-
	1306					-
DIRECT EMPLOYEE SALARIES & BENEFITS TOTAL: Admin Program Total		Direct Payroll Taxes & Exper	ses Subtotal:	\$ -	\$ -	\$ -
DIRECT EMPLOYEE SALARIES & BENEFITS TOTAL: Admin Program Total						
		DIRECT EMPLOYEE SALARIES & BEN	EFITS TOTAL:	Admin	Program	Total

\$ - \$ - \$

DIRECT EMPLOYEE SALARIES & BENEFITS PERCENTAGE:	Admin	Program
	#DIV/0!	#DIV/0!

2000: D	2000: DIRECT CLIENT SUPPORT			
Acct #	Line Item Description	Amount		
2001	Child Care			
2002	Client Housing Support	250		
2003	Client Transportation & Support	650		
2004	Clothing, Food, & Hygiene	250		
2005	Education Support			
2006	Employment Support			
2007	Household Items for Clients	250		
2008	Medication Supports			
2009	Program Supplies - Medical			
2010	Utility Voucher	600		
2011	Other			
2012	Other			
2013	Other			
2014	Other			
2015	Other			
2016	Other	-		
-	DIRECT CLIENT CARE TOTAL	\$ 2,000		

3000: D	3000: DIRECT OPERATING EXPENSES		
Acct #	Line Item Description	Amount	
3001	Telecommunications	\$ -	
3002	Printing/Postage	-	
3003	Office, Household & Program Supplies	-	
3004	Advertising	-	
3005	Staff Development & Training	-	
3006	Staff Mileage	-	
3007	Subscriptions & Memberships	-	
3008	Vehicle Maintenance	1	
3009	Other (specify)	1	
3010	Other (specify)	-	
3011	Other (specify)	-	
3012	Other (specify)	-	
	DIRECT OPERATING EXPENSES TOTAL:	\$ -	

Acct #	Line Item Description	Amount
4001	Building Maintenance	\$
4002	Rent/Lease Building	
4003	Rent/Lease Equipment	
4004	Rent/Lease Vehicles	
4005	Security	
4006	Utilities	
4007	Other (specify)	
4008	Other (specify)	
4009	Other (specify)	
4010	Other (specify)	
	DIRECT FACILITIES/EQUIPMENT TOTAL:	Ś

Acct #	Line Item Description	Amount
5001	Consultant (Network & Data Management)	\$ -
5002	HMIS (Health Management Information System)	-
5003	Contractual/Consulting Services (Specify)	-
5004	Translation Services	-
5005	Other (specify)	-
5006	Other (specify)	
5007	Other (specify)	-
5008	Other (specify)	-
	DIRECT SPECIAL EXPENSES TOTAL:	\$ -

6000: INDIRECT EXPENSES		
Acct #	Line Item Description	Amount

	_	I (CVISCU I
	Administrative Overhead	I
6001	Use this line and only this line for approved indirect cost rate	\$ -
	Administrative Overhead	
6002	Professional Liability Insurance	-
6003	Accounting/Bookkeeping	-
6004	External Audit	-
6005	Insurance (Specify):	-
6006	Payroll Services	-
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	-
6008	Personnel (Indirect Salaries & Benefits)	-
6009	Other (Indirect Cost under ARPA Grant)	
6010	Other (specify)	-
6011	Other (specify)	-
6012	Other (specify)	-
6013	Other (specify)	-
	INDIRECT EXPENSES TOTAL	\$ -

INDIRECT COST RATE	0.00%
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7000: D	7000: DIRECT FIXED ASSETS				
Acct #	Line Item Description	Amount			
7001	Computer Equipment & Software	\$ -			
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	-			
7003	Furniture & Fixtures	-			
7004	Leasehold/Tenant/Building Improvements	-			
7005	Other Assets over \$500 with Lifespan of 2 Years +	-			
7006	Assets over \$5,000/unit (Specify)	-			
7007	Other (specify)	-			
7008	Other (specify)	-			
	FIXED ASSETS EXPENSES TOTAL	\$ -			

### TOTAL PROGRAM EXPENSES \$ 2,000

#### PROGRAM FUNDING SOURCES

8100 - SUBSTANCE USE DISORDER FUNDS					
Acct #	Acct # Line Item Description Amount				
8101	Drug Medi-Cal	\$	-		
8102	SABG	\$	-		
	SUBSTANCE USE DISORDER FUNDS TOTAL \$				

8200 - REALIGNMENT				
Acct #	Line Item Description	Į.	Amount	
8201	Realignment	\$		
	REALIGNMENT TOTAL	\$		

8300 - MENTAL HEALTH SERVICE ACT (MHSA)				
Acct #	Acct # MHSA Component MHSA Program Name		Am	ount
8301	CSS - Community Services & Supports		\$	2,000
8302	PEI - Prevention & Early Intervention			-
8303	INN - Innovations			-
8304	WET - Workforce Education & Training			-
8305	CFTN - Capital Facilities & Technology			-
MHSA TOTAL				

	8400 - OTHER REVENUE				
Acct #	Line Item Description	Amount			
8401	Client Fees				
8402	Client Insurance	-			
8403	Grants (ARPA)				
8404	Other (Specify)	-			
8405	Other (Specify)	-			
	OTHER REVENUE TOTAL	\$ -			

TOTAL PROGRAM FUNDING SOURCES:	\$ 2,000

NET PROGRAM COST:	\$-
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### BRIGHT BEGINNINGS FOR FAMILIES EXCEPTIONAL PARENTS UNLIMITED, INC

Fiscal Year (FY) 2025-2026 | October 1, 2025 to December 31, 2025 Budget Narrative

1000: D Adminis	ACCT #		AMT	M EXPENSE
1000: D Adminis				DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
Adminis		SALARIES & BENEFITS	-	
	trative I		_	
		0	_	
	1102		_	
	1103		_	
	1104		-	
_		0	-	
	1106		-	
	1107	0	-	
		0	-	
	1109	0	-	
	1110	0	-	
	1111	0	-	
		0	-	
		0	-	
	1114		-	
	1115			
Program	n Positio	ns	-	
		0	-	
	1117		-	
	1118	0	-	
		0	-	
	1120		-	
		0	-	
		0	-	
		0	-	
	1124		-	
	1125	0	-	
	1126		-	
		0	-	
		0	-	
_		0	-	
		0	-	
		0	-	
	1132		-	
		0	-	
	1134	0	-	
Direct 5	mala	a Damafita		
		e Benefits	1	
		Retirement Worker's Compossion	-	
		Worker's Compensation	-	
		Health Insurance Other (Benefits listed under ARPA Grant)		
_		Other (specify)	-	
	1205	Other (specify)  Other (specify)	-	
<del>                                     </del>	1200	Other (specify)	_	
Direct P	avroll T	axes & Expenses:		
		OASDI	-	
		FICA/MEDICARE	-	
		SUI	-	
		Other (specify)	-	
		Other (specify) Other (specify)	-	
		Other (specify)	_	
шЬ	1300	outer (specify)	l.	

DIRECT C	CLIENT SUPPORT	2,000		
2001	Child Care	-		
2002	Client Housing Support	250	Partial assistance with emergency rent/ housing for clients' family (\$250 x1 families = \$250.	
2003	Client Transportation & Support	650	Bus passes or gas cards for clients to access services (\$25 x 26 families = \$650).	
2004	Clothing, Food, & Hygiene	250	Basic needs support with food, clothing diapers for financially insecure families (\$25 10 families = \$250).	

		PROGRAM	I EXPENSE
ACCT#	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LIN
2005	Education Support	ī	
2006	Employment Support	1	
2007	Household Items for Clients	250	Basic necessities for client households (estimated that up to 5 of
			the clients served will need such assistance), $$50 \times 5 = $250$ ).
2008	Medication Supports	1	
2009	Program Supplies - Medical	1	
2010	Utility Voucher	600	Provide partial assistance for utility expenses for client households who are finance
			insecure (6 families x \$100 = \$600).
2011	Other	1	
2012	Other	1	
2013	Other	1	
2014	Other	1	
2015	Other	-	
2016	Other	-	
DIRECT O	PERATING EXPENSES	-	
	Telecommunications	-	
	Printing/Postage	_	
	Office, Household & Program Supplies	_	
	Advertising	-	
	Staff Development & Training	-	
	Staff Mileage	-	
	Subscriptions & Memberships	-	
3008	Vehicle Maintenance	1	
	Other (specify)	1	
	Other (specify)	1	
	Other (specify)	-	
3012	Other (specify)	-	
DIRECT F	ACILITIES & EQUIPMENT	-	
4001	Building Maintenance	-	
	Rent/Lease Building	1	
4003	Rent/Lease Equipment	-	
4004	Rent/Lease Vehicles	-	
4005	Security	-	
4006	Utilities	-	
4007	Other (specify)	-	
4008	Other (specify)	-	
4009	Other (specify)	-	
4010	Other (specify)	•	
DIRECT SI	PECIAL EXPENSES	-	
5001	Consultant (Network & Data Management)	-	
	HMIS (Health Management Information System)	1	
	Contractual/Consulting Services (Specify)		
5003	Contractual/Consulting Services (Specify)	-	
	Translation Services  Translation Services	-	
5004			
5004 5005	Translation Services	-	
5004 5005 5006	Translation Services Other (specify)	-	
5004 5005 5006 5007	Translation Services Other (specify) Other (specify)	-	
5004 5005 5006 5007	Translation Services Other (specify) Other (specify) Other (specify)	- - -	
5004 5005 5006 5007 5008	Translation Services Other (specify) Other (specify) Other (specify)	- - -	
5004 5005 5006 5007 5008	Translation Services Other (specify) Other (specify) Other (specify) Other (specify) EXPENSES	- - -	
5004 5005 5006 5007 5008 NDIRECT 6001	Translation Services Other (specify) Other (specify) Other (specify) Other (specify)  EXPENSES Administrative Overhead	-	
5004 5005 5006 5007 5008 NDIRECT 6001 6002	Translation Services Other (specify) Other (specify) Other (specify) Other (specify)  EXPENSES Administrative Overhead Professional Liability Insurance	-	
5004 5005 5006 5007 5008 NDIRECT 6001 6002 6003	Translation Services Other (specify) Other (specify) Other (specify) Other (specify)  EXPENSES Administrative Overhead Professional Liability Insurance Accounting/Bookkeeping	-	
5004 5005 5006 5007 5008 NDIRECT 6001 6002 6003 6004	Translation Services Other (specify) Other (specify) Other (specify) Other (specify)  EXPENSES Administrative Overhead Professional Liability Insurance Accounting/Bookkeeping External Audit	-	
5004 5005 5006 5007 5008 NDIRECT 6001 6002 6003 6004 6005	Translation Services Other (specify) Other (specify) Other (specify) Other (specify)  EXPENSES  Administrative Overhead Professional Liability Insurance Accounting/Bookkeeping External Audit Insurance (Specify):		
5004 5005 5006 5007 5008 NDIRECT 6001 6002 6003 6004 6005 6006	Translation Services Other (specify) Other (specify) Other (specify) Other (specify)  EXPENSES  Administrative Overhead Professional Liability Insurance Accounting/Bookkeeping External Audit Insurance (Specify): Payroll Services		
5004 5005 5006 5007 5008 NDIRECT 6001 6002 6003 6004 6005 6006 6007	Translation Services Other (specify) Other (specify) Other (specify) Other (specify) Other (specify)  EXPENSES  Administrative Overhead Professional Liability Insurance Accounting/Bookkeeping External Audit Insurance (Specify): Payroll Services Depreciation (Provider-Owned Equipment to be Used		
5004 5005 5006 5007 5008 NDIRECT 6001 6002 6003 6004 6005 6006 6007 6008	Translation Services Other (specify) Other (specify) Other (specify) Other (specify) Other (specify)  EXPENSES  Administrative Overhead Professional Liability Insurance Accounting/Bookkeeping External Audit Insurance (Specify): Payroll Services Depreciation (Provider-Owned Equipment to be Used Personnel (Indirect Salaries & Benefits)		
5004 5005 5006 5007 5008 NDIRECT 6001 6002 6003 6004 6005 6006 6007 6008 6009	Translation Services Other (specify) Other (specify) Other (specify) Other (specify) Other (specify)  EXPENSES  Administrative Overhead Professional Liability Insurance Accounting/Bookkeeping External Audit Insurance (Specify): Payroll Services Depreciation (Provider-Owned Equipment to be Used Personnel (Indirect Salaries & Benefits) Other (Indirect Cost under ARPA Grant)		
5004 5005 5006 5007 5008 NDIRECT 6001 6002 6003 6004 6005 6006 6007 6008 6009 6010	Translation Services Other (specify) Other (specify) Other (specify) Other (specify) Other (specify)  EXPENSES  Administrative Overhead Professional Liability Insurance Accounting/Bookkeeping External Audit Insurance (Specify): Payroll Services Depreciation (Provider-Owned Equipment to be Used Personnel (Indirect Salaries & Benefits)		

PROGRAM EXPENSE						
ACCT#	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE			
6013	Other (specify)	-				

7000:	000: DIRECT FIXED ASSETS -					
	7001	Computer Equipment & Software	-			
	7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA	-			
	7003	Furniture & Fixtures	-			
	7004	Leasehold/Tenant/Building Improvements	-			
	7005	Other Assets over \$500 with Lifespan of 2 Years +	-			
	7006	Assets over \$5,000/unit (Specify)	-			
	7007	Other (specify)	-			
	7008	Other (specify)	-			

TOTAL PROGRAM EXPENSE FROM BUDGET NARRATIVE:	2,000
TOTAL PROGRAM EXPENSES FROM BUDGET TEMPLATE:	2,000
BUDGET CHECK:	-

# BRIGHT BEGINNINGS FOR FAMILIES PACIFIC CLINICS Fiscal Year (FY) 2025-2026 | July 1, 2025 to September 30, 2025

### PROGRAM EXPENSES

		VI EXPENSES				
	1000: DIRECT SA	LARIES & BENI	FITS			
	mployee Salaries					
1101	Administrative Position	FTE	Admin	Program	\$	Total
1101					Ş	
1103			-			
1104			-			
1105			-			
1106			-			
1107			-			
1108			-			
1109			-			
1110 1111			-			
1112						
1113			-			
1114			-			
1115			-			
	Direct Personnel Admin Salaries Subtotal	0.00	\$ -		\$	
	Program Position	FTE	Admin	Program		Total
1116					\$	
1117				-		
1118 1119				-		
1120				_		
1121				-		
1122				-		
1123				-		
1124				-		
1125				-		
1126 1127				-		
1128				_		
1129				-		
1130				-		
1131				-		
1132				-		
1133				-		
1134	Direct Personnel Program Salaries Subtotal	0.00		\$ -	\$	
	Direct Personner Program Salaries Subtotal	0.00		7	Ÿ	
				1		Total
			Admin	Program		Total
	Direct Personnel Salaries Subtotal	0.00	\$ -		\$	TOLAI
Direct F		0.00			\$	Total
Direct E	Direct Personnel Salaries Subtotal  mployee Benefits  Description	0.00	\$ -	\$ -	\$	
Acct #	mployee Benefits	0.00			<b>\$</b>	Total
Acct # 1201	mployee Benefits Description	0.00	\$ -	\$ -		
1201 1202 1203	mployee Benefits  Description  Retirement  Worker's Compensation  Health Insurance	0.00	\$ -	\$ -		
1201 1202 1203 1204	mployee Benefits  Description  Retirement  Worker's Compensation  Health Insurance  Other (Benefits listed under ARPA Grant)	0.00	\$ -	Program		
Acct # 1201 1202 1203 1204 1205	mployee Benefits  Description  Retirement  Worker's Compensation  Health Insurance  Other (Benefits listed under ARPA Grant)  Other (specify)	0.00	Admin	Program		
Acct # 1201 1202 1203 1204 1205	mployee Benefits  Description  Retirement  Worker's Compensation  Health Insurance  Other (Benefits listed under ARPA Grant)  Other (specify)  Other (specify)		Admin	Program	\$	
Acct # 1201 1202 1203 1204 1205	mployee Benefits  Description  Retirement  Worker's Compensation  Health Insurance  Other (Benefits listed under ARPA Grant)  Other (specify)		Admin	Program		
Acct # 1201 1202 1203 1204 1205 1206	mployee Benefits  Description  Retirement  Worker's Compensation  Health Insurance  Other (Benefits listed under ARPA Grant)  Other (specify)  Other (specify)		Admin	Program	\$	
1201 1202 1203 1204 1205 1206	mployee Benefits  Description  Retirement  Worker's Compensation  Health Insurance  Other (Benefits listed under ARPA Grant)  Other (specify)  Other (specify)  Direct Employee Benefits Expenses:  Description		Admin  S - Admin	Program	\$	
1201 1202 1203 1204 1205 1206 Direct Pa	mployee Benefits  Description  Retirement  Worker's Compensation  Health Insurance  Other (Benefits listed under ARPA Grant)  Other (specify)  Other (specify)  Direct Employee Benefits Expenses:  Description  OASDI		\$ -  Admin  \$ -  Admin  \$ -	Program	\$	Total
1201 1202 1203 1204 1205 1206 Direct P. Acct # 1301 1302	mployee Benefits  Description  Retirement  Worker's Compensation  Health Insurance  Other (Benefits listed under ARPA Grant)  Other (specify)  Other (specify)  Direct Employee Benefits Expenses:  Description  OASDI  FICA/MEDICARE		\$ -  Admin  \$ -  Admin  \$ -	Program	\$	Total
1201 1202 1203 1204 1205 1206 1206 Direct P. Acct # 1301 1302 1303	mployee Benefits  Description  Retirement  Worker's Compensation  Health Insurance  Other (Benefits listed under ARPA Grant)  Other (specify)  Other (specify)  Direct Employee Benefits Expenses:  Description  OASDI  FICA/MEDICARE  SUI		\$ -  Admin  \$ -  Admin	Program	\$	Total
1201 1202 1203 1204 1205 1206 1206 Direct P Acct # 1301 1302 1303 1304	mployee Benefits  Description  Retirement  Worker's Compensation  Health Insurance Other (Benefits listed under ARPA Grant) Other (specify) Other (specify)  Direct Employee Ben  ayroll Taxes & Expenses:  Description  OASDI  FICA/MEDICARE  SUI Other (specify)		\$ -  Admin  \$ -  Admin	Program	\$	Total
1201 1202 1203 1204 1205 1206 1206 Direct P Acct # 1301 1302 1303 1304 1305	mployee Benefits  Description  Retirement  Worker's Compensation  Health Insurance Other (Benefits listed under ARPA Grant) Other (specify) Other (specify)  Direct Employee Ben  ayroll Taxes & Expenses:  Description  OASDI  FICA/MEDICARE  SUI Other (specify)  Other (specify)		\$ -  Admin  \$ -  Admin	Program	\$	Total
1201 1202 1203 1204 1205 1206 1206 Direct P Acct # 1301 1302 1303 1304 1305	mployee Benefits  Description  Retirement  Worker's Compensation  Health Insurance Other (Benefits listed under ARPA Grant) Other (specify) Other (specify)  Direct Employee Ben  ayroll Taxes & Expenses:  Description  OASDI  FICA/MEDICARE  SUI Other (specify)	efits Subtotal:	\$ -  Admin  \$ -  Admin	Program	\$	Total
Acct # 1201 1202 1203 1204 1205 1206  Direct P Acct # 1301 1302 1303 1304 1305	mployee Benefits  Description  Retirement  Worker's Compensation  Health Insurance  Other (Benefits listed under ARPA Grant)  Other (specify)  Other (specify)  Direct Employee Ben  ayroll Taxes & Expenses:  Description  OASDI  FICA/MEDICARE  SUI  Other (specify)  Other (specify)  Other (specify)  Other (specify)  Other (specify)  Other (specify)  Other (specify)	efits Subtotal:	\$ -  Admin  \$ -  Admin	\$ -  Program	\$	Total

|\$ -|\$ -|\$

DIRECT EMPLOYEE SALARIES & BENEFITS PERCENTAGE:	Admin	Program
	#DIV/0!	#DIV/0!

2000: D	IRECT CLIENT SUPPORT		
Acct #	Line Item Description	Amou	nt
2001	Child Care		
2002	Client Housing Support		194
2003	Client Transportation & Support		313
2004	Clothing, Food, & Hygiene		1,132
2005	Education Support		48
2006	Employment Support		
2007	Household Items for Clients		290
2008	Medication Supports		
2009	Program Supplies - Medical		
2010	Utility Voucher		144
2011	Client Housing Operating Expenditures		289
2012	Other		
2013	Other		
2014	Other		
2015	Other		
2016	Other		-
	DIRECT CLIENT CARE TOTAL	\$	2,410

3000: DI	3000: DIRECT OPERATING EXPENSES			
Acct #	Line Item Description			
3001	Telecommunications	\$ -		
3002	Printing/Postage	-		
3003	Office, Household & Program Supplies	-		
3004	Advertising	-		
3005	Staff Development & Training	-		
3006	Staff Mileage	-		
3007	Subscriptions & Memberships	-		
3008	Vehicle Maintenance	-		
3009	Other (specify)	-		
3010	Other (specify)	-		
3011	Other (specify)	-		
3012	Other (specify)	-		
-	DIRECT OPERATING EXPENSES TOTAL:	\$ -		

Acct #	Line Item Description	
4001	Building Maintenance	\$
4002	Rent/Lease Building	
4003	Rent/Lease Equipment	
4004	Rent/Lease Vehicles	
4005	Security	
4006	Utilities	
4007	Other (specify)	
4008	Other (specify)	
4009	Other (specify)	
4010	Other (specify)	
	DIRECT FACILITIES/EQUIPMENT TOTAL:	\$

Acct #	Line Item Description	
5001	Consultant (Network & Data Management)	\$
5002	HMIS (Health Management Information System)	
5003	Contractual/Consulting Services (Specify)	
5004	Translation Services	
5005	Other (specify)	
5006	Other (specify)	
5007	Other (specify)	
5008	Other (specify)	
	DIRECT SPECIAL EXPENSES TOTAL:	\$

6000: INDIRECT EXPENSES		
Acct #	Line Item Description	Amount

	Administrative Overhead	ĺ
6001	Use this line and only this line for approved indirect cost rate	\$ -
	Administrative Overhead	
6002	Professional Liability Insurance	-
6003	Accounting/Bookkeeping	-
6004	External Audit	-
6005	Insurance (Specify):	-
6006	Payroll Services	-
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	-
6008	Personnel (Indirect Salaries & Benefits)	-
6009	Other (Indirect Cost under ARPA Grant)	
6010	Other (specify)	-
6011	Other (specify)	-
6012	Other (specify)	-
6013	Other (specify)	1
	INDIRECT EXPENSES TOTAL	\$ -

Acct #	Line Item Description		Amount	
7001	Computer Equipment & Software	\$	-	
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data		-	
7003	Furniture & Fixtures		-	
7004	Leasehold/Tenant/Building Improvements		-	
7005	Other Assets over \$500 with Lifespan of 2 Years +		-	
7006	Assets over \$5,000/unit (Specify)		-	
7007	Other (specify)		-	
7008	Other (specify)		-	
	FIXED ASSETS EXPENSES TOTAL	\$	-	

TOTAL PROGRAM EXPENSES \$ 2,410

### PROGRAM FUNDING SOURCES

	8100 - SUBSTANCE USE DISORDER FUNDS				
Acct #	Line Item Description	Amo	unt		
8101	Drug Medi-Cal	\$	-		
8102	SABG	\$	-		
	SUBSTANCE USE DISORDER FUNDS TOTAL	\$	-		

	8200 - REALIGNMENT				
Acct #	Line Item Description	Amount			
8201	Realignment	\$ -			
	REALIGNMENT TOTAL	\$ -			

	8300 - MENTAL HEALTH SERVICE ACT (MHSA)				
Acct #	MHSA Component	MHSA Program Name		Amount	
8301	CSS - Community Services & Supports		\$	2,410	
8302	PEI - Prevention & Early Intervention			-	
8303	INN - Innovations			-	
8304	WET - Workforce Education & Training			-	
8305	CFTN - Capital Facilities & Technology			-	
		MHSA TOTAL	\$	2,410	

	8400 - OTHER REVENUE					
Acct #	Line Item Description	Amount				
8401	Client Fees					
8402	Client Insurance	-				
8403	Grants (ARPA)					
8404	Other (Specify)	-				
8405	Other (Specify)	-				
	OTHER REVENUE TOTAL	\$ -				

TOTAL PROGRAM FUNDING SOURCES:	\$	2,410
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NET PROGRAM COST: \$ -

### BRIGHT BEGINNINGS FOR FAMILIES PACIFIC CLINICS

Fiscal Year (FY) 2025-2026 | July 1, 2025 to September 30, 2025 Budget Narrative

PROGRAM EXPENSE					
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE		
	SALARIES & BENEFITS	-			
ninistrative		-			
1101	0	_			
1102	0	_			
1103	0	-			
1104	0	-			
1105	0	-			
1106	0	-			
1107	0	-			
1108	0	-			
1109	0	-			
1110	0	-			
1111	0	-			
1112	0	-			
1113	0	-			
1114	0	-			
1115	0	-			
gram Positi		-			
1116	0	-			
1117	0	=			
1118	0	=			
1119	0	-			
1120	0	-			
1121 1122	0	-			
1123	0	-			
1124	0	_			
1125	0	_			
1126	0	_			
1127	0	_			
1128	0	_			
1129	0	-			
1130	0	-			
1131	0	-			
1132	0	-			
1133	0	-			
1134	0	-			
ct Employe	e Benefits				
1201	Retirement	-			
1202	Worker's Compensation	-			
1203	Health Insurance	-			
	Other (Benefits listed under ARPA Grant)	-			
1205	Other (specify)	-			
1206	Other (specify)	-			
-1 D- "-	0 5				
	Taxes & Expenses:	-			
	OASDI SICA MAEDICA DE	-			
	FICA/MEDICARE	-			
1303		-			
	Other (specify)	-			
1304					
1305	Other (specify) Other (specify)	-			

2000: DIRECT	CLIENT SUPPORT	2,410	
2001	Child Care	-	
2002	Client Housing Support		This includes, but is not limited to: housing subsidies for permanent, transitional and temporary housing, master leases, motel and other housing vouchers, rental security deposits, first and last month rental payments, and other fiscal housing supports resources.

			PROGRAM	/I EXPENSE
	ACCT#	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
	2003	Client Transportation & Support		This includes bus vouchers and reimbursements for other travel expenses as lack of transportation is frequently a major barrier for families in accessing services. This also includes other non-traditional supports to meet the needs that families may have.
	2004	Clothing, Food, & Hygiene	1,132	Supports for these basic needs aids in fully realizing the benefits provided through Full Service Partnerships. In addition to vouchers for these basic necessities, food/snacks for families are provided during treatment sessions.
-	2005	Education Support	48	This includes, but is not limited to assistance for youth with linkages to educational resources and supports, as well as support in addressing any barriers that impact educational success.
	2006	Employment Support	-	
	2007	Household Items for Clients	290	Supports the purchase of household items to assist in maintaining a safe, healthy, and secure home environment.
	2008	Medication Supports	-	
	2009	Program Supplies - Medical	-	
	2010	Utility Voucher	144	Supports emergency assistance with maintaining electricity, gas, water, trash pic-up, etc. to maintain a safe and healthy home environment.
	2011	Client Housing Operating Expenditures	289	This includes, but is not limited to building repair and maintenance, utilities, housing agency management fees, insurance, property taxes and assessments, credit reporting fees, and other operating costs incurred in providing child and family housing supports.
	2012	Other	_	
	2012	Other	-	
	2014	Other	-	
	2015	Other	-	
	2016	Other	-	
2000. [	DIRECT	DEDATING EVERNICES		
3000: 1	3001	PERATING EXPENSES Telecommunications	-	
	3002	Printing/Postage	-	
	3003	Office, Household & Program Supplies	-	
	3004	Advertising	-	
	3005	Staff Development & Training	-	
	3006 3007	Staff Mileage Subscriptions & Memberships	-	
		Vehicle Maintenance	-	
	3009	Other (specify)	-	
	3010	Other (specify)	-	
	3011	Other (specify)	-	
	3012	Other (specify)	-	
4000 ·	DIRECT E	ACILITIES & EQUIPMENT		
-300.1	4001	Building Maintenance	-	
	4002	Rent/Lease Building	-	
	4003	Rent/Lease Equipment	-	
1	4004	Rent/Lease Vehicles	-	
	4005	Security	-	
1	4006 4007	Utilities Other (specify)	-	
	4007	Other (specify)	-	
	4009	Other (specify)	-	
	4010	Other (specify)	-	
5000: I		PECIAL EXPENSES	-	
1	5001	Consultant (Network & Data Management)	-	
	5002 5003	HMIS (Health Management Information System) Contractual/Consulting Services (Specify)	-	
1	5004	Translation Services	-	
<b>i</b> +	5005	Other (specify)	-	
1			1	
	5006	Other (specify)	-	
-	5006 5007 5008	Other (specify) Other (specify) Other (specify)	-	

PROGRAM EXPENSE						
ACCT#	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LIN			
INDIRECT	EXPENSES	-				
6001	Administrative Overhead	-				
6002	Professional Liability Insurance	-				
6003	Accounting/Bookkeeping	-				
6004	External Audit	-				
6005	Insurance (Specify):	-				
6006	Payroll Services	-				
6007	Depreciation (Provider-Owned Equipment to be Used	-				
6008	Personnel (Indirect Salaries & Benefits)	-				
6009	Other (Indirect Cost under ARPA Grant)	-				
6010	Other (specify)	-				
6011	Other (specify)	-				
6012	Other (specify)	-				
6013	Other (specify)	-				
DIRECT FI	IXED ASSETS					
	Computer Equipment & Software	-				
	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Furniture & Fixtures	-				
	1 11 1 11 11	-				
7004	Leasehold/Tenant/Building Improvements	-				
	Other Assets over \$500 with Lifespan of 2 Years +	-				
	Assets over \$5,000/unit (Specify)	-				
	Other (specify)	-				
7008	Other (specify)	-				

TOTAL PROGRAM EXPENSE FROM BUDGET NARRATIVE: 2,410
TOTAL PROGRAM EXPENSES FROM BUDGET TEMPLATE: 2,410

BUDGET CHECK:

### BRIGHT BEGINNINGS FOR FAMILIES PACIFIC CLINICS

### Fiscal Year (FY) 2025-2026 | October 1, 2025 to December 31, 2025

### PROGRAM EXPENSES

	1000: DIRECT SAI	LARIES & BEN	IEFITS		
	Employee Salaries		1		
Acct # 1101	Administrative Position	FTE	Admin	Program	Total
1101			1		\$
1103			-		
1104			-		
1105			-		
1106			-		
1107			-		
1108 1109			-		
1110			<del> </del>		
1111			-		
1112			-		
1113			-		
1114			-		
1115			-		
	Direct Personnel Admin Salaries Subtotal	0.00	\$ -		\$
1116	Program Position	FTE	Admin	Program	Total
1117				-	\$
1118				-	
1119				-	
1120				-	
1121				-	
1122				-	
1123				-	
1124 1125				-	
1126				-	
1127				-	
1128				-	
1129				-	
1130				-	
1131				-	
1132 1133				-	
1134				-	
1151	Direct Personnel Program Salaries Subtotal	0.00		\$ -	\$
			<u></u>		
			Admin	Program	Total
	Direct Personnel Salaries Subtotal	0.00	\$ -	\$ -	\$
Direct E	Employee Benefits				
Acct #	Description		Admin	Program	Total
1201	Retirement				\$
1202	Worker's Compensation		-		
1203	Health Insurance		-		
1204	Other (Benefits listed under ARPA Grant) Other (specify)			-	
1205 1206	Other (specify) Other (specify)		-		
1200	Direct Employee Bene	efits Subtotal			\$
			-1 4	1	Y
	Payroll Taxes & Expenses:		1		1
Acct #	-		Admin	Program	Total
1301	OASDI EICA/MEDICARE		\$ -	<u> </u>	\$
1302	FICA/MEDICARE SUI		-	1	
1302	Other (specify)		-	+	
1303 1304			1		1
1303 1304 1305	Other (specify)		-	-	
1304			-	+	
1304 1305	Other (specify)	ses Subtotal:	-	-	\$

DIRECT EMPLOYEE SALARIES & BENEFITS TOTAL:	Admin	Program	Total
	\$ -	\$ -	\$ -

DIRECT EMPLOYEE SALARIES & BENEFITS PERCENTAGE:	Admin	Program
	#DIV/0!	#DIV/0!

2000: DI	2000: DIRECT CLIENT SUPPORT				
Acct #	Line Item Description	Amount			
2001	Child Care				
2002	Client Housing Support	195			
2003	Client Transportation & Support	313			
2004	Clothing, Food, & Hygiene	1,132			
2005	Education Support	48			
2006	Employment Support				
2007	Household Items for Clients	290			
2008	Medication Supports				
2009	Program Supplies - Medical				
2010	Utility Voucher	144			
2011	Client Housing Operating Expenditures	289			
2012	Other				
2013	Other				
2014	Other				
2015	Other				
2016	Other	-			
_	DIRECT CLIENT CARE TOTAL	\$ 2,411			

Acct #	Line Item Description	Amount
3001	Telecommunications	\$ -
3002	Printing/Postage	-
3003	Office, Household & Program Supplies	-
3004	Advertising	-
3005	Staff Development & Training	-
3006	Staff Mileage	-
3007	Subscriptions & Memberships	-
3008	Vehicle Maintenance	-
3009	Other (specify)	-
3010	Other (specify)	-
3011	Other (specify)	-
3012	Other (specify)	ı
	DIRECT OPERATING EXPENSES TOTAL:	\$ -

Acct #	Line Item Description	Amount
4001	Building Maintenance	\$ -
4002	Rent/Lease Building	-
4003	Rent/Lease Equipment	-
4004	Rent/Lease Vehicles	-
4005	Security	-
4006	Utilities	-
4007	Other (specify)	-
4008	Other (specify)	-
4009	Other (specify)	-
4010	Other (specify)	
	DIRECT FACILITIES/EQUIPMENT TOTAL:	\$ -

5000: DI	5000: DIRECT SPECIAL EXPENSES				
Acct #	Line Item Description	Amount			
5001	Consultant (Network & Data Management)	\$ -			
5002	HMIS (Health Management Information System)	-			
5003	Contractual/Consulting Services (Specify)	-			
5004	Translation Services	-			
5005	Other (specify)	-			
5006	Other (specify)	-			
5007	Other (specify)	-			
5008	Other (specify)	-			
	DIRECT SPECIAL EXPENSES TOTAL:	\$ -			

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Acct #	Line Item Description	Amount
	Administrative Overhead	
6001	Use this line and only this line for approved indirect cost rate	\$ -
	Administrative Overhead	
6002	Professional Liability Insurance	-
6003	Accounting/Bookkeeping	-
6004	External Audit	-
6005	Insurance (Specify):	-
6006	Payroll Services	-
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	ı
6008	Personnel (Indirect Salaries & Benefits)	T
6009	Other (Indirect Cost under ARPA Grant)	
6010	Other (specify)	-
6011	Other (specify)	-
6012	Other (specify)	-
6013	Other (specify)	-
	INDIRECT EXPENSES TOTAL	\$ -

INDIRECT COST RATE	0.00%
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Acct #	Line Item Description	Amount
7001	Computer Equipment & Software	\$
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	
7003	Furniture & Fixtures	
7004	Leasehold/Tenant/Building Improvements	
7005	Other Assets over \$500 with Lifespan of 2 Years +	
7006	Assets over \$5,000/unit (Specify)	
7007	Other (specify)	
7008	Other (specify)	
	FIXED ASSETS EXPENSES TOTAL	Ś

#### TOTAL PROGRAM EXPENSES \$ 2,411

### PROGRAM FUNDING SOURCES

8100 - SUBSTANCE USE DISORDER FUNDS				
Acct #	Line Item Description		Amount	
8101	Drug Medi-Cal	\$		
8102	SABG	\$		
	SUBSTANCE USE DISORDER FUNDS TOTAL	Ś		

	8200 - REALIGNMENT				
Acct #	Line Item Description		Amount		
8201	Realignment	\$	-		
	REALIGNMENT TOTAL	\$	-		

	8300 - MENTAL HEALTH SERVICE ACT (MHSA)			
Acct #	MHSA Component	MHSA Program Name	P	Amount
8301	CSS - Community Services & Supports		\$	2,411
8302	PEI - Prevention & Early Intervention			-
8303	INN - Innovations			-
8304	WET - Workforce Education & Training			-
8305	CFTN - Capital Facilities & Technology			-
		MHSA TOTAL	\$	2,411

	8400 - OTHER REVENUE			
Acct #	Line Item Description	Amount		
8401	Client Fees			
8402	Client Insurance	-		
8403	Grants (ARPA)			
8404	Other (Specify)	-		
8405	Other (Specify)	-		
	OTHER REVENUE TOTAL	\$ -		

TOTAL PROGRAM FUNDING SOURCES:	\$ 2,411

NET PROGRAM COST: \$ -

### BRIGHT BEGINNINGS FOR FAMILIES PACIFIC CLINICS

Fiscal Year (FY) 2025-2026 | October 1, 2025 to December 31, 2025 Budget Narrative

		PROGRAM	EXPENSE
ACCT#	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
: DIRECT	SALARIES & BENEFITS	-	
nistrative		_	
1101	0	-	
	0	-	
	0	-	
	0	-	
1105	0	-	
1106	0	-	
1107	0	-	
1108	0	-	
1109	0	-	
1110	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
am Positio		-	
	0	-	
1117	0	-	
	0	-	
1119	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0		
1154	0	-	
t Fmplove	e Benefits		
	Retirement	-	
	Worker's Compensation	-	
	Health Insurance	-	
	Other (Benefits listed under ARPA Grant)	_	
	Other (specify)	-	
	Other (specify)	-	
•			
t Payroll T	axes & Expenses:	-	
	OASDI	-	
1302	FICA/MEDICARE	-	
1303		-	
	Other (specify)	_	
1304	outer (speen //		
	Other (specify)	-	

2000: DIRECT (	CLIENT SUPPORT	2,411	
2001	Child Care	-	
2002	Client Housing Support		This includes, but is not limited to: housing subsidies for permanent, transitional and temporary housing, master leases, motel and other housing vouchers, rental security deposits, first and last month rental payments, and other fiscal housing supports resources.

		PROGRAM	1 EXPENSE
ACCT#	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
	Client Transportation & Support	313	This includes bus vouchers and reimbursements for other travel expenses as lack of transportation is frequently a major barrier for families in accessing services. This al includes other non-traditional supports to meet the needs that families may have.
2004	Clothing, Food, & Hygiene	1,132	Supports for these basic needs aids in fully realizing the benefits provided through F Service Partnerships. In addition to vouchers for these basic necessities, food/snack for families are provided during treatment sessions.
2005	Education Support	48	This includes, but is not limited to assistance for youth with linkages to educational resources and supports, as well as support in addressing any barriers that impact educational success.
	Employment Support Household Items for Clients	- 290	Supports the purchase of household items to assist in maintaining a safe, healthy, a secure home environment.
			secure nome environment.
	Medication Supports  Program Supplies Medical	-	
	Program Supplies - Medical Utility Voucher	144	Supports emergency assistance with maintaining electricity, gas, water, trash pic-up etc. to maintain a safe and healthy home environment.
2011	Client Housing Operating Expenditures	289	This includes, but is not limited to building repair and maintenance, utilities, housin agency management fees, insurance, property taxes and assessments, credit report fees, and other operating costs incurred in providing child and family housing support to the control of th
2012	Other	-	
	Other	-	
2014	Other	-	
2015	Other	-	
2016	Other	-	
NDECT O	PERATING EXPENSES		
	Telecommunications		
	Printing/Postage	_	
	Office, Household & Program Supplies	-	
	Advertising	-	
3005	Staff Development & Training	-	
	Staff Mileage	-	
	Subscriptions & Memberships	-	
	Vehicle Maintenance	-	
	Other (specify) Other (specify)	-	
	Other (specify) Other (specify)	-	
	Other (specify)	-	
DIRECT FA	ACILITIES & EQUIPMENT	-	
	Building Maintenance	-	
	Rent/Lease Building	-	
	Rent/Lease Equipment	-	
	Rent/Lease Vehicles	-	
	Security Utilities	-	
	Other (specify)	-	
	Other (specify) Other (specify)	-	
	Other (specify)	_	
	Other (specify)	-	
,_0	ASE ST. II	1	
DIRECT SE	PECIAL EXPENSES	-	
	Consultant (Network & Data Management)	-	
	HMIS (Health Management Information System)	-	
	Contractual/Consulting Services (Specify)	_	
5005			

5004 Translation Services

	PROGRAM EXPENSE			
1	ACCT#	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
	5005	Other (specify)	-	
	5006	Other (specify)	-	
	5007	Other (specify)	-	
	5008	Other (specify)	-	

6000: INDIREC	5000: INDIRECT EXPENSES -				
6001	Administrative Overhead	-			
6002	Professional Liability Insurance	-			
6003	Accounting/Bookkeeping	-			
6004	External Audit	-			
6005	Insurance (Specify):	-			
6006	Payroll Services	-			
6007	Depreciation (Provider-Owned Equipment to be Used	-			
6008	Personnel (Indirect Salaries & Benefits)	-			
6009	Other (Indirect Cost under ARPA Grant)	-			
6010	Other (specify)	-			
6011	Other (specify)	-			
6012	Other (specify)	-			
6013	Other (specify)	-			

7000: DIRECT F	00: DIRECT FIXED ASSETS -			
7001	Computer Equipment & Software	-		
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA	-		
7003	Furniture & Fixtures	-		
7004	Leasehold/Tenant/Building Improvements	-		
7005	Other Assets over \$500 with Lifespan of 2 Years +	-		
7006	Assets over \$5,000/unit (Specify)	-		
7007	Other (specify)	-		
7008	Other (specify)	-		

TOTAL PROGRAM EXPENSE FROM BUDGET NARRATIVE:	2,411
TOTAL PROGRAM EXPENSES FROM BUDGET TEMPLATE:	2,411
BUDGET CHECK:	