AMENDMENT NO. 2 TO SERVICE AGREEMENT

This Amendment No. 2 to Service Agreement ("Amendment No. 2") is dated 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 The agreement combined and superseded Agreement Nos. 18-366 and 18-366-1.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.

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

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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. 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:

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"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 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)."

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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

1			under this Agreement only for services performed according to the terms of this		
2	Agreement and while this Agreement is in effect, and subject to the maximum				
3	amount payable under this section. The Contractor(s) further acknowledges that				
4			County employees have no authority to pay the Contractor(s) except as		
5			expressly provided in this Agreement. The Contractor(s) will be compensated for		
6			performance of its services under this Agreement as provided in this Article. The		
7			Contractor(s) is not entitled to any compensation except as expressly provided in		
8			this Agreement."		
9	1.	W	hen both parties have signed this Amendment No. 2, the Agreement, Amendment No.		
10	1 and	this	Amendment No. 2 together constitute the Agreement.		
11	2.	Th	e Contractor(s) represents and warrants to the County that:		
12		a.	The Contractor(s) is duly authorized and empowered to sign and perform its		
13			obligations under this Amendment.		
14		b.	The individual signing this Amendment on behalf of the Contractor(s) is duly		
15			authorized to do so and his or her signature on this Amendment legally binds the		
16			Contractor(s) to the terms of this Amendment.		
17	3.	Th	e parties agree that this Amendment may be executed by electronic signature as		
18	provid	ed i	n this section.		
19		a.	An "electronic signature" means any symbol or process intended by an individual		
20			signing this Amendment to represent their signature, including but not limited to (1) a		
21			digital signature; (2) a faxed version of an original handwritten signature; or (3) an		
22			electronically scanned and transmitted (for example by PDF document) version of an		
23			original handwritten signature.		
24		b.	Each electronic signature affixed or attached to this Amendment (1) is deemed		
25			equivalent to a valid original handwritten signature of the person signing this		
26			Amendment for all purposes, including but not limited to evidentiary proof in any		
27			administrative or judicial proceeding, and (2) has the same force and effect as the		
28			valid original handwritten signature of that person.		
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1	c. The provisions of this section satisfy the requirements of Civil Code section 1633.5,				
2	subdivision (b), in the Uniform Electronic Transaction Act (Civil Code, Division 3, Part				
3	2, Title 2.5, beginning with section 1633.1).				
4	d. Each party using a digital signature represents that it has undertaken and satisfied				
5	the requirements of Government Code section 16.5, subdivision (a), paragraphs (1)				
6	through (5), and agrees that each other party may rely upon that representation.				
7	e. This Amendment is not conditioned upon the parties conducting the transactions				
8	under it by electronic means and either party may sign this Amendment with an				
9	original handwritten signature.				
10	4. This Amendment may be signed in counterparts, each of which is an original, and all of				
11	which together constitute this Amendment.				
12	5. The Agreement as previously amended and as amended by this Amendment No. 2 is				
13	ratified and continued. All provisions of the Agreement as previously amended and not				
14	amended by this Amendment No. 2 remain in full force and effect.				
15	[SIGNATURE PAGE FOLLOWS]				
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1	The parties are signing this Amendment No. 2 on the date stated in the introductory				
2	clause.				
3	PLEASE SEE SIGNATURE PAGE	COUNTY OF FRESNO			
4	ATTACHED				
5					
6		Ernest Buddy Mendes, Chairman of the Board of Supervisors of the County of Fresno			
7		Attest:			
8 9		Bernice E. Seidel Clerk of the Board of Supervisors County of Fresno, State of California			
		County of Fresho, State of California			
10 11		By: Deputy			
12	For accounting use only:				
13	Org No.: 56304320 Account No.: 7295/0				
14	Fund No.:0001				
15	Subclass No.: 10000				
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2	The parties are signing this Amendment No. 2 on the date stated in the introductory
3	clause.
4	Pacific Clinics
5	Signed by:
6	maller
7	Authorized Signature
8	Kim M. Wells Chief Legal Officer
9	(Print Name & Title)
10 11	
12	499 Loma Alta Avenue Losa Gatos, CA 95030
13	Mailing Address
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The parties are signing this Amendment No. 2 on the date stated in the introductory clause.

Exceptional Parents Unlimited, Inc.

Authorized Signature

residen CEO (Print Name & Title)

4440 N. First Street Fresno, Ca. 93726 Mailing Address

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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. <u>Fresno, Ca. 93705</u> <u>Mailing Address</u>

Bright Beginnings for Families

Full Service Partnership Services for Children Ages 0-10 Years

PROVIDER LIST

Pacific Clinics

251 Llewellyn Ävenue 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

CYS BBFF Budget FY25-26 Ext. 1

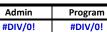
BRIGHT BEGINNINGS FOR FAMILIES COMPREHENSIVE YOUTH SERVICES OF FRESNO, INC. Fiscal Year (FY) 2025-2026 | July 1, 2025 to September 30, 2025

PROGRAM EXPENSES					
1000: DIRECT SALARIES & BENEFITS					
	mployee Salaries				
	Administrative Position	FTE	Admin	Program	Total
1101 1102					\$
1102			-		-
1104			-		-
1105			-		-
1106			-		-
1107 1108			-		-
1108			-		-
1110			-		-
1111			-		-
1112			-		-
1113			-		-
1114 1115			-		-
1113	Direct Personnel Admin Salaries Subtotal	0.00	\$ -		\$ -
Acct #	Program Position	FTE	Admin	Program	Total
1116					\$ -
1117				-	-
1118				-	-
1119 1120				-	-
1120				-	-
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	\$-	\$-	\$-
_	mployee Benefits				
Acct #			Admin	Program	Total
1201 1202	Retirement Worker's Compensation				\$ -
1202	Health Insurance		-	-	-
1203	Other (Benefits listed under ARPA Grant)			-	-
1205	Other (specify)		-	-	-
1206	Other (specify)		-	-	-
	Direct Employee Ben	efits Subtotal:	\$-	\$-	\$-
Direct Payroll Taxes & Expenses:					
Acct #	Description		Admin	Program	Total
	OASDI		\$-	\$-	\$ -
1302	FICA/MEDICARE		-	-	-
1303 1304	SUI Other (specify)		-	-	-
1304	Other (specify)		-	-	-
1306	Other (specify)		-	-	-
	Direct Payroll Taxes & Exper	ses Subtotal:	\$-	\$-	\$-
	DIRECT EMPLOYEE SALARIES & BEN	EFITS TOTAL:	Admin	Program	Total

\$

Revised Exhibit H

DIRECT EMPLOYEE SALARIES & BENEFITS PERCENTAGE:



- 5

- \$

2000: DIRECT CLIENT SUPPORT			
Acct #	Line Item Description	Amount	
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:	\$

4000: 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:	\$ -	

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:	\$-	

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	ayroll 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	Amo	unt
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	\$	1,31

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		\$ 1,31
8302	PEI - Prevention & Early Intervention		
8303	INN - Innovations		
8304	WET - Workforce Education & Training		
8305	CFTN - Capital Facilities & Technology		
		MHSA TOTAL	\$ 1,31

	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

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 LIN
D: DIRECT	SALARIES & BENEFITS	-	
inistrative	Positions	-	
1101	0	-	
1102	0	-	
1103	0	-	
1104	0	-	
	0	-	
1106	0	-	
1107	0	-	
1108	0	-	
1109	0	-	
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1112	0	-	
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1117	0	-	
1118	0	-	
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	0	-	
1126	0	-	
-	0	-	
	0	-	
1129	0	-	
1130	0	-	
1131	0	-	
	0	-	
1133	0	-	
1134	0	-	
ct Employe	e Benefits		
	Retirement	-	
	Worker's Compensation		
	Health Insurance		
	Other (Benefits listed under ARPA Grant)		
	Other (specify)		
1203	Other (specify)	-	
1200	other (specify)		
t Payroll T	axes & Expenses:	-	
	OASDI		
	FICA/MEDICARE	-	
	SUI	-	
	Other (specify)	-	
1304	Other (specify)	-	
	Other (specify)		
1200	outer (specify)	-	

2000:	2000: DIRECT 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
				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	A EXPENSE
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
2004	Clothing, Food, & Hygiene Education Support		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. 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 to emotional well-being.
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	-	

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)	-	

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)	-	

6000:	INDIRECT	EXPENSES	-	
	6001	Administrative Overhead	-	
	6002	Professional Liability Insurance	-	
	6003	Accounting/Bookkeeping	-	
	6004	External Audit	-	

CYS BBFF Narrative FY25-26 Ext1

		PROGRAM	1 EXPENSE
ACCT	# LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
6005	5 Insurance (Specify):	-	
6006	5 Payroll Services	-	
6007	7 Depreciation (Provider-Owned Equipment to be Used	-	
6008	Personnel (Indirect Salaries & Benefits)	-	
6009	Other (Indirect Cost under ARPA Grant)	-	
6010	O Other (specify)	-	
601:	L Other (specify)	-	
6012	2 Other (specify)	-	
6013	3 Other (specify)	-	

7000: DIRECT F	IXED ASSETS	-	
7001	Computer Equipment & Software	-	
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA	1	
7003	Furniture & Fixtures	1	
7004	Leasehold/Tenant/Building Improvements	1	
7005	Other Assets over \$500 with Lifespan of 2 Years +	1	
7006	Assets over \$5,000/unit (Specify)	-	
7007	Other (specify)	-	
7008	Other (specify)	-	

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

CYS BBFF Budget FY25-26 Ext. 2

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

		M EXPENSES				_
	1000: DIRECT SA	LARIES & BENE	FITS			
Direct E	mployee Salaries					
Acct #	Administrative Position	FTE	Admin	Program	Total	
1101					\$	
1102						
1103			-			
1104			-			
1105			-			
1106			-			
1107			-			
1108 1109			-			
1109			-			
1110						
11112						
1112			-			
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				-		
1127				-		
1128				-		
1125						
1131				-		
1132				-		
1133				-		
1134				-		
	Direct Personnel Program Salaries Subtotal	0.00		\$-	\$	
					•	
			Admin	Program	Total	
	Direct Personnel Salaries Subtotal	0.00	\$-	\$-	\$	
Direct F	mployee Benefits					_
Acct #			Admin	Program	Total	
	Retirement				\$	
1201						
	Worker's Compensation		-	-		
1202			-	-		
1202 1203	Worker's Compensation			-		
1202 1203 1204 1205	Worker's Compensation Health Insurance Other (Benefits listed under ARPA Grant) Other (specify)			-		
1202 1203 1204 1205	Worker's Compensation Health Insurance Other (Benefits listed under ARPA Grant) Other (specify) Other (specify)		-	-		
1202 1203 1204 1205	Worker's Compensation Health Insurance Other (Benefits listed under ARPA Grant) Other (specify)	efits Subtotal:	-	-	\$	
1202 1203 1204 1205 1206	Worker's Compensation Health Insurance Other (Benefits listed under ARPA Grant) Other (specify) Other (specify) Direct Employee Ben	efits Subtotal:	-		\$	
1202 1203 1204 1205 1206 Direct P	Worker's Compensation Health Insurance Other (Benefits listed under ARPA Grant) Other (specify) Other (specify) Direct Employee Ben ayroll Taxes & Expenses:	efits Subtotal:	- - \$ -	- - - \$ -		
1202 1203 1204 1205 1206 Direct P Acct #	Worker's Compensation Health Insurance Other (Benefits listed under ARPA Grant) Other (specify) Other (specify) Direct Employee Ben ayroll Taxes & Expenses: Description	efits Subtotal:	- - - \$ - Admin	- - - \$ Program	Total	
1202 1203 1204 1205 1206 Direct P Acct # 1301	Worker's Compensation Health Insurance Other (Benefits listed under ARPA Grant) Other (specify) Other (specify) Direct Employee Ben ayroll Taxes & Expenses: Description OASDI	efits Subtotal:	- - - \$ - \$ - Admin \$ -			
1202 1203 1204 1205 1206 Direct P Acct # 1301 1302	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	efits Subtotal:	- - - \$ - - - - - -		Total	
1202 1203 1204 1205 1206 Direct P Acct # 1301 1302 1303	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	efits Subtotal:	- - - \$ - Admin \$ - -		Total	
1202 1203 1204 1205 1206 Direct P Acct # 1301 1302 1303 1304	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:	- - - \$ - - - - - -		Total	
1202 1203 1204 1205 1206 Direct P Acct # 1301 1302 1303 1304 1305	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	efits Subtotal:	- - - \$ - Admin \$ - - -		Total	

	DIRECT EMPLOYEE SALARIES & BENEFITS TOTAL:	Admin	Program	Total
		\$-	\$-	\$-
Г	DIRECT EMPLOYEE SALARIES & BENEFITS PERCENTAGE:	Admin	Program	1

Acct #	Line Item Description	An	nount
2001	Child Care		
2002	Client Housing Support		
2003	Client Transportation & Support		26
2004	Clothing, Food, & Hygiene		650
2005	Education Support		40
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	\$	1,31

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	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		ount
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

CYS BBFF Budget FY25-26 Ext. 2

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	Amou	nt	
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	\$	1,312	

ent Fees		
ent Insurance		
ants (ARPA)		
ner (Specify)		
ner (Specify)		
OTHER REVENUE TOTAL	\$	
e ai	nt Insurance nts (ARPA) er (Specify) er (Specify)	nt Insurance nts (ARPA) results (ARPA) results (Specify)

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	I EXPENSE
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
00: DIRECT	SALARIES & BENEFITS	-	
ministrative	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	-	
	0	-	
gram Positio	ons	-	
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	-	
ect Employe			
	Retirement	-	
	Worker's Compensation	-	
	Health Insurance	-	
	Other (Benefits listed under ARPA Grant)	-	
1205	Other (specify)	-	
1206	Other (specify)	-	
	axes & Expenses:	-	
	OASDI	-	
	FICA/MEDICARE	-	
	SUI	-	
1304	Other (specify)	-	
1305	Other (specify)	-	
1306	Other (specify)	-	

2000:	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	/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 foo 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 restric from being used for alcohol, tobacco, firearms, or lottery items. This ensures funds a utilized in a manner consistent with supporting clients' health and stability. By provid this resource, clients experience reduced financial strain, enabling them to focus mon 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 Parent-Child Interaction Therapy (PCIT). These tickets are awarded either after a few sessions or at the program's conclusion to recognize progress, reinforce commitmen and strengthen the therapeutic relationship. By offering enriching family activities su as zoo visits, the program fosters positive family interactions, reinforces learned skill a real-world setting, and provides clients with meaningful experiences that contribut emotional well-being.
2006	Employment Support	-	
2007	Household Items for Clients	-	
2008	Medication Supports	-	
2009	Program Supplies - Medical	-	
2010	Utility Voucher	-	
2011	Other	-	
2012	Other	-	
2013 2014	Other Other	-	
2014	Other	-	
2015	Other		
DIRECT O	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 3010	Other (specify) Other (specify)	-	
3010	Other (specify)	-	
3011	Other (specify)		
5012	other (specify)		
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)	-	
DIRECT S	PECIAL EXPENSES	-	
5001	Consultant (Network & Data Management)	-	
5001	HMIS (Health Management Information System)	-	
3002			
5002	Contractual/Consulting Services (Specify)	-	

	5005	contractady consulting services (speeny)		
	5004	Translation Services	-	
	5005	Other (specify)	-	
	5006	Other (specify)	-	
	5007	Other (specify)	-	
	5008	Other (specify)	-	
6000:	INDIRECT	EXPENSES	-	
	6001	Administrative Overhead	-	
	6002	Professional Liability Insurance	-	

		PROGRAM	1 EXPENSE
AC	CCT # LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
60	006 Payroll Services	-	
60	007 Depreciation (Provider-Owned Equipment to be Used	-	
60	008 Personnel (Indirect Salaries & Benefits)	-	
60	009 Other (Indirect Cost under ARPA Grant)	-	
60	010 Other (specify)	-	
60	011 Other (specify)	-	
60	012 Other (specify)	-	
60	013 Other (specify)	-	
7000: DIRE	ECT FIXED ASSETS	-	
70	001 Computer Equipment & Software	-	
70	002 Copiers, Cell Phones, Tablets, Devices to Contain HIPAA	-	
70	003 Furniture & Fixtures	-	
70	004 Leasehold/Tenant/Building Improvements	-	
70	005 Other Assets over \$500 with Lifespan of 2 Years +	-	
70	006 Assets over \$5,000/unit (Specify)	-	

-

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

7007 Other (specify)

7008 Other (specify)

TOTAL PROGRAM EXPENSES FROM BUDGET TEMPLATE:

BUDGET CHECK:

EPU BBFF Budget FY25-26 Ext1

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

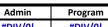
PROGRAM EXPENSE	S
-----------------	---

	1000: DIRECT SA	VI EXPENSES	EEITS			
Direct E	mployee Salaries	LARIES & DEN	EFIIS			
	Administrative Position	FTE	Admin	Program	Total	
1101					\$	
1102						
1103			-			
1104			-			
1105			-			
1106			-			
1107 1108			-		-	
1108			-			
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				-		
1121				-		
1123				-		
1124				-		
1125				-		
1126				-		
1127				-		
1128				-		
1129				-		
1130				-		
1131 1132				-		
1133						
1134				-		
	Direct Personnel Program Salaries Subtotal	0.00		\$-	\$	_
	Ū					
			Admin	Program	Total	
	Direct Personnel Salaries Subtotal	0.00	\$-	\$-	\$	
Direct E	mployee Benefits					
Acct #	· ·		Admin	Program	Total	
	Retirement			<u> </u>	\$	
1202	Worker's Compensation		-	-		
1203	Health Insurance		-	-		
1204	Other (Benefits listed under ARPA Grant)			-		_
1205	Other (specify)		-	-		
1206	Other (specify)		-	-		
	Direct Employee Ben	efits Subtotal	\$ -	\$-	\$	
Direct P	ayroll Taxes & Expenses:					
Acct #			Admin	Program	Total	_
1301	OASDI		\$-	\$ -	\$	
	FICA/MEDICARE		-	-		
	SUI		-	-		
1304	Other (specify)		-	-		
	Other (specify)		-	-		
1305						
	Other (specify)		-	-		_
		ses Subtotal:			\$	_
1305 1306	Other (specify)				\$ Total	

\$

Revised Exhibit H

DIRECT EMPLOYEE SALARIES & BENEFITS PERCENTAGE:



- \$

- \$

		#DIV/0!	#DIV/0!	
2000: D	IRECT 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	\$ 2,00	0

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:	\$.

6000: INDIRECT EXPENSES			
Acct #	Line Item Description	Amount	

EPU BBFF Budget FY25-26 Ext1

	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	An	nount
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,

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 #	Acct # Line Item Description					
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			-	
8303	INN - Innovations			-	
8304	WET - Workforce Education & Training			-	
8305	CFTN - Capital Facilities & Technology			-	
		MHSA TOTAL	\$	2,000	

	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: \$

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 LIN
	SALARIES & BENEFITS	-	
inistrative		-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	_	
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	0	-	
	0	-	
	0	-	
	0	-	
	0		
	0	-	
	0	-	
	0	-	
	0	-	
1134	lo I	-	
t Employo	e Benefits		
	Retirement	-	
	Worker's Compensation	-	
	Health Insurance	-	
	Other (Benefits listed under ARPA Grant)	-	
	Other (specify)	-	
	Other (specify) Other (specify)	-	
1200		-	
t Davroll T	axes & Expenses:	-	
	OASDI	-	
1302	FICA/MEDICARE SUI		
	Other (specify)	-	
1304	Other (specify) Other (specify)		
		-	
1306	Other (specify)	-	

2000: DIRECT C	0: DIRECT CLIENT SUPPORT		
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 x 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), $550 \times 5 = 250$.

	PROGRAM EXPENSE											
ACCT #	ACCT # LINE ITEM AMT DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LIN										LINE ITEM AMT	
2008	Medication Supports	-										
2009	Program Supplies - Medical	-										
2010	Utility Voucher	600	Provide partial assistance for utility expenses for client households who are financially insecure (6 families x \$100 = \$600).									
2011	Other	-										
2012	Other	-										
2013	Other	-										
2014	Other	-										
2015	Other	-										
2016	Other	-										

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)	-	

000: DIRECT F	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): 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)	-			
5008	Other (specify)	-			

6000: INDIREC	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:	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 +	-		

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

EPU BBFF Budget FY25-26 Ext2

BRIGHT BEGINNINGS FOR FAMILIES EXCEPTIONAL PARENTS UNLIMITED, INC Fiscal Year (FY) 2025-2026 | October 1, 2025 to December 31, 2025

PROGRAM EXPENSES

		VIEXPENSES				_
	1000: DIRECT SAI	LARIES & BEN	IEFITS			
	Employee Salaries					
	Administrative Position	FTE	Admin	Program	Total	
1101					\$	
1102						
1103			-			
1104			-			
1105			-			
1106			-	-	-	
1107			-			
1108 1109			-			
1109			-			
1110						
1111			-			
1112						
1114			-			
1115			-			
1110	Direct Personnel Admin Salaries Subtotal	0.00	\$ -		\$	_
Acct #	Program Position	FTE	Admin	Program	Total	
1116				riogram	\$	
1110				-	· ·	
1117	1			-		
1119				-		
1120				-		-
1121				-		
1122				-		
1123				-		
1124				-		
1125				-		
1126				-		
1127				-		
1128				-		
1129				-		
1130				-		
1131				-		
1132				-		
1133 1134				-		
1154	Direct Personnel Program Salaries Subtotal	0.00			\$	_
	Direct Personnel Program Salaries Subtotal	0.00		\$-	Ş	
			Admin	Program	Total	
	Direct Personnel Salaries Subtotal	0.00	\$ -			-
			1.			_
	mployee Benefits Description			Due		
Acct #	Retirement		Admin	Program	Total \$	
	Worker's Compensation				>	
1202 1203	Health Insurance		-	-		
1203	Other (Benefits listed under ARPA Grant)		-	-		
1204	Other (specify)		-	-		
1205			-	-	1	
1200	Direct Employee Bene	efits Subtotal		\$ -	\$	
				9	Ŷ	
	Payroll Taxes & Expenses:			-	1	
Acct #			Admin	Program	Total	
1301	OASDI		\$ -	- · · · · · · · · · · · · · · · · · · ·	\$	
	FICA/MEDICARE SUI		-		ļ	
1302			-			
1302 1303						
1302 1303 1304	Other (specify)		-	-		-
1302 1303 1304 1305	Other (specify) Other (specify)		-	-		
1302 1303 1304	Other (specify) Other (specify) Other (specify)	sas Subtatal	-	-	ć	
1302 1303 1304 1305	Other (specify) Other (specify)	ses Subtotal:	-	-	\$	
1302 1303 1304 1305	Other (specify) Other (specify) Other (specify)		- - \$ -	-	\$ Total	

\$

DIRECT EMPLOYEE SALARIES & BENEFITS PERCENTAGE:

- \$

- \$

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

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:	Ś

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: D	000: 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:	\$ -	

6000: INDIRECT EXPENSES				
Acct #	Line Item Description	Amount		

EPU BBFF Budget FY25-26 Ext2

	Administrative Overhead			
6001	Use this line and only this line for approved indirect cost rate	\$-		
	Administrative Overhead			
6002	Professional Liability Insurance	-		
6003	ccounting/Bookkeeping			
6004	External Audit	-		
6005	irance (Specify):			
6006	Payroll Services			
6007	epreciation (Provider-Owned Equipment to be Used for Program Purposes)			
6008	ersonnel (Indirect Salaries & Benefits) -			
6009	ther (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 #	cct # 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	\$	2,00

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	A	Amount
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	\$	2,000

	8400 - OTHER REVENUE				
Acct #	Line Item Description	1	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: \$

BRIGHT BEGINNINGS FOR FAMILIES EXCEPTIONAL PARENTS UNLIMITED, 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 LIN	
	SALARIES & BENEFITS	-		
ninistrative		_		
1101	0	-		
	0	-		
	0	-		
	0	-		
1105	0	-		
	0	-		
1107	0	-		
1108	0	-		
1109	0	-		
1110	0	-		
1111	0	-		
1112	0	-		
1113	0	-		
1114	0	-		
1115	0	-		
gram Positio	ons	-		
-	0	-		
	0	-		
1118	0	-		
1119	0	-		
	0	-		
1121	0	-		
1122	0	-		
1123	0	-		
1124	0	-		
	0	-		
	0	-		
1127	0	-		
1128	0	-		
1129	0	-		
1130	0	-		
1131	0	-		
1132	0	-		
1133	0	-		
1134	0	-		
ect Employe	e Benefits			
	Retirement	-		
1202	Worker's Compensation	-		
1203	Health Insurance	-		
1204	Other (Benefits listed under ARPA Grant)	-		
	Other (specify)	-		
1206	Other (specify)	-		
	axes & Expenses:	-		
1301	OASDI	-		
	FICA/MEDICARE	-		
1303	SUI	-		
1304	Other (specify)	-		
	Other (specify)	-		
	Other (specify)	-		
1500				

000: DIRECT C	LIENT 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 x 10 families = \$250).

	PROGRAM EXPENSE							
ACCT #	ACCT # LINE ITEM AMT DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE							
2005	Education Support	-						
2006	Employment Support	-						
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 x 5 = \$250).					
2008	Medication Supports	-						
2009	Program Supplies - Medical	-						
2010	Utility Voucher	600	Provide partial assistance for utility expenses for client households who are financially insecure (6 families x \$100 = \$600).					
2011	Other	-						
2012	Other	-						
2013	Other	-						
2014	Other	-						
2015	Other	-						
2016	Other	-						

3000:	DIRECT	OPERATING	EXPENSES

3000: DIRECT (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	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	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)	-	
5008	Other (specify)	-	

6000: INDIREC	T 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)	-	

EPU BBFF Narrative FY25-26 Ext2

PROGRAM EXPENSE				
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE	
6013	Other (specify)	-		
0: 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)	-		

-.

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

7007Other (specify)7008Other (specify)

BUDGET CHECK:

PC BBFF FSP Budget FY25-26 Ext1

BRIGHT BEGINNINGS FOR FAMILIES PACIFIC CLINICS

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

PROGRAM EXPENSES

	1000: DIRECT SA	LARIES & BENE	FITS		
	mployee Salaries			T	
	Administrative Position	FTE	Admin	Program	Total
1101					\$
1102					
1103 1104			-		
1104			-	-	
1105			-		
1100			-		
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				-	
1122				-	
1125				-	
1124				-	
1126				-	
1127				-	
1128				-	
1129				-	
1130				-	
1131				-	
1132				-	
1133				-	
1134				-	
	Direct Personnel Program Salaries Subtotal	0.00		\$-	\$
				T	
			Admin	Program	Total
	Direct Personnel Salaries Subtotal	0.00	\$-	\$-	\$
Direct F	mployee Benefits				
Acct #	Description		Admin	Program	Total
	Retirement				\$
	Worker's Compensation		-	-	
	Health Insurance		-	-	
	Other (Benefits listed under ARPA Grant)			-	
1205	Other (specify)		-	-	
1206	Other (specify)		-	-	
	Direct Employee Ben	efits Subtotal:	\$-	\$-	\$
Direct D					
	ayroll Taxes & Expenses:		A al	Deserver	Tetal
Acct # 1301	Description OASDI		Admin \$-	Program \$ -	Total \$
	FICA/MEDICARE			-	
1302	SUI		-	-	
	Other (specify)		-	-	
	Other (specify)		-	-	
1305	Other (specify)		-	-	
1000	Direct Payroll Taxes & Exper	ses Subtotal:	\$ -	\$-	
			Ŧ	¥	+
	DIRECT EMPLOYEE SALARIES & BEN	FEITS TOTAL	Admin	Program	Total
	DINCET LIVIT LOT LE JALANIEJ & DEN	LING IOTAL.	Autilit	Fiogram	TULAI

\$

Revised Exhibit H

DIRECT EMPLOYEE SALARIES & BENEFITS PERCENTAGE:

- \$

- \$

2000: D	IRECT CLIENT SUPPORT	
Acct #	Line Item Description	Amount
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

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:	\$

4000: DI	4000: 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:	\$	-

6000: INDIRECT EXPENSES			
Acct #	Line Item Description	Amount	

PC BBFF FSP Budget FY25-26 Ext1

	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	9 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		nount
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	\$	2,41

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

	8300 - MENTAL HEALTH SERVICE ACT (MHSA)				
Acct #	MHSA Component	MHSA Program Name	Amou	nt	
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

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		_		
	0	-		
	0	-		
	0	-		
	0	-		
1105	0	-		
	0	-		
1107	0	-		
1108	0	-		
1109	0	-		
1110	0	-		
1111	0	-		
1112	0	-		
1113	0	-		
1114	0	-		
1115	0	-		
gram Positic	ons	-		
1116	0	-		
1117	0	-		
1118	0	-		
1119	0	-		
1120	0	-		
1121	0	-		
1122	0	-		
	0	-		
	0	-		
	0	-		
	0	-		
	0	-		
	0	-		
	0	-		
	0	-		
	0	-		
	0	-		
	0	-		
1134	0	-		
ect Employe	e Benefits			
	Retirement	-		
	Worker's Compensation	-		
-	Health Insurance			
	Other (Benefits listed under ARPA Grant)	-		
	Other (specify)			
	Other (specify)			
1200				
ect Pavroll T	axes & Expenses:	-		
	OASDI			
	FICA/MEDICARE	-		
	SUI	-		
	Other (specify)			
1304	Other (specify)			
1305				

2000: DIRECT (2000: DIRECT CLIENT SUPPORT		
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	M EXPENSE
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
2003	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 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 Fu 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, an 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 reporti fees, and other operating costs incurred in providing child and family housing suppo
-	Other	-	
	Other	-	
2014	Other	-	
2015	Other	-	
2016	Other	-	

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	: 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)	-			

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)	-	

PC BBFF FSP Narrative FY25-26 1

Revised Exhibit H

	PROGRAM EXPENSE						
ACCT # LINE ITEM AMT DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LIN							
6000:	000: INDIRECT EXPENSES -						
6001 Administrative Overhead		-					
	6002	Professional Liability Insurance					

0002			
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)	-	

000: DIRECT F	: 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:	2,410
TOTAL PROGRAM EXPENSES FROM BUDGET TEMPLATE:	2,410
BUDGET CHECK:	-

Fresno County Department of Behavioral Health

PC BBFF FSP Budget FY25-26 Ext2

BRIGHT BEGINNINGS FOR FAMILIES PACIFIC CLINICS

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

	PROGRAM	A EXPENSES			
	1000: DIRECT SAI	ARIES & BENF	FITS		
Diract E	mployee Salaries				
	Administrative Position	FTE	Admin	Program	Total
1101			Aviiiii	Trogram	\$
1101					,
1103			-		1
1104			-		1
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		\$-	\$
					-
			Admin	Program	Total
	Direct Personnel Salaries Subtotal	0.00	\$-	\$-	\$
Diract E	mployee Benefits				
Acct #			Admin	Program	Total
	Retirement		AMININ	. iografii	\$
	nearchieft				
	Worker's Compensation			-	L
1202	Worker's Compensation Health Insurance		-	_	
1202 1203	Health Insurance		-	-	
1202 1203 1204	Health Insurance Other (Benefits listed under ARPA Grant)		-		
1202 1203 1204 1205	Health Insurance Other (Benefits listed under ARPA Grant) Other (specify)		-	-	
1202 1203 1204 1205	Health Insurance Other (Benefits listed under ARPA Grant) Other (specify) Other (specify)	afite Subtatalu	-		
1202 1203 1204 1205	Health Insurance Other (Benefits listed under ARPA Grant) Other (specify)	efits Subtotal:	-	-	\$
1202 1203 1204 1205 1206	Health Insurance Other (Benefits listed under ARPA Grant) Other (specify) Other (specify) Direct Employee Bene	efits Subtotal:	-		\$
1202 1203 1204 1205 1206 Direct P	Health Insurance Other (Benefits listed under ARPA Grant) Other (specify) Other (specify) Direct Employee Bene ayroll Taxes & Expenses:	efits Subtotal:	-	- - \$ -	\$ Total
1202 1203 1204 1205 1206 Direct P Acct #	Health Insurance Other (Benefits listed under ARPA Grant) Other (specify) Other (specify) Direct Employee Bene ayroll Taxes & Expenses: Description	efits Subtotal:	- - \$ -	- - \$ Program	Total
1202 1203 1204 1205 1206 Direct P Acct # 1301	Health Insurance Other (Benefits listed under ARPA Grant) Other (specify) Other (specify) Direct Employee Bene ayroll Taxes & Expenses: Description OASDI	efits Subtotal:	- - \$ - Admin	- - \$ Program	
1202 1203 1204 1205 1206 Direct P Acct # 1301 1302	Health Insurance Other (Benefits listed under ARPA Grant) Other (specify) Other (specify) Direct Employee Bene ayroll Taxes & Expenses: Description OASDI FICA/MEDICARE	efits Subtotal:	- - \$ - Admin \$ -		Total
1202 1203 1204 1205 1206 Direct P Acct # 1301 1302 1303	Health Insurance Other (Benefits listed under ARPA Grant) Other (specify) Other (specify) Direct Employee Bene ayroll Taxes & Expenses: Description OASDI FICA/MEDICARE SUI	efits Subtotal:	- - \$ - Admin \$ -		Total
1202 1203 1204 1205 1206 Direct P Acct # 1301 1302 1303 1304	Health Insurance Other (Benefits listed under ARPA Grant) Other (specify) Direct Employee Bene ayroll Taxes & Expenses: Description OASDI FICA/MEDICARE SUI Other (specify)	efits Subtotal:	- - \$ - Admin \$ - - -		Total
1202 1203 1204 1205 1206 Direct P Acct # 1301 1302 1303 1304 1305	Health Insurance Other (Benefits listed under ARPA Grant) Other (specify) Other (specify) Direct Employee Bene ayroll Taxes & Expenses: Description OASDI FICA/MEDICARE SUI	efits Subtotal:	- - \$ - - - - - - - -		Total

Revised Exhibit H

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

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

#DIV/0!

Acct #	Line Item Description	Am	ount
2001	Child Care		
2002	Client Housing Support		19
2003	Client Transportation & Support		31
2004	Clothing, Food, & Hygiene		1,13
2005	Education Support		4
2006	Employment Support		
2007	Household Items for Clients		29
2008	Medication Supports		
2009	Program Supplies - Medical		
2010	Utility Voucher		14
2011	Client Housing Operating Expenditures		28
2012	Other		
2013	Other		
2014	Other		
2015	Other		
2016	Other		
	DIRECT CLIENT CARE TOTAL	\$	2,41

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		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	RECT 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:	\$	-

6000: INDIRECT EXPENSES

PC BBFF FSP Budget FY25-26 Ext2

Acct #	Line Item Description	Amount		
	Administrative Overhead			
6001	Jse 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	ther (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	Ś	

TOTAL PROGRAM EXPENSES \$

2,411

PROGRAM FUNDING SOURCES

	8100 - SUBSTANCE USE DISORDER FUNDS		
Acct #	Line Item Description	Ar	mount
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	Am	ount
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
	SALARIES & BENEFITS		
ministrative		_	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
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	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
1134	0	-	
	- 0		
ect Employe			
	Retirement	-	
	Worker's Compensation	-	
	Health Insurance	-	
	Other (Benefits listed under ARPA Grant)	-	
	Other (specify)	-	
1206	Other (specify)	-	
ect Payroll T	axes & Expenses:	-	
1301	OASDI	-	
	FICA/MEDICARE	-	
	SUI	-	
	Other (specify)	-	
	Other (specify)	-	
1306	Other (specify)	-	

2000: DIRECT CLIENT SUPPORT 2,		IRECT 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	A EXPENSE
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
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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	-	
2013	Other	-	
2014	Other	-	
2015	Other	-	
2016	Other	-	

DIRECT C	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)	-	

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:	5000: DIRECT SPECIAL EXPENSES -					
	5001	Consultant (Network & Data Management)	-			
	5002	HMIS (Health Management Information System)	-			
	5003	Contractual/Consulting Services (Specify)	-			
	5004	Translation Services	-			

	PROGRAM EXPENSE						
ACCT	# LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE				
5005	5 Other (specify)	-					
5006	5 Other (specify)	-					
500	7 Other (specify)	-					
5008	3 Other (specify)	-					

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 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:	-