AMENDMENT NO. 1 TO SERVICE AGREEMENT

This Amendment No. 1 to Service Agreement ("Amendment No. 1") is dated

and is between Turning Point of Central California, Inc., a private, nonprofit, 501 (c) (3), corporation, whose address is P.O. Box 7447, Visalia, CA, 93290

("Contractor"), and the County of Fresno, a political subdivision of the State of California

("County").

Recitals

- A. County, through its Department of Behavioral Health (DBH), is a Behavioral Health Plan (BHP) as defined in Title 9 of the California Code of Regulations (C.C.R.), Section 1810.226.
- B. On June 20, 2023, the County and the Contractor entered into County Master Agreement No. 23-274 ("Agreement"), for a qualified agency to operate a Rural Full Service Partnership (FSP) program, an Intensive Case Management (ICM) program, and an Outpatient (OP) mental health program for children, adult and older adults who have serious emotional disturbance and/or serious and persistent mental illness in Pinedale, Sanger, Reedley, Selma, Kerman, Coalinga, Huron, Mendota and other rural sites as may be needed.
- C. The County and the Contractors now desire to amend the Agreement to extend the current term by three months with an additional optional three-month extension, and to increase the maximum compensation, to ensure mandated services are provided uninterrupted to Rural Area County persons served.

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 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 existing at the time of the extension whether or not known to the County.

2. Section 4.2 of the Agreement beginning on Page 9, Line 2 is amended to add the following:

"The maximum compensation payable for Specialty Mental Health Services to the Contractor under this Agreement for the period of July 1, 2025 through September 30, 2025 is Three Million Eight Hundred Eighty-Seven Thousand Six Hundred Sixty-Three and No/100 Dollars (\$3,887,663.00), which is not a guaranteed sum but shall be paid only for services rendered and received. The maximum compensation payable for Specialty Mental Health Services to the Contractor under this Agreement for the period of October 1, 2025 through December 31, 2025 is Three Million Eight Hundred Eighty-Seven Thousand Six Hundred Sixty-Three and No/100 Dollars (\$3,887,663.00), which is not a guaranteed sum but shall be paid only for services rendered and received."

3. Section 4.3 of the Agreement beginning on Page 9, Line 9 is amended to add the following:

"The maximum compensation payable to the Contractor under this Agreement for Non Medi-Cal Supports for the period of July 1, 2025 through September 30, 2025 for Non-Medi-Cal Supports is Twenty-Eight Thousand Seven Hundred Eighty-One and No/100 Dollars (\$28,781.00). The maximum compensation payable to the Contractor under this Agreement for Non Medi-Cal Supports for the period of October 1, 2025 through December 31, 2025 for Non-Medi-Cal Supports is Twenty-Eight Thousand Seven Hundred Eighty-One and No/100 Dollars (\$28,781.00)."

4. A portion of Section 4.5 of the Agreement beginning on Page 9, Line 18 through Line 22 is deleted and replaced with the following:

"Total Maximum Compensation. In no event shall the maximum contract amount for all services provided by the Contractor to County under the terms and conditions of this Agreement be in excess of Thirty-Nine Million Four Hundred

Fourteen Thousand Four Hundred Thirty-Four and No/100 Dollars (\$39,414,434.00) during the entire term of this Agreement."

- 4. All references in the Agreement to Exhibit G3 shall be deemed references to "Revised Exhibit G3," which is attached and incorporated by this reference.
- 5. When both parties have signed this Amendment No. 1, the Agreement and this Amendment No. 1 together constitute the Agreement.
 - 6. The Contractor represents and warrants to the County that:
 - a. The Contractor is duly authorized and empowered to sign and perform its obligations under this Amendment.
 - b. The individuals signing this Amendment on behalf of the Contractor are duly authorized to do so and his or her signature on this Amendment legally binds the Contractor to the terms of this Amendment.
- 7. 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 Agreement 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 Agreement (1) is deemed equivalent to a valid original handwritten signature of the person signing this Agreement 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 Agreement is not conditioned upon the parties conducting the transactions under it by electronic means and either party may sign this Agreement with an original handwritten signature.
- 8. The Agreement as amended by this Amendment No. 1 is ratified and continued. All provisions of the Agreement not amended by this Amendment No. 1 remain in full force and effect. This Amendment No. 1 is effective upon execution.

[SIGNATURE PAGE FOLLOWS]

1	The parties are signing this Amendmer	nt No. 1 on the date stated in the introductory
2	clause.	
3 4	TURNING POINT OF CENTRAL CALIFORNIA, INC.	COUNTY OF FRESNO
5	Ryan Banks	
6	Ryan Banks, Chief Executive Officer (CEO)	Ernest Buddy Mendes, Chairman of the Board of Supervisors of the County of Fresno
7 8 9		Attest: Bernice E. Seidel Clerk of the Board of Supervisors County of Fresno, State of California
10	Bruce Tyler	_
11	Bruce Tyler, Chief Information Officer	By: Deputy
12	(CIO)/Interim Chief Financial Officer (CFO)	
13	615 S Atwood St. Visalia, Ca 93277	
14		
15		
16		
17	For accounting use only:	
18	Org No.: 56304527 (OP)	
19	56304528 (ICM) 56304529 (FSP)	
20	Account No.: 7295 Fund No.: 0001	
21	Subclass No.: 10000	
22 23		
23 24		
25		
26		
27		
28		

RMH FSP Turning Point of Central California, Inc. Fiscal Year (FY) 2023-24

PROGRAM EXPENSES

Direct 5	1000: DIRECT SA	LARIES & BFNI	FITS			
PII CCL E	mployee Salaries	EPHNES & BEIN				
	Administrative Position	FTE	Admin	Program		Total
1101			\$ -		\$	
1102			-		_	
1103			-		-	
1104 1105			-		-	
1105			_		-	
1107			-			
1108			-			
1109			-			
1110			-			
1111			-		_	
1112			-		_	
1113			-		_	
1114			-		-	
1115	D: 10 141 : 01 : 01 : 1		-			
	Direct Personnel Admin Salaries Subtotal	0.00	\$ -		\$	
	Program Position	FTE	Admin	Program	۲.	Total
1116 1117				\$ -	\$	
1117				-		
1119				-		
1120				-		
1121				-		
1122				-		
1123				-		
1124				-		
1125				-		
1126				-		
1127				-		
1128				-		
1129 1130				-		
1131				-		
1132						
				_	l	
				-		
1133 1134						
1133	Direct Personnel Program Salaries Subtotal	0.00		-	\$	
1133	Direct Personnel Program Salaries Subtotal	0.00		-	\$	
1133	Direct Personnel Program Salaries Subtotal	0.00	Admin	\$ - Program		Total
1133	Direct Personnel Program Salaries Subtotal Direct Personnel Salaries Subtotal	0.00	Admin \$ -	- \$ -	\$	Total
1133 1134	Direct Personnel Salaries Subtotal			\$ - Program		Total
1133 1134 Direct E	Direct Personnel Salaries Subtotal		\$ -			
1133 1134 Direct E	Direct Personnel Salaries Subtotal			\$ - Program		Total Total
1133 1134 Direct E Acct #	Direct Personnel Salaries Subtotal mployee Benefits Description		\$ -		\$	
1133 1134 Direct E Acct # 1201 1202 1203	Direct Personnel Salaries Subtotal mployee Benefits Description Retirement Worker's Compensation Health Insurance		\$ -		\$	
1133 1134 Direct E Acct # 1201 1202 1203 1204	Direct Personnel Salaries Subtotal mployee Benefits Description Retirement Worker's Compensation Health Insurance Other (specify)		\$ -	Program Program	\$	Total
1133 1134 Direct E Acct # 1201 1202 1203 1204	Direct Personnel Salaries Subtotal mployee Benefits Description Retirement Worker's Compensation Health Insurance Other (specify) Other (specify)		Admin	Program Program	\$	Total
1133 1134 Direct E Acct # 1201 1202 1203 1204	Direct Personnel Salaries Subtotal mployee Benefits Description Retirement Worker's Compensation Health Insurance Other (specify) Other (specify) Other (specify)	0.00	Admin		\$	Total
1133 1134 Direct E Acct # 1201 1202 1203 1204 1205	Direct Personnel Salaries Subtotal mployee Benefits Description Retirement Worker's Compensation Health Insurance Other (specify) Other (specify)	0.00	Admin		\$	Total
1133 1134 Direct E Acct # 1201 1202 1203 1204 1205 1206	Direct Personnel Salaries Subtotal mployee Benefits Description Retirement Worker's Compensation Health Insurance Other (specify) Other (specify) Other (specify) Direct Employee Benefits	0.00	Admin		\$	Total
1133 1134 Direct E Acct # 1201 1202 1203 1204 1205 1206	Direct Personnel Salaries Subtotal mployee Benefits Description Retirement Worker's Compensation Health Insurance Other (specify) Other (specify) Other (specify) Direct Employee Benearyoll Taxes & Expenses:	0.00	\$ - Admin	Program	\$	Total
Direct E Acct # 1201 1202 1203 1204 1205 1206 Direct P Acct #	Direct Personnel Salaries Subtotal mployee Benefits Description Retirement Worker's Compensation Health Insurance Other (specify) Other (specify) Other (specify) Direct Employee Benefits	0.00	\$ - Admin		\$	Total
1133 1134 Direct E Acct # 1201 1202 1203 1204 1205 1206 Direct P Acct # 1301	Direct Personnel Salaries Subtotal mployee Benefits Description Retirement Worker's Compensation Health Insurance Other (specify) Other (specify) Other (specify) Direct Employee Beneary of the property of the propert	0.00	\$ - Admin \$ Admin	Program Program Program Program Program Program Program	\$	Total
1133 1134 Direct E Acct # 1201 1202 1203 1204 1205 1206 Direct P Acct # 1301 1302	Direct Personnel Salaries Subtotal mployee Benefits Description Retirement Worker's Compensation Health Insurance Other (specify) Other (specify) Other (specify) Direct Employee Beneary of Secription OASDI	0.00	\$ - Admin		\$	Total
1133 1134 Direct E Acct # 1201 1202 1203 1204 1205 1206 Direct P Acct # 1301 1302 1303	Direct Personnel Salaries Subtotal mployee Benefits Description Retirement Worker's Compensation Health Insurance Other (specify) Other (specify) Other (specify) Direct Employee Benefits ayroll Taxes & Expenses: Description OASDI FICA/MEDICARE	0.00	\$ - Admin \$ - Admin \$ -		\$	Total
1133 1134 Direct E Acct # 1201 1202 1203 1204 1205 1206 Direct P Acct # 1301 1302 1303 1304	Direct Personnel Salaries Subtotal mployee Benefits Description Retirement Worker's Compensation Health Insurance Other (specify) Other (specify) Other (specify) Direct Employee Beneary Secription OASDI FICA/MEDICARE SUI	0.00	\$ - Admin	Program	\$	Total
Direct E Acct # 1201 1202 1203 1204 1205 1206 Direct P Acct # 1301 1302 1303 1304 1305	Direct Personnel Salaries Subtotal mployee Benefits Description Retirement Worker's Compensation Health Insurance Other (specify) Other (specify) Other (specify) Direct Employee Beneary Older (specify) Direct Employee Beneary Older (specify) OASDI FICA/MEDICARE SUI Other (specify)	0.00	\$ - Admin	Program	\$	Total
Direct E Acct # 1201 1202 1203 1204 1205 1206 Direct P Acct # 1301 1302 1303 1304 1305	Direct Personnel Salaries Subtotal mployee Benefits Description Retirement Worker's Compensation Health Insurance Other (specify) Other (specify) Direct Employee Beneary Description OASDI FICA/MEDICARE SUI Other (specify) Other (specify) Other (specify)	0.00	\$ - Admin	Program	\$	Total
Direct E Acct # 1201 1202 1203 1204 1205 1206 Direct P Acct # 1301 1302 1303 1304 1305	Direct Personnel Salaries Subtotal mployee Benefits Description Retirement Worker's Compensation Health Insurance Other (specify) Other (specify) Direct Employee Beneary I Taxes & Expenses: Description OASDI FICA/MEDICARE SUI Other (specify) Other (specify) Other (specify) Other (specify) Other (specify)	0.00	\$ - Admin \$ - Admin \$	Program	\$	Total
Direct E Acct # 1201 1202 1203 1204 1205 1206 Direct P Acct # 1301 1302 1303 1304 1305	Direct Personnel Salaries Subtotal mployee Benefits Description Retirement Worker's Compensation Health Insurance Other (specify) Other (specify) Direct Employee Beneary I Taxes & Expenses: Description OASDI FICA/MEDICARE SUI Other (specify) Other (specify) Other (specify) Other (specify) Other (specify)	0.00 efits Subtotal:	\$ - Admin \$ - Admin \$	Program	\$	Total

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

Acct #	Line Item Description	Amount
2001	Child Care	\$ -
2002	Client Housing Support	92,263
2003	Client Transportation & Support	1,478
2004	Clothing, Food, & Hygiene	18,354
2005	Education Support	1,325
2006	Employment Support	-
2007	Household Items for Clients	-
2008	Medication Supports	-
2009	Program Supplies - Medical	-
2010	Utility Vouchers	-
2011	Client Housing Operating Expenditures	1,702
2012	Other (specify)	-
2013	Other (specify)	-
2014	Other (specify)	-
2015	Other (specify)	-
2016	Other (specify)	-
	DIRECT CLIENT CARE TOTAL	\$ 115,122

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:	\$ -

4000: DI	RECT FACILITIES & EQUIPMENT	
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:	Ś

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 (specify)	•
6010	Other (specify)	-
6011	Other (specify)	-
6012	Other (specify)	-
6013	Other (specify)	-
	INDIRECT EXPENSES TOTAL	\$ -

INDIRECT COST RATE	0.00%

7000: DIRECT FIXED ASSETS		
Acct #	Line Item Description	Amount
7001	S	\$ -
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 \$ 115,122

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	Amount		
8301	CSS - Community Services & Supports		\$	-	
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	Т		
8401	Client Fees	\$	-		
8402	Client Insurance		-		
8403	Grants (Specify)		-		
8404	Other (Specify)		-		
8405	Other (Specify)		-		
	OTHER REVENUE TOTAL	\$	-		

TOTAL PROGRAM FUNDING SOURCES:	\$ _

NET PROGRAM COST:	\$ 115.122

RMH FSP

Turning Point of Central California, Inc. Fiscal Year (FY) 2023-24 Budget Narrative

	PROGRAM EXPENSE					
ACCT#	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE			
1000: DIRECT SALA		-				
Administrative Positi		=				
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		-				
Program 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		-				
1130 0		-				
1131 0		-				
1133 0						
1134 0		_				
1134 0						
Direct Employee Ben	efits					
1201 Retire		-				
	er's Compensation	-				
	h Insurance	-				
1204 Othe		-				
1205 Othe		-				
1206 Othe	(specify)	-				
Direct Payroll Taxes 8		-				
1301 OASE		-				
1302 FICA/	MEDICARE	-				
1303 SUI		-				
1304 Othe		-				
1305 Othe	(specify)	-				
1306 Othe	(ѕреспу)	-				
2000: DIRECT CLIENT		115,122				

: DIRECT CLIENT SUPPORT		115,122	
2001	Child Care	-	
2002	Client Housing Support	92,263	Client Housing Support
2003	Client Transportation & Support	1,478	Client Transportation & Support
2004	Clothing, Food, & Hygiene	18,354	Clothing, Food, & Hygiene
2005	Education Support	1,325	Education Support
2006	Employment Support	-	
2007	Household Items for Clients	-	
2008	Medication Supports	-	
2009	Program Supplies - Medical	-	
2010	Utility Vouchers	-	
2011	Client Housing Operating Expenditures	1,702	Client Housing Operating Expenditures

		DDOCDAM	EVDENCE
ACCT #	LINE ITEM	PROGRAM	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
_	Other (specify)	AMT -	DETAILED DESCRIPTION OF ITEMS BODGETED IN EACH ACCOUNT LINE
	Other (specify) Other (specify)		
	Other (specify)	_	
	Other (specify)	_	
	Other (specify)	-	
,		·	
00: DIRECT O	PERATING EXPENSES	-	
3001	Telecommunications	-	
	5. 0	-	
	Office, Household & Program Supplies	-	
	Advertising	-	
	Staff Development & Training	-	
	Staff Mileage	-	
	Subscriptions & Memberships Vehicle Maintenance	-	
	Other (specify)		
	Other (specify)	_	
	Other (specify)	-	
	Other (specify)	-	
00: DIRECT F	ACILITIES & EQUIPMENT	-	
4001	Building Maintenance	-	
4002	Rent/Lease Building	-	
4003	Rent/Lease Equipment	-	
4004	Rent/Lease Vehicles	-	
	Security	-	
	Utilities	-	
4007	Other (specify)	-	
4008	Other (specify)	-	
4009 4010	Other (specify) Other (specify)	-	
4010	Other (specify)		
00: DIRECT S	PECIAL EXPENSES	-	
	Consultant (Network & Data Management)	-	
	HMIS (Health Management Information System)	_	
	Contractual/Consulting Services (Specify)	-	
5004			
5004	Translation Services	-	
	Other (specify)		
	Other (specify) Other (specify)		
5005 5006 5007	Other (specify) Other (specify) Other (specify)	-	
5005 5006	Other (specify) Other (specify)		
5005 5006 5007 5008	Other (specify) Other (specify) Other (specify) Other (specify)		
5005 5006 5007 5008	Other (specify) Other (specify) Other (specify) Other (specify)		
5005 5006 5007 5008 DOO: INDIRECT 6001	Other (specify) Other (specify) Other (specify) Other (specify) FEXPENSES Administrative Overhead		
5005 5006 5007 5008 000: INDIRECT 6001 6002	Other (specify) Other (specify) Other (specify) Other (specify) FEXPENSES Administrative Overhead Professional Liability Insurance		
5005 5006 5007 5008 300: INDIRECT 6001 6002 6003	Other (specify) Other (specify) Other (specify) Other (specify) FEXPENSES Administrative Overhead Professional Liability Insurance Accounting/Bookkeeping		
5005 5006 5007 5008 300: INDIRECT 6001 6002 6003 6004	Other (specify) Other (specify) Other (specify) Other (specify) FEXPENSES Administrative Overhead Professional Liability Insurance Accounting/Bookkeeping External Audit		
5005 5006 5007 5008 300: INDIRECT 6001 6002 6003 6004 6005	Other (specify) Other (specify) Other (specify) Other (specify) FEXPENSES Administrative Overhead Professional Liability Insurance Accounting/Bookkeeping External Audit Insurance (Specify):		
5005 5006 5007 5008 300: INDIRECT 6001 6002 6003 6004	Other (specify) Other (specify) Other (specify) Other (specify) FEXPENSES Administrative Overhead Professional Liability Insurance Accounting/Bookkeeping External Audit		
5005 5006 5007 5008 000: INDIRECT 6001 6002 6003 6004 6005 6006	Other (specify) Other (specify) Other (specify) Other (specify) FEXPENSES Administrative Overhead Professional Liability Insurance Accounting/Bookkeeping External Audit Insurance (Specify): Payroll Services		
5005 5006 5007 5008 000: INDIRECT 6001 6002 6003 6004 6005 6006 6007	Other (specify) Other (specify) Other (specify) Other (specify) FEXPENSES Administrative Overhead Professional Liability Insurance Accounting/Bookkeeping External Audit Insurance (Specify): Payroll Services Depreciation (Provider-Owned Equipment to be Used		
5005 5006 5007 5008 5001 6001 6002 6003 6004 6005 6006 6007 6008 6009	Other (specify) Other (specify) Other (specify) Other (specify) Other (specify) FEXPENSES 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 (specify)		
5005 5006 5007 5008 00: INDIRECT 6001 6002 6003 6004 6005 6006 6007 6008 6009 6010 6011	Other (specify) Other (specify) Other (specify) Other (specify) Other (specify) FEXPENSES 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 (specify) Other (specify)		
5005 5006 5007 5008 5008 6001 6002 6003 6004 6005 6006 6007 6008 6009 6010 6011 6012	Other (specify) Other (specify) Other (specify) Other (specify) Other (specify) FEXPENSES 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 (specify) Other (specify) Other (specify)	- - - - - - - - - - - - - - - - -	
5005 5006 5007 5008 00: INDIRECT 6001 6002 6003 6004 6005 6006 6007 6008 6009 6010 6011 6012	Other (specify) Other (specify) Other (specify) Other (specify) Other (specify) FEXPENSES 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 (specify) Other (specify)		
5005 5006 5007 5008 00: INDIRECT 6001 6002 6003 6004 6005 6006 6007 6008 6009 6010 6011 6012 6013	Other (specify) Other (specify) Other (specify) Other (specify) Other (specify) FEXPENSES 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 (specify) Other (specify) Other (specify) Other (specify)		
5005 5006 5007 5008 5001 6002 6003 6004 6005 6006 6007 6008 6009 6010 6011 6012 6013	Other (specify) Other (specify) Other (specify) Other (specify) Other (specify) FEXPENSES 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 (specify) Other (specify) Other (specify) Other (specify) Other (specify) Other (specify)		
5005 5006 5007 5008 5001 6002 6003 6004 6005 6006 6007 6008 6009 6010 6011 6012 6013	Other (specify) Other (specify) Other (specify) Other (specify) Other (specify) FEXPENSES 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 (specify)		
5005 5006 5007 5008 5001 6002 6003 6004 6005 6006 6007 6008 6009 6010 6011 6012 6013 5000: DIRECT FO	Other (specify) Other (specify) Other (specify) Other (specify) Other (specify) FEXPENSES 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 (specify) Other (specify) Other (specify) Other (specify) Other (specify) Other (specify) IXED ASSETS Computer Equipment & Software Copiers, Cell Phones, Tablets, Devices to Contain HIPAA		
5005 5006 5007 5008 5007 5008 6001 6002 6003 6004 6005 6006 6007 6008 6009 6010 6011 6012 6013 6002 7001 7002 7003	Other (specify) Other (specify) Other (specify) Other (specify) Other (specify) FEXPENSES 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 (specify)		
5005 5006 5007 5008 5007 5008 6001 6002 6003 6004 6005 6006 6007 6008 6009 6010 6011 6012 6013 7001 7002 7003 7004	Other (specify) Other (specify) Other (specify) Other (specify) Other (specify) FEXPENSES 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 (specify) IXED ASSETS Computer Equipment & Software Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Furniture & Fixtures Leasehold/Tenant/Building Improvements		
5005 5006 5007 5008 5007 5008 6001 6002 6003 6004 6005 6006 6007 6008 6009 6010 6011 6012 6013 7001 7002 7003 7004 7005	Other (specify) Other (specify) Other (specify) Other (specify) Other (specify) FEXPENSES 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 (specify) Other (specify) Other (specify) Other (specify) Other (specify) Other (specify) IXED ASSETS Computer Equipment & Software Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Furniture & Fixtures Leasehold/Tenant/Building Improvements Other Assets over \$500 with Lifespan of 2 Years +		
5005 5006 5007 5008 5007 5008 6001 6002 6003 6004 6005 6006 6007 6008 6009 6010 6011 6012 6013 7001 7002 7003 7004 7005	Other (specify) Other (specify) Other (specify) Other (specify) Other (specify) FEXPENSES 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 (specify) IXED ASSETS Computer Equipment & Software Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Furniture & Fixtures Leasehold/Tenant/Building Improvements		

TOTAL PROGRAM EXPENSE FROM BUDGET NARRATIVE:

115,122

RMH CR Narrative FY23-24

		PROGRAM	I EXPENSE
ACCT	# LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
	TOTAL PROGRAM EXPENSES FROM BUDGET TEMPLATE:	115,122	

BUDGET CHECK:

RMH FSP Turning Point of Central California, Inc. Fiscal Year (FY) 2024-25

PROGRAM EXPENSES

lirect !	1000: DIRECT SA	LARIES & BEN	EFITS			
	Employee Salaries Administrative Position	FTE	Admin	Program	1	Total
1101	The state of the s		\$ -	rrogram	\$	Total
1102			-		Ť	
1103			-			
1104			-			
1105			-			
1106			_			
1107			-			
1108			-			
1109			-			
1110			-			
1111			-			
1112			-			
1113			-			
1114			-			
1115			-			
	Direct Personnel Admin Salaries Subtotal	0.00	\$ -		\$	
Acct #	Program Position	FTE	Admin	Program	Ė	Total
1116	<u> </u>	.,_	7.4411111	\$ -	\$	
1117	+			-	Ť	
1118				-		
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		Total
	Direct Personnel Salaries Subtotal	0.00	\$ -	\$ -	\$	
	Employee Benefits					
Acct #			Admin	Program	<u> </u>	Total
1201					\$	
	Worker's Compensation		-	-		
1202	II. III.					
1202 1203			-	-		
1202 1203 1204	Other (specify)		-	-		
1202 1203 1204 1205	Other (specify) Other (specify)		-	-		
1202 1203 1204 1205	Other (specify) Other (specify) Other (specify)		-	-		
1202 1203 1204 1205	Other (specify) Other (specify)	efits Subtotal:	-	-	\$	
1202 1203 1204 1205 1206	Other (specify) Other (specify) Other (specify) Direct Employee Bendary	efits Subtotal:	-	-	\$	
1202 1203 1204 1205 1206	Other (specify) Other (specify) Other (specify) Direct Employee Bendance Control of the Control	efits Subtotal:		- - - \$ -	\$	Total
1202 1203 1204 1205 1206 irect I	Other (specify) Other (specify) Other (specify) Direct Employee Bendary Payroll Taxes & Expenses: Description	efits Subtotal:	- - - \$ -	- - - \$ -		Total
1202 1203 1204 1205 1206 irect I	Other (specify) Other (specify) Other (specify) Direct Employee Bendary Payroll Taxes & Expenses: Description OASDI	efits Subtotal:			\$	Total
1202 1203 1204 1205 1206 irect I Acct # 1301 1302	Other (specify) Other (specify) Other (specify) Direct Employee Bendary Service Servi	efits Subtotal	- - -			Total
1202 1203 1204 1205 1206 irect I Acct # 1301 1302 1303	Other (specify) Other (specify) Other (specify) Direct Employee Bend Payroll Taxes & Expenses: Description OASDI FICA/MEDICARE SUI	efits Subtotal	- - -			Total
1202 1203 1204 1205 1206 irect I Acct # 1301 1302 1303	Other (specify) Other (specify) Other (specify) Direct Employee Benevity B	efits Subtotal	S Admin S	- -		Total
1202 1203 1204 1205 1206 irect I Acct # 1301 1302 1303 1304 1305	Other (specify) Other (specify) Other (specify) Direct Employee Beneration Payroll Taxes & Expenses: Description OASDI FICA/MEDICARE SUI Other (specify) Other (specify) Other (specify)	efits Subtotal	S Admin S	- -		Total
1202 1203 1204 1205 1206 irect I Acct # 1301 1302 1303	Other (specify) Other (specify) Other (specify) Direct Employee Beneral Description OASDI FICA/MEDICARE SUI Other (specify) Other (specify) Other (specify) Other (specify)		Admin \$ -	- -	\$	Total
1202 1203 1204 1205 1206 irect I Acct # 1301 1302 1303 1304 1305	Other (specify) Other (specify) Other (specify) Direct Employee Beneration Payroll Taxes & Expenses: Description OASDI FICA/MEDICARE SUI Other (specify) Other (specify) Other (specify)		Admin \$ -	- -		Total
1202 1203 1204 1205 1206 irect I Acct # 1301 1302 1303 1304 1305	Other (specify) Other (specify) Other (specify) Direct Employee Beneral Description OASDI FICA/MEDICARE SUI Other (specify) Other (specify) Other (specify) Other (specify) Direct Payroll Taxes & Expenses:	ises Subtotal:	Admin \$ -	- -	\$	Total
1202 1203 1204 1205 1206 irect I Acct # 1301 1302 1303 1304 1305	Other (specify) Other (specify) Other (specify) Direct Employee Beneral Description OASDI FICA/MEDICARE SUI Other (specify) Other (specify) Other (specify) Other (specify)	ises Subtotal:	Admin \$ -	- -	\$	Total

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

Acct #	Line Item Description	Amount
2001	Child Care	\$ -
2002	Client Housing Support	92,263
2003	Client Transportation & Support	1,478
2004	Clothing, Food, & Hygiene	18,354
2005	Education Support	1,325
2006	Employment Support	-
2007	Household Items for Clients	-
2008	Medication Supports	-
2009	Program Supplies - Medical	-
2010	Utility Vouchers	-
2011	Client Housing Operating Expenditures	1,702
2012	Other (specify)	-
2013	Other (specify)	-
2014	Other (specify)	-
2015	Other (specify)	-
2016	Other (specify)	-
	DIRECT CLIENT CARE TOTAL	\$ 115,122

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:	\$

Page 9 of 24

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)	1
6009	Other (specify)	-
6010	Other (specify)	1
6011	Other (specify)	-
6012	Other (specify)	-
6013	Other (specify)	-
	INDIRECT EXPENSES TOTAL	\$ -

INDIRECT COST RATE	0.00%

Acct #	Line Item Description	A	mount
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 \$ 115,122

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

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

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

TOTAL PROGRAM FUNDING SOURCES: \$ -

NET PROGRAM COST: \$ 115,122

RMH FSP

Turning Point of Central California, Inc. Fiscal Year (FY) 2023-24 Budget Narrative

		PROGRAM	EXPENSE
ACCT#	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
1000: DIRECT SALA		-	
Administrative Positi		=	
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		-	
Program 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		-	
1130 0		-	
1131 0		-	
1133 0			
1134 0		_	
1134 0			
Direct Employee Ben	efits		
1201 Retire		-	
	er's Compensation	-	
	h Insurance	-	
1204 Othe		-	
1205 Othe		-	
1206 Othe	(specify)	-	
Direct Payroll Taxes 8		-	
1301 OASE		-	
1302 FICA/	MEDICARE	-	
1303 SUI		-	
1304 Othe		-	
1305 Othe	(specify)	-	
1306 Othe	(ѕреспу)	-	
2000: DIRECT CLIENT		115,122	

DIRECT C	CLIENT SUPPORT	115,122	
2001	Child Care	-	
2002	Client Housing Support	92,263	Client Housing Support
2003	Client Transportation & Support	1,478	Client Transportation & Support
2004	Clothing, Food, & Hygiene	18,354	Clothing, Food, & Hygiene
2005	Education Support	1,325	Education Support
2006	Employment Support	-	
2007	Household Items for Clients	-	
2008	Medication Supports	-	
2009	Program Supplies - Medical	-	
2010	Utility Vouchers	-	
2011	Client Housing Operating Expenditures	1,702	Client Housing Operating Expenditures

		PROGRAM	EXPENSE
ACCT#	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LIN
	Other (specify)	_	
2013	Other (specify)	_	
	Other (specify)	_	
	Other (specify)	_	
	Other (specify)	-	
DIRECT C	PERATING EXPENSES	-	
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)	-	
	ACILITIES & EQUIPMENT	-	
4001	Building Maintenance Rent/Lease Building		
4002			
4003	Rent/Lease Equipment Rent/Lease Vehicles	-	
4004	Security	-	
4005	Utilities		
4006			
4007	Other (specify)	-	
4008	Other (specify)	-	
4009 4010	Other (specify) Other (specify)	-	
DIKECT 3		-	
5001	Consultant (Network & Data Management)	-	
5001 5002	Consultant (Network & Data Management) HMIS (Health Management Information System)	-	
5001 5002 5003	Consultant (Network & Data Management) HMIS (Health Management Information System) Contractual/Consulting Services (Specify)		
5001 5002 5003 5004	Consultant (Network & Data Management) HMIS (Health Management Information System) Contractual/Consulting Services (Specify) Translation Services	- - -	
5002 5003 5004 5005	Consultant (Network & Data Management) HMIS (Health Management Information System) Contractual/Consulting Services (Specify) Translation Services Other (specify)	- - - -	
5001 5002 5003 5004 5005 5006	Consultant (Network & Data Management) HMIS (Health Management Information System) Contractual/Consulting Services (Specify) Translation Services Other (specify) Other (specify)	- - - - -	
5001 5002 5003 5004 5005 5006 5007	Consultant (Network & Data Management) HMIS (Health Management Information System) Contractual/Consulting Services (Specify) Translation Services Other (specify) Other (specify) Other (specify)	-	
5001 5002 5003 5004 5005 5006	Consultant (Network & Data Management) HMIS (Health Management Information System) Contractual/Consulting Services (Specify) Translation Services Other (specify) Other (specify)	- - - - -	
5001 5002 5003 5004 5005 5006 5007 5008	Consultant (Network & Data Management) HMIS (Health Management Information System) Contractual/Consulting Services (Specify) Translation Services Other (specify) Other (specify) Other (specify)	-	
5001 5002 5003 5004 5005 5006 5007 5008	Consultant (Network & Data Management) HMIS (Health Management Information System) Contractual/Consulting Services (Specify) Translation Services Other (specify) Other (specify) Other (specify) Other (specify)		
5001 5002 5003 5004 5005 5006 5007 5008	Consultant (Network & Data Management) HMIS (Health Management Information System) Contractual/Consulting Services (Specify) Translation Services Other (specify) Other (specify) Other (specify) Other (specify) TEXPENSES Administrative Overhead	-	
5001 5002 5003 5004 5005 5006 5007 5008	Consultant (Network & Data Management) HMIS (Health Management Information System) Contractual/Consulting Services (Specify) Translation Services Other (specify) Other (specify) Other (specify) Other (specify) FEXPENSES Administrative Overhead Professional Liability Insurance Accounting/Bookkeeping		
5001 5002 5003 5004 5005 5006 5007 5008 INDIRECT 6001 6002 6003 6004	Consultant (Network & Data Management) HMIS (Health Management Information System) Contractual/Consulting Services (Specify) Translation Services Other (specify) Other (specify) Other (specify) Other (specify) FEXPENSES Administrative Overhead Professional Liability Insurance Accounting/Bookkeeping External Audit	-	
5001 5002 5003 5004 5005 5006 5007 5008 INDIRECT 6001 6002 6003 6004 6005	Consultant (Network & Data Management) HMIS (Health Management Information System) Contractual/Consulting Services (Specify) Translation Services Other (specify) Other (specify) Other (specify) Other (specify) FEXPENSES Administrative Overhead Professional Liability Insurance Accounting/Bookkeeping External Audit Insurance (Specify):		
5001 5002 5003 5004 5005 5006 5007 5008 INDIRECT 6001 6002 6003 6004 6005	Consultant (Network & Data Management) HMIS (Health Management Information System) Contractual/Consulting Services (Specify) Translation Services Other (specify) Other (specify) Other (specify) Other (specify) FEXPENSES Administrative Overhead Professional Liability Insurance Accounting/Bookkeeping External Audit Insurance (Specify): Payroll Services		
5001 5002 5003 5004 5005 5006 5007 5008 INDIRECT 6001 6002 6003 6004 6005	Consultant (Network & Data Management) HMIS (Health Management Information System) Contractual/Consulting Services (Specify) Translation Services Other (specify) Other (specify) Other (specify) Other (specify) TEXPENSES Administrative Overhead Professional Liability Insurance Accounting/Bookkeeping External Audit Insurance (Specify): Payroll Services Depreciation (Provider-Owned Equipment to be Used		
5001 5002 5003 5004 5005 5006 5007 5008 INDIRECT 6001 6002 6003 6004 6005 6006 6007 6008	Consultant (Network & Data Management) HMIS (Health Management Information System) Contractual/Consulting Services (Specify) Translation Services Other (specify) Other (specify) Other (specify) Other (specify) TEXPENSES Administrative Overhead Professional Liability Insurance Accounting/Bookkeeping External Audit Insurance (Specify): Payroll Services Depreciation (Provider-Owned Equipment to be Used Personnel (Indirect Salaries & Benefits)		
5001 5002 5003 5004 5005 5006 5007 5008 INDIRECT 6001 6002 6003 6004 6005 6006 6007 6008 6009	Consultant (Network & Data Management) HMIS (Health Management Information System) Contractual/Consulting Services (Specify) Translation Services Other (specify) Other (specify) Other (specify) Other (specify) TEXPENSES 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 (specify)		
5001 5002 5003 5004 5005 5006 5007 5008 INDIRECT 6001 6002 6003 6004 6005 6006 6007 6008 6009	Consultant (Network & Data Management) HMIS (Health Management Information System) Contractual/Consulting Services (Specify) Translation Services Other (specify) Other (specify) Other (specify) Other (specify) TEXPENSES 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 (specify) Other (specify)		
5001 5002 5003 5004 5005 5006 5007 5008 INDIRECT 6001 6002 6003 6004 6005 6006 6007 6008 6009	Consultant (Network & Data Management) HMIS (Health Management Information System) Contractual/Consulting Services (Specify) Translation Services Other (specify) Other (specify) Other (specify) Other (specify) TEXPENSES 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 (specify) Other (specify)	-	
5001 5002 5003 5004 5005 5006 5007 5008 INDIRECT 6001 6002 6003 6004 6005 6006 6007 6008 6009 6010 6011	Consultant (Network & Data Management) HMIS (Health Management Information System) Contractual/Consulting Services (Specify) Translation Services Other (specify) Other (specify) Other (specify) Other (specify) TEXPENSES 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 (specify) Other (specify)	-	
5001 5002 5003 5004 5005 5006 5007 5008 INDIRECT 6001 6002 6003 6004 6005 6006 6007 6008 6009 6010 6011 6012	Consultant (Network & Data Management) HMIS (Health Management Information System) Contractual/Consulting Services (Specify) Translation Services Other (specify) Other (specify) Other (specify) Other (specify) TEXPENSES 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 (specify) Other (specify) Other (specify)		
5001 5002 5003 5004 5005 5006 5007 5008 INDIRECT 6001 6002 6003 6004 6005 6006 6007 6008 6009 6010 6011 6012 6013	Consultant (Network & Data Management) HMIS (Health Management Information System) Contractual/Consulting Services (Specify) Translation Services Other (specify) Other (specify) Other (specify) Other (specify) TEXPENSES 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 (specify) Other (specify) Other (specify) Other (specify) Other (specify)		
5001 5002 5003 5004 5005 5006 5007 5008 INDIRECT 6001 6002 6003 6004 6005 6006 6007 6008 6009 6010 6011 6012 6013	Consultant (Network & Data Management) HMIS (Health Management Information System) Contractual/Consulting Services (Specify) Translation Services Other (specify) Other (specify) Other (specify) Other (specify) TEXPENSES 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 (specify)		
5001 5002 5003 5004 5005 5006 5007 5008 INDIRECT 6001 6002 6003 6004 6005 6006 6007 6008 6009 6010 6011 6012 6013 DIRECT F	Consultant (Network & Data Management) HMIS (Health Management Information System) Contractual/Consulting Services (Specify) Translation Services Other (specify) Other (specify) Other (specify) Other (specify) TEXPENSES 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 (specify)		
5001 5002 5003 5004 5005 5006 5007 5008 INDIRECT 6001 6002 6003 6004 6005 6006 6007 6008 6009 6010 6011 6012 6013 DIRECT F 7001 7002	Consultant (Network & Data Management) HMIS (Health Management Information System) Contractual/Consulting Services (Specify) Translation Services Other (specify) Other (specify) Other (specify) Other (specify) TEXPENSES 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 (specify)		
5001 5002 5003 5004 5005 5006 5007 5008 INDIRECT 6001 6002 6003 6004 6005 6006 6007 6008 6009 6010 6011 6012 6013 DIRECT F 7001 7002 7003	Consultant (Network & Data Management) HMIS (Health Management Information System) Contractual/Consulting Services (Specify) Translation Services Other (specify) Other (specify) Other (specify) Other (specify) TEXPENSES 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 (specify)		
5001 5002 5003 5004 5005 5006 5007 5008 INDIRECT 6001 6002 6003 6004 6005 6006 6007 6008 6010 6011 6012 6013 DIRECT F 7001 7002 7003 7004	Consultant (Network & Data Management) HMIS (Health Management Information System) Contractual/Consulting Services (Specify) Translation Services Other (specify) Other (specify) Other (specify) Other (specify) TEXPENSES 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 (specify) Cother (specify) Other (specify)		
5001 5002 5003 5004 5005 5006 5007 5008 INDIRECT 6001 6002 6003 6004 6005 6006 6007 6008 6009 6010 6012 6013 DIRECT F 7001 7002 7003 7004 7005	Consultant (Network & Data Management) HMIS (Health Management Information System) Contractual/Consulting Services (Specify) Translation Services Other (specify) Other (specify) Other (specify) Other (specify) TEXPENSES 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 (specify)		
5001 5002 5003 5004 5005 5006 5007 5008 INDIRECT 6001 6002 6003 6004 6005 6006 6007 6008 6009 6010 6012 6013 DIRECT F 7001 7002 7003 7004 7005	Consultant (Network & Data Management) HMIS (Health Management Information System) Contractual/Consulting Services (Specify) Translation Services Other (specify) Other (specify) Other (specify) Other (specify) TEXPENSES 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 (specify)		

TOTAL PROGRAM EXPENSE FROM BUDGET NARRATIVE:

7008 Other (specify)

115,122

RMH CR Narrative FY24-25

			I EXPENSE
ACCT#	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
Т	OTAL PROGRAM EXPENSES FROM BUDGET TEMPLATE:	115,122	

BUDGET CHECK:

RMH FSP Turning Point of Central California, Inc. Fiscal Year (FY) 2025-26 (July 1, 2025 to September 30, 2025)

PROGRAM EXPENSES

	1000: DIRECT SA Employee Salaries	LARIES & BEN	IEFITS			
Acct #	Administrative Position	FTE	Admin	Program		Total
1101	1		\$ -	1128.2	\$	
1102			-			
1103			-			
1104			-			
1105			-			
1106			-			
1107			-			
1108			-			
1109			-			
1110			-			
1111			-			
1112			-			
1113			-			
1114			-			
1115			-			
	Direct Personnel Admin Salaries Subtotal	0.00	\$ -		\$	
Acct #	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		\$ -	\$	
					1	
			Admin	Program	-	Total
	Direct Personnel Salaries Subtotal	0.00	\$ -	\$ -	\$	
	Employee Benefits					
irect E				Program		Total
	Description		Admin	1105.011		
Acct #			Admin	Trogram	\$	
Acct # 1201	Retirement		Admin	- Togrum	\$	
Acct # 1201 1202	Retirement Worker's Compensation				\$	
1201 1202 1203	Retirement Worker's Compensation Health Insurance		-	-	\$	
1201 1202 1203 1204	Retirement Worker's Compensation		-	-	\$	
1201 1202 1203 1204 1205	Retirement Worker's Compensation Health Insurance Other (specify) Other (specify)		-	-	\$	
1201 1202 1203 1204 1205	Retirement Worker's Compensation Health Insurance Other (specify) Other (specify) Other (specify)	efits Subtotal	-	-		
1201 1202 1203 1204 1205 1206	Retirement Worker's Compensation Health Insurance Other (specify) Other (specify) Other (specify) Direct Employee Benefits	efits Subtotal	-	-		
1201 1202 1203 1204 1205 1206	Retirement Worker's Compensation Health Insurance Other (specify) Other (specify) Other (specify) Direct Employee Beneral Taxes & Expenses:	efits Subtotal	-	-		
1201 1202 1203 1204 1205 1206 irect F	Retirement Worker's Compensation Health Insurance Other (specify) Other (specify) Other (specify) Direct Employee Beneral Taxes & Expenses: Description	efits Subtotal			\$	Total
1201 1202 1203 1204 1205 1206 irect F	Retirement Worker's Compensation Health Insurance Other (specify) Other (specify) Other (specify) Direct Employee Beneral Taxes & Expenses: Description OASDI	efits Subtotal			\$	
1201 1202 1203 1204 1205 1206 irect F Acct # 1301	Retirement Worker's Compensation Health Insurance Other (specify) Other (specify) Other (specify) Direct Employee Beneral Description OASDI FICA/MEDICARE	efits Subtotal			\$	
1201 1202 1203 1204 1205 1206 irect F Acct # 1301 1302 1303	Retirement Worker's Compensation Health Insurance Other (specify) Other (specify) Other (specify) Direct Employee Benefit Septiments Septiment	efits Subtotal			\$	
1201 1202 1203 1204 1205 1206 irect F Acct # 1301 1302 1303 1304	Retirement Worker's Compensation Health Insurance Other (specify) Other (specify) Other (specify) Direct Employee Bender Service Serv	efits Subtotal			\$	
1201 1202 1203 1204 1205 1206 1206 1301 1302 1303 1304	Retirement Worker's Compensation Health Insurance Other (specify) Other (specify) Other (specify) Direct Employee Bender Payroll Taxes & Expenses: Description OASDI FICA/MEDICARE SUI Other (specify) Other (specify) Other (specify)	efits Subtotal		- -	\$	
1201 1202 1203 1204 1205 1206 1206 1301 1302 1303 1304 1305	Retirement Worker's Compensation Health Insurance Other (specify) Other (specify) Direct Employee Beneficial Secretary Description OASDI FICA/MEDICARE SUI Other (specify) Other (specify) Other (specify) Other (specify)	efits Subtotal	Admin \$	- -	\$	
1201 1202 1203 1204 1205 1206 1206 irect F 1301 1302 1303 1304 1305	Retirement Worker's Compensation Health Insurance Other (specify) Other (specify) Other (specify) Direct Employee Bender Payroll Taxes & Expenses: Description OASDI FICA/MEDICARE SUI Other (specify) Other (specify) Other (specify)		Admin \$		\$	
1201 1202 1203 1204 1205 1206 1206 1301 1302 1303 1304 1305	Retirement Worker's Compensation Health Insurance Other (specify) Other (specify) Other (specify) Direct Employee Benevarian Description OASDI FICA/MEDICARE SUI Other (specify) Other (specify) Other (specify) Other (specify) Other (specify) Other (specify)		Admin \$	- -	\$	
1201 1202 1203 1204 1205 1206 irect F Acct # 1301 1302 1303 1304	Retirement Worker's Compensation Health Insurance Other (specify) Other (specify) Other (specify) Direct Employee Benevarian Description OASDI FICA/MEDICARE SUI Other (specify) Other (specify) Other (specify) Other (specify) Other (specify) Other (specify)	ises Subtotal:	Admin \$ \$	- -	\$	

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

Acct #	Line Item Description	Am	ount
2001	Client Housing Support	\$	12,500
2002	Client Housing Maintenance Support		426
2003	Clothing, Food and Hygiene		4,589
2004	Client Transportation		1,250
2005	Education Support		1,241
2006	Emplyment support		250
2007	Respite care		-
2008	Household Items		1,250
2009	Utility Vouchers		1,000
2010	Child Care		250
2011	Medication Support		750
2012	Client Personal Needs		1,500
2013	Client Activities and Recreation		3,750
2014	Client Therapy		25
2015	Other (specify)		-
2016	Other (specify)		-
	DIRECT CLIENT CARE TOTAL	\$	28,781

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:	\$

4000: DI	1000: DIRECT FACILITIES & EQUIPMENT				
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:	Ś

Page 15 of 24

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 (specify)	
6010	Other (specify)	
6011	Other (specify)	
6012	Other (specify)	
6013	Other (specify)	
	INDIRECT EXPENSES TOTAL	\$.

INDIRECT COST RATE	0.00%

Acct #	Line Item Description	Amo	unt
7001	s	\$	-
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 \$ 28,781

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	Amount	
8301	CSS - Community Services & Supports		\$ 28,781	
8302	PEI - Prevention & Early Intervention		-	
8303	INN - Innovations		-	
8304	WET - Workforce Education & Training		-	
8305	CFTN - Capital Facilities & Technology		-	
		MHSA TOTAL	\$ 28.781	

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

TOTAL PROGRAM FUNDING SOURCES:	\$	28,781
	_	

NET PROGRAM COST: \$ -

RMH FSP

Turning Point of Central California, Inc.

Fiscal Year (FY) 2025-26 (July 1, 2025 to September 30, 2025) Budget Narrative

		PROGRAM	EXPENSE
ACCT#	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
	ALARIES & BENEFITS		
ninistrative P		-	
1101	0	-	
1102		_	
1103		-	
1104	0	-	
1105	0	-	
1106	0	-	
1107	0	-	
1108	0	-	
1109	0	-	
1110	0	-	
1111	0	-	
1112	0	-	
1113	0	-	
1114		-	
1115	0	-	
gram Positio	ns	-	
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	-	
ct Employee	Benefits		
	Retirement	-	
	Worker's Compensation	-	
	Health Insurance	-	
	Other (specify)	-	
1205	Other (specify)	-	
1206	Other (specify)	-	
	xes & Expenses:	-	
1301		-	
1302 I	FICA/MEDICARE	-	
1303		-	
	Other (specify)	-	
1305	Other (specify)	-	
1306	Other (specify)		

2000: DIRECT (CLIENT SUPPORT	28,781	
2001	Client Housing Support	12,500	Client Housing Assistance: Cost of rent, housing assistance and deposit paid on behalf of client. (Examples: first/last month deposit, late fees, monthly rent, hotel charges, room & board, board & care, etc.)
2002	Client Housing Maintenance Support	426	Client Housing/Building Maintenance: Cost of building repair or maintenance paid for on client's behalf. (Examples: handyman work, plumbing, drywall, roofing, carpet cleaning, air/furnace filters, keys, key tags, padlocks, etc.
2003	Clothing, Food and Hygiene	4,589	Client Clothing & Hygiene: Cost of client hygiene supplies and non-work related clothing. (Examples: clothes, shoes, hats, beanies, scarves, soap, toothpaste, deodorant, grooming supplies, hair accessories, diapers, etc.)

ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
2004	Client Transportation	1,250	Client Transportation: Cost for client transportation. (Examples: bus tokens/passes, t other public transportation, bicycles, etc.)
2005	Education Support	1,241	Client Educational Material: Cost of course fees and educational materials distributed clients and prospective clients. Including court ordered educational class
2006	Emplyment support	250	Client Employment Support: Cost of client pre-employment preparation and employment retention. (Examples: job search and interview attire, work boots and t required for employment, etc.)
2007	Respite care	-	
2008	Household Items	1,250	Household Items for Clients
2009	Utility Vouchers	1,000	Client Utility/Rental Security Deposits: Cost of client utility bills and/or security depo
2010	Child Care	250	Child Care
2011	Medication Support	750	Client Medical Expense: Cost of medical supplies or treatment/medical expense for specific client. (Examples: co-pays*, prescription/lab work not covered by insurance over-the-counter medications*, first aid kit/supplies for client's use at home, etc.) * allowable per contract
2012	Client Personal Needs	1,500	Client Personal Needs: Cost of supplying clients with necessary personal items not detailed in other accounts. (Examples: birth certificate, DMV fee for ID or license, clients household cleaning products/house supplies/kitchen supplies for their own home, pots/pans/dishes, linens, locker lock, paper towels and child related expenses such car seat/stroller/play pin/toys, special food for allergies, reinforcers from P & I fund laptop, tablet, etc.)
2013	Client Activities and Recreation	3,750	Client Activities/Recreation: Cost for client activities & recreation events. (Examples cable bill, food/drinks/utensils/decorations needed for a specific client event, incen rewards, cash reinforcer, admission fees to events, etc.)
2014	Client Therapy	25	Client Therapy: Cost of therapy services not covered by insurance and therapeutic supplies for clients to use outside of the program. (Examples: exercise videos/equipment, relaxation audio/visual recordings, artistic expression supplies, 6
2015	Other (specify)	_	
2016	Other (specify)	_	

3000: DIRECT (DPERATING EXPENSES	-	
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)	-	

4000: DIRECT F	ACILITIES & EQUIPMENT	-	
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)	-	

5000: DIRECT S	DIRECT SPECIAL EXPENSES -		
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)	-	

		PROGRAM	EXPENSE
ACCT#	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LIN
5008	Other (specify)	-	
: 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 (specify)	-	
6010	Other (specify)	-	
6011	Other (specify)	-	
6012	Other (specify)	-	
6013	Other (specify)	-	
: DIRECT FI	XED 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:	28,781
TOTAL PROGRAM EXPENSES FROM BUDGET TEMPLATE:	28,781

BUDGET CHECK: -

RMH FSP Turning Point of Central California, Inc. Fiscal Year (FY) 2025-26 (October 1, 2025 to December 31, 2025)

PROGRAM EXPENSES

irest '	1000: DIRECT SA	LARIES & BEN	EFITS			
	Employee Salaries Administrative Position	FTE	Admin	Program	T	Total
1101	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		\$ -	Trogram	\$	Total
1102			-		T	
1103			-			
1104			-			
1105			-			
1106			-			
1107			-			
1108			-			
1109			-			
1110			-			
1111			-			
1112			-			
1113			-			
1114			-			
1115			-			
	Direct Personnel Admin Salaries Subtotal	0.00	\$ -		\$	
Acct #	Program Position	FTE	Admin	Program	+	Total
1116	<u> </u>		7 (3111111	\$ -	\$	
1117				, -	Ť	
1118				-		
1119				-		
1120				-		
1121				-		
1122				-		
1123				-		
1124				-		
1125				_	_	
1126				_		
1127				_		
1128				_		
1129				_		
1130				-		
1131				_		
1132				_		
1133				-	1	
1134				-		
	Direct Personnel Program Salaries Subtotal	0.00		\$ -	\$	
			Admin	Program	<u> </u>	Total
	Direct Personnel Salaries Subtotal	0.00	\$ -	\$ -	\$	
	Employee Benefits			т _	1	
Acct #			Admin	Program		Total
1201					\$	
1202	•		-	-		
1203			-	-		
1204			-	-	<u> </u>	
1205			-		-	
			-	+	-	
1206	Direct Employee Bene	efits Subtotal	\$ -	\$ -	\$	
1206						
irect l	Payroll Taxes & Expenses:		Admin	Drogram		Total
irect	Payroll Taxes & Expenses: Description		Admin	Program	ć	Total
irect Acct # 1301	Payroll Taxes & Expenses: Description OASDI		\$ -	\$ -	\$	Total
irect Acct # 1301 1302	Payroll Taxes & Expenses: Description OASDI FICA/MEDICARE		\$ -	\$ -	\$	Total
irect Acct # 1301 1302 1303	Payroll Taxes & Expenses: Description OASDI FICA/MEDICARE SUI		\$ - -	\$ - -	\$	Total
1301 1302 1303 1304	Payroll Taxes & Expenses: Description OASDI FICA/MEDICARE SUI Other (specify)		\$ - - -	\$ - - -	\$	Total
irect 1301 1302 1303 1304 1305	Payroll Taxes & Expenses: Description OASDI FICA/MEDICARE SUI Other (specify) Other (specify)		\$ - - -	\$ - - -		Total
irect 1301 1302 1303 1304 1305	Payroll Taxes & Expenses: Description OASDI FICA/MEDICARE SUI Other (specify) Other (specify) Other (specify)		\$ - - - -	\$ - - - -		Total
irect 1301 1302 1303 1304 1305	Payroll Taxes & Expenses: Description OASDI FICA/MEDICARE SUI Other (specify) Other (specify)	ises Subtotal:	\$ - - - -	\$ - - - -		Total
irect 1301 1302 1303 1304 1305	Payroll Taxes & Expenses: Description OASDI FICA/MEDICARE SUI Other (specify) Other (specify) Other (specify) Other (specify) Direct Payroll Taxes & Expen		\$ - - - - - - - - - - -	\$ - - - - - - - - -		
irect 1301 1302 1303 1304	Payroll Taxes & Expenses: Description OASDI FICA/MEDICARE SUI Other (specify) Other (specify) Other (specify)		\$ - - - -	\$ - - - -		Total

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

Acct #	Line Item Description	Α	mount
2001	Client Housing Support	\$	12,500
2002	Client Housing Maintenance Support		426
2003	Clothing, Food and Hygiene		4,589
2004	Client Transportation		1,250
2005	Education Support		1,241
2006	Emplyment support		250
2007	Respite care		-
2008	Household Items		1,250
2009	Utility Vouchers		1,000
2010	Child Care		250
2011	Medication Support		750
2012	Client Personal Needs		1,500
2013	Client Activities and Recreation		3,750
2014	Client Therapy		25
2015	Other (specify)		-
2016	Other (specify)		-
	DIRECT CLIENT CARE TOTAL	\$	28,781

3000: D	RECT 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	-
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:	\$

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6000: INDIRECT EXPENSES Line Item Description Acct # 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 Depreciation (Provider-Owned Equipment to be Used for Program Purposes) 6008 Personnel (Indirect Salaries & Benefits) 6009 Other (specify) 6010 Other (specify) 6011 Other (specify) 6012 Other (specify) 6013 Other (specify) INDIRECT EXPENSES TOTAL \$

INDIRECT COST NATE 0.00%	INDIRECT COST RATE	0.00%
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Acct #	Line Item Description	Amount
7001	s	\$ -
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 \$ 28,781

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	Ξ
8201	Realignment	\$		-
	REALIGNMENT TOTAL	\$		_

8300 - MENTAL HEALTH SERVICE ACT (MHSA)			
Acct #	MHSA Component	MHSA Program Name	Amount
8301	CSS - Community Services & Supports		\$ 28,781
8302	PEI - Prevention & Early Intervention		-
8303	INN - Innovations		-
8304	WET - Workforce Education & Training		-
8305	CFTN - Capital Facilities & Technology		-
		MHSA TOTAL	\$ 28,781

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

TOTAL PROGRAM FUNDING SOURCES:	\$ 28,781

NET PROGRAM COST: \$ -

RMH FSP

Turning Point of Central California, Inc.

Fiscal Year (FY) 2025-26 (October 1, 2025 to December 31, 2025) Budget Narrative

ACCT # 1000: DIRECT S Administrative	SALARIES & BENEFITS Positions 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	- AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
1000: DIRECT S Administrative 1101 1102 1103 1104 1105 1106 1107 1108 1109 1110 1111 1112 1113 1114 1115 Program Positio	SALARIES & BENEFITS Positions 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	- - - - - - - - - - - - - - - - - - -	
Administrative	Positions 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		
1102 1103 1104 1105 1106 1107 1108 1109 1110 1111 1112 1113 1114 1115 Program Positio	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		
1103 1104 1105 1106 1107 1108 1109 1110 1111 1112 1113 1114 1115 Program Positio	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		
1104 1105 1106 1107 1108 1109 1110 1111 1112 1113 1114 1115 Program Positio	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	- - - - - - - - - - - - - - - - - - -	
1105 1106 1107 1108 1109 1110 1111 1112 1113 1114 1115 Program Positio 1116	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	- - - - - - - - - - - - - - - - - - -	
1106 1107 1108 1109 1110 1111 1112 1113 1114 1115 Program Positio	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	- - - - - - - - - - - - -	
1107 1108 1109 1110 1111 1112 1113 1114 1115 Program Positio	0 0 0 0 0 0 0 0 0 0 0 0 0	- - - - - - - - - - -	
1108 1109 1110 1111 1112 1113 1114 1115 Program Positio	0 0 0 0 0 0 0 0 0 0 0 0	- - - - - - - - - -	
1109 1110 1111 1112 1113 1114 1115 Program Positio	0 0 0 0 0 0 0 0 0 0 0	- - - - - - - -	
1110 1111 1112 1113 1114 1115 Program Positio	0 0 0 0 0 0 0 0 ons	-	
1111 1112 1113 1114 1115 Program Positio	0 0 0 0 0 0 0 ons	- - - - - -	
1112 1113 1114 1115 Program Positio	0 0 0 0 0 0 0sos		
1113 1114 1115 Program Position 1116	0 0 0 0 0 0 0 0	- - - -	
1114 1115 Program Position 1116	0 0 ons 0 0	-	
1115 Program Position 1116	0 ons	-	
Program Position 1116	o 0 0	-	
1116	0	-	
	0		
111/			
1118		-	
1118		-	
1119		-	
1121			
1122		_	
1123		_	
1124		_	
1125		_	
1126		_	
1127		-	
1128		-	
1129	0	-	
1130	0	-	
1131	0	-	
1132	0	-	
1133	0	-	
1134	0	-	
Direct Employe			
	Retirement	-	
	Worker's Compensation	-	
	Health Insurance	-	
	Other (specify)	-	
1205	Other (specify)	-	
1206	Other (specify)	-	
Direct Payme!! T	axes & Expenses:		
1301		-	
	FICA/MEDICARE	-	
1302		-	
	Other (specify)	-	
	Other (specify)	_	
1306	Other (specify)	_	
	T. T. A.B 200 H		

DIRECT C	CLIENT SUPPORT	28,781	
2001	Client Housing Support	12,500	Client Housing Assistance: Cost of rent, housing assistance and deposit paid on behalf of client. (Examples: first/last month deposit, late fees, monthly rent, hotel charges, room & board, board & care, etc.)
2002	Client Housing Maintenance Support	426	Client Housing/Building Maintenance: Cost of building repair or maintenance paid for on client's behalf. (Examples: handyman work, plumbing, drywall, roofing, carpet cleaning, air/furnace filters, keys, key tags, padlocks, etc.
2003	Clothing, Food and Hygiene	4,589	Client Clothing & Hygiene: Cost of client hygiene supplies and non-work related clothing. (Examples: clothes, shoes, hats, beanies, scarves, soap, toothpaste, deodorant, grooming supplies, hair accessories, diapers, etc.)

ACCT#	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINI
2004	Client Transportation	1,250	Client Transportation: Cost for client transportation. (Examples: bus tokens/passes other public transportation, bicycles, etc.)
2005	Education Support	1,241	Client Educational Material: Cost of course fees and educational materials distributed clients and prospective clients. Including court ordered educational class
2006	Emplyment support	250	Client Employment Support: Cost of client pre-employment preparation and employment retention. (Examples: job search and interview attire, work boots and required for employment, etc.)
2007	Respite care	-	
2008	Household Items	1,250	Household Items for Clients
2009	Utility Vouchers	1,000	Client Utility/Rental Security Deposits: Cost of client utility bills and/or security deposits.
2010	Child Care	250	Child Care
2011	Medication Support	750	Client Medical Expense: Cost of medical supplies or treatment/medical expense fo specific client. (Examples: co-pays*, prescription/lab work not covered by insurance over-the-counter medications*, first aid kit/supplies for client's use at home, etc.) allowable per contract
2012	Client Personal Needs	1,500	Client Personal Needs: Cost of supplying clients with necessary personal items not detailed in other accounts. (Examples: birth certificate, DMV fee for ID or license, chousehold cleaning products/house supplies/kitchen supplies for their own home, pots/pans/dishes, linens, locker lock, paper towels and child related expenses such car seat/stroller/play pin/toys, special food for allergies, reinforcers from P & I fun laptop, tablet, etc.)
2013	Client Activities and Recreation	3,750	Client Activities/Recreation: Cost for client activities & recreation events. (Example cable bill, food/drinks/utensils/decorations needed for a specific client event, ince rewards, cash reinforcer, admission fees to events, etc.)
2014	Client Therapy	25	Client Therapy: Cost of therapy services not covered by insurance and therapeutic supplies for clients to use outside of the program. (Examples: exercise videos/equipment, relaxation audio/visual recordings, artistic expression supplies,
2015	Other (specify)	-	
2016	Other (specify)	_	

3000: DIRECT (D: DIRECT OPERATING EXPENSES -			
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)	-		

4000: DIRECT F	4000: DIRECT FACILITIES & EQUIPMENT -				
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)	-			

5000: DIRECT S	00: DIRECT SPECIAL EXPENSES -		
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)	-	

ACCT#	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LII
	Other (specify)	-	
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 (specify)	-	
6010	Other (specify)	-	
6011	Other (specify)	-	
6012	Other (specify)	-	
6013	Other (specify)	-	
DIRECT FI	XED 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: 28,781
TOTAL PROGRAM EXPENSES FROM BUDGET TEMPLATE: 28,781

BUDGET CHECK: -