

DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, CA 95814



February 7, 1980

ALL-COUNTY INFORMATION NOTICE NO. 1-16-80

TO: ALL COUNTY WELFARE DIRECTORS
ALL COUNTY AUDITORS

SUBJECT: ENERGY ASSISTANCE PAYMENTS

REFERENCE:

This is to provide additional information regarding the Energy Assistance Payment Program (EAP).

EAP Grant Funds for assistance were advanced to the counties on February 1, 1980. Each county received the amount allocated for grant payments as scheduled on the attached page. If the grant funds advanced were less than the amount required by the county, a written request is necessary including the number of certified Food Stamp households and the amount of additional grant funds being requested. Counties must make requests for any additional grant funds as soon as possible so that supplemental grants can be initiated. Requests are to be mailed to:

Department of Social Services
744 P Street M.S. 13-72
Sacramento CA 95814
Attn: Barbre Turner

Administration funds will be advanced on February 15, 1980. The County Administrative Expense Claim will not be used for claiming the EAP administrative costs. Upon completion of the project, counties shall claim their expenditures on a GEN 215, Claim for Reimbursement, Local Agency Special Project with a budget format attached identifying actual costs. The GEN 215 (attached) is to be received by this Department no later than May 14, 1980.

If you have any questions regarding administrative claiming, contact Kandy Noble at (916) 323-0278. Any questions regarding advances should be addressed to Barbre Turner at (916) 445-0686.

A handwritten signature in cursive script, appearing to read "Claude Finn".

Claude Finn
Deputy Director
Administration Division

cc: CWDA

Attachment

GEN 654a (7/78)

ENERGY ASSISTANCE PROGRAM

<u>COUNTIES</u>	<u>ADVANCE</u>
Alameda	\$1,406,259.
Alpine	2,550.
Amador	11,800.
Butte	160,390.
Calaveras	26,240.
Colusa	5,364.
Contra Costa	501,600.
Del Norte	30,800.
El Dorado	113,680.
Fresno	615,000.
Glenn	13,330.
Humboldt	234,608.
Imperial	55,350.
Inyo	19,950.
Kern	267,300.
Kings	65,540.
Lake	65,450.
Lassen	40,320.
Los Angeles	4,939,508.
Madera	57,600.
Marin	123,000.
Mariposa	19,250.
Mendocino	145,000.
Merced	114,180.
Modoc	21,472.
Mono	23,278.
Monterey	226,137.
Napa	58,975.
Nevada	80,196.
Orange	400,775.
Placer	202,500.
Plumas	31,500.
Riverside	445,500.
Sacramento	875,000.
San Benito	20,358.
San Bernardino	807,084.
San Diego	1,400,000.
San Francisco	1,134,000.
San Joaquin	363,860.
San Luis Obispo	78,000.
San Mateo	233,700.
Santa Barbara	192,000.
Santa Clara	848,410.
Santa Cruz	259,692.
Shasta	266,508.

<u>COUNTIES</u>	<u>ADVANCE</u>
Sierra	7,050.
Siskiyou	74,277.
Solano	179,970.
Sonoma	298,050.
Stanislaus	200,498.
Sutter	43,845.
Tehama	59,688.
Trinity	19,500.
Tulare	348,500.
Tuolumne	36,225.
Ventura	225,185.
Yolo	112,000.
Yuba	74,515.

REDUCED COPY

**CLAIM FOR REIMBURSEMENT
LOCAL AGENCY SPECIAL PROJECT**

TO: Accounting Bureau
Department of Social Services
744 P Street, 13-72
Sacramento, California 95814

NAME AND ADDRESS OF CLAIMANT

PROJECT NUMBER	PROJECT NAME	COVERING EXPENDITURES FOR THE PERIOD _____ THRU _____
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CLASSIFICATION OF EXPENDITURES	(A) TOTAL PROJECT EXPENDITURES	(B) COSTS NOT REIMBURSABLE FROM PROJECT FUNDS	(C) COSTS REIMBURSABLE FROM PROJECT FUNDS
Salaries and wages			
Employee Benefit Plans			
Travel Expenses			
Supplies, Materials, Communications and Rental of Equipment			
Equipment Purchase			
Rental of Office Space			
Alterations and Improvements			
Services of Other Governmental Agencies			
Others			
TOTAL ALL CLASSES			

I HEREBY CERTIFY, under penalty of perjury, that I am the official responsible for the administration of the project; that I have not violated any of the provisions of Sections 1090 to 1096, inclusive of the Government Code; that the amounts claimed herein are properly chargeable as expenditures for administration of the project as specified in accordance with all provisions of the Welfare and Institutions Code and the rules and regulations of the State Benefits and Services Advisory Board.

I HEREBY CERTIFY, under penalty of perjury, that I am the official responsible for the examination and settlement of accounts; that I have not violated any of the provisions of Sections 1090 to 1096, inclusive, of the Government Code; that the expenditures claimed herein have been authorized; and that payments therefor have been made or expenditures otherwise incurred according to law.

SIGNATURE OF WELFARE DIRECTOR OR PROJECT ADMINISTRATOR	DATE	SIGNATURE OF AUDITOR OR CONTROLLER	DATE
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CLAIMING INSTRUCTIONS TO LOCAL AGENCIES
FOR COSTS OF SPECIAL PROJECTS
(WELFARE & INSTITUTIONS CODE, SECTIONS 18200-18204 AND 10609)

In order that the maximum reimbursement available be provided to agencies for costs of special projects, claims for reimbursement of such costs and the reporting of expenditures will be made in the following manner:

All costs related to the project will be reported to SDBP on Form GEN 215, Claim for Reimbursement (in quadruplicate), and will be segregated into the classes as specified on the approved Budget Schedule (Form GEN 188B) form. Separate claims will be made for each project and project year. Expenditures are defined as follows:

Salaries and Wages: Salary costs for employees' time spent on the special project.

Employee Benefit Plans: The agency's share of cost of employee benefit plans paid for employees spending time on the project. Include costs for such plans as workmen's compensation insurance, unemployment insurance, health and hospital insurance, old age and survivors insurance and other retirement plans.

Travel Expense: Include agency costs for transportation, meals, lodging and incidental travel costs incurred in the performance of duties necessary to the project.

Supplies, Materials, Communications and Rental of Equipment: Include costs to the agency for general office supplies, telephone, telegraph, postage, printing, maintenance and repair of equipment; rental of equipment; heat, light, power, water, maintenance and repair of office space; janitorial supplies and services; and any other such items incidental to the operation of the project.

Equipment Purchase: Cost of equipment purchased for use in the project (including purchases on a rental purchase contract.)

Rental of Office Space: Rental cost of space occupied in the operation of the project.

Alterations and Improvements: Include costs of alterations or repairs of an extensive nature involving substantial structural changes or replacements necessary for the proper and efficient administration of the project. Do not include normal maintenance or upkeep charges.

Services of Other Governmental Agencies: Whenever a governmental agency operating an authorized project finds it necessary to obtain services from other governmental agencies to complete operations of the project for which the original agency has responsibility, the cost of such services are recognized as project costs. In such cases, costs must be determined through the counties' approved A-87 plan.

Others: Include any costs identifiable to the operation of the project which are not included in the above classifications.

Total project costs for the period will be reported in Column A of Form GEN 215.

Project costs not reimbursable from project funds will be reported in Column B.

County Welfare Departments: Project costs not reimbursable from project funds will be included in the regular Administrative Expenditures Claim and will be subject to federal and/or state reimbursement in the same manner as other administrative expenditures of county welfare departments.

Project costs reimbursable from project funds will be reported in Column C. The amounts in Column C are equal to Column A minus Column B.

Records identifying costs claimed shall be maintained on file in the county until notification of completion of audits for the applicable period is received from the State Department of Social Services.