

DOCUMENT RESUME

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TITLE ESEA Chapter 1 of Title 1 Budget/Amendment Process.

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PUB DATE Mar 89

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IDENTIFIERS \*Education Consolidation Improvement Act Chapter 1; \*North Carolina

ABSTRACT

This document consists of examples of budget forms to assist school district superintendents in North Carolina in administering funds for programs for low-income students under Chapter 1 of the Education Consolidation and Improvement Act. General information is supplied on the following topics: (1) budgets; (2) amendments; (3) substitute teacher pay; (4) career development salaries; (5) unemployment insurance; (6) unbudgeted federal grant funds; (7) National Diffusion Network (NDN) Projects; (8) classified principal increments; (9) carry-over and waiver provisions; and (10) administration and support costs. Examples of the following are provided: (1) an approved budget and supplementary schedules; (2) an equipment disposition request; (3) a budget amendment request; and (4) samples of all budget forms with instructions for completion. (FMW)

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BUDGET APPROVAL EXAMPLE



**NORTH CAROLINA  
DEPARTMENT OF  
PUBLIC INSTRUCTION**

116 West Edenton Street • Education Building  
Raleigh • 27603-1712

June 9, 1989

Superintendent  
Local School Administrative Unit  
Post Office Box Number  
City, North Carolina and Zip Code

Dear Superintendent:

Your 1989-90 budget for the federal project listed below has been approved as follows:

Program:	Chapter 1 - Low Income		
Project Number:	90-50-000		
Beginning Date:	7-1-89	Ending Date:	6-30-90
Project Accountant:	Ben Brown	Phone:	919/733-3841

Your attention is directed to the following important points:

Expenditures or encumbrances may not be made before the beginning date of this project nor before the official allotment of federal funds for this project is received from the Division of Budget Management.

Any carry-over grant funds from the previous grant must be expended within 27 months from the beginning of that grant period.

Expenditures in excess of the total project funds will be disallowed and must be refunded.

Expenditures exceeding budgeted line item amounts by more than 10% will result in an audit exception and will require a budget amendment or a refund.

The account classification for 8200-699 is now "Unbudgeted Federal Grant Funds." If you used any other account classification for this line item, please correct your local records.

As of July 1, 1987 your unemployment insurance contribution rate is 0% for this federal grant. Any funds budgeted for this item in your budget proposal have been transferred to line item 8200-699, "Unbudgeted Federal Grant Funds."

Please compare your Budget Balance Reconciliation Report to your local records on a monthly basis to ensure agreement.

Local School Administrative Unit  
Page 2  
June 9, 1989

Continued - Budget approval for project number 90-50-000

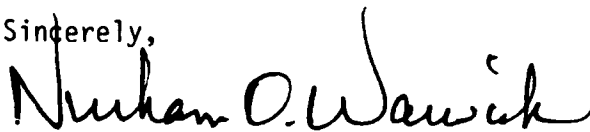
The following item(s) require compliance or a response within thirty days:

A copy of the contract for funds budgeted in code 5200-311 must be maintained in your files for review by your local auditor.

Your unit is in compliance with the policy adopted by the State Board of Education restricting ECIA Chapter 1 administrative support costs to 15% or less of your total budget.

If you have questions concerning this budget approval please feel free to call the project accountant.

Sincerely,



Nurham O. Warwick, Director  
Division of Federal Programs

BU1/hbn

c DPI Program Officer  
Finance Officer

FPD 208  
(R 1/89)

DIVISION of FEDERAL PROGRAMS  
DEPARTMENT OF PUBLIC INSTRUCTION  
116 West Edenton Street  
Raleigh, North Carolina 27603-1712

Estimated  
Carry-over 35,158  
Planning  
Allotment 210,000  
TOTAL 245,158

APPROVED BUDGET  
PROGRAM REPORT CODE # 50  
PROGRAM: CHAPTER 1 - Low Income

ANY Unit Name		000 Unit Number
90-50-000		\$ 245,158
Project Number	Project Approval Date	Approved Budget Amount
Project Period: Beginning July 1, 1989		Ending: June 30, 1990
ACCOUNT CLASSIFICATION	3-XXX- -XXX ACCOUNT CODE	APPROVED BUDGET
Special Instructional Programs		\$
Salaries-Teachers	3-5200-50-121	98,180
Teacher Assistants	3-5200-50-142	23,370
Tutor	3-5200-50-143	11,000
Substitutes-Certified	3-5200-50-182	750
Substitutes-E.T.T.	3-5200-50-184	275
Substitutes-Non-Certified	3-5200-50-185	275
Purchased Services-Contracted	3-5200-50-311	1,000
Travel	3-5200-50-332	500
Field Trips	3-5200-50-391	500
Instructional Supplies (Children)	3-5200-50-411	1,200
Computer Software	3-5200-50-418	500
Capital Outlay - Ins. Equipment	3-5200-50-541	340
Other Instructional Programs		
Employee Benefits - Social Security	3-5910-50-211	10,052
EXPENDITURE BUDGET TOTAL		\$ 147,942
+ UNBUDGETED FEDERAL GRANT FUNDS	3-8200- -699	\$
= TOTAL		\$

Continue on Reverse Side as Necessary

FPD 208 (Continued)  
(R 1/89)

ANY  
Unit Name \_\_\_\_\_  
90-50-000  
Project Number \_\_\_\_\_

000  
Unit Number \_\_\_\_\_

ACCOUNT CLASSIFICATION	3-XXXX- -XXX ACCOUNT CODE	APPROVED BUDGET
EXPENDITURE BUDGET TOTAL BROUGHT FORWARD		\$ 147,742
Retirement	3-5910-50-221	14,832
Hospitalization	3-5910-50-231	11,500
W. C. Insurance	3-5910-50-232	152
Dental Insurance	3-5910-50-239	600
Additional Pay - Longevity	3-5920-50-179	1,200
Supplements	3-5920-50-181	500
Improvement of Instructional Services		
Workshop Expenses	3-6210-50-312	4,000
General Administration		
Salaries - Director	3-6330-50-113	8,616
Secretary	3-6330-50-151	3,000
Purchased Services - Audit	3-6330-50-313	500
Travel	3-6330-50-332	500
Supplies & Materials - Supplies	3-6330-50-412	300
Computer Hardware	3-6330-50-542	2,992
Operation of Plant		
Communications - Telephone	3-6540-50-341	400
Postage	3-6540-50-342	250
Transportation of Pupils		
Contracted Service	3-6550-50-331	5,000
EXPENDITURE BUDGET TOTAL		\$ 202,284
+ UNBUDGETED FEDERAL GRANT FUNDS	3-8200- -699	\$
= TOTAL		\$

FPD 208 (Continued)  
(R 1/89)

ANY  
Unit Name  
90-50-000  
Project Number

000  
Unit Number

ACCOUNT CLASSIFICATION	XXXX- -XXX ACCOUNT CODE	APPROVED BUDGET
EXPENDITURE BUDGET TOTAL BROUGHT FORWARD		\$ 202,284
Information Services		
Printing and Binding Fees	3-6630-50-361	1,000
Other Support Services		
Employee Benefits - Social Security	3-6910-50-211	872
- Retirement	3-6910-50-221	1,300
- Hospitalization	3-6910-50-231	1,150
- W. C. Insurance	3-6910-50-232	30
- Dental Insurance	3-6910-50-239	75
Additional Pay - Longevity	3-6920-50-179	375
- Supplement	3-6920-50-181	500
Payments to Other Gov. Units &		
Transfer of Funds		
Mis. Objects - Indirect Cost	3-8100-50-692	4,422
(2.165%)		
EXPENDITURE BUDGET TOTAL		\$ 212,008
+ UNBUDGETED FEDERAL GRANT FUNDS	3-8200-50-695	\$ 33,150
TOTAL BUDGET		\$245,158





FPD 210  
(R 1/89)

DIVISION of FEDERAL PROGRAMS  
DEPARTMENT of PUBLIC INSTRUCTION  
116 West Edenton Street  
Raleigh, North Carolina 27603-1712

EXAMPLE

SUPPLEMENTARY SCHEDULE

UNIT NAME: ANY

PROGRAM: CHAPTER 1 - LOW INCOME

(1) Account Code	(2) Qty	(3) Description	(4) % Time Employed In Project	(5) No. of Months Employed	(6) Salary, Rental or Unit Cost	(7) Budgeted Amount
<u>5200</u>		Special Instructional Programs				
3-5200-50-121	5	Teachers	100	10	9,818	\$ 98,180
3-5200-50-142	2	Teacher Assistants	100	10	1,837	\$ 18,370
	1	Teacher Assistant	65	10	500	5,000
						\$ 23,370
3-5200-50-143	1	Tutor	100	10	1,100	11,000
3-5200-50-182		Substitutes-Certified				750
3-5200-50-184		Substitutes-Completed Effective Teacher Training (ETT)				275
3-5200-50-185		Substitutes-Non-Certified				275
3-5200-50-311		Contracted Service Take Home Computer Program Private School				1,000
3-5200-50-332		Travel-Teachers				500
3-5200-50-391		Field Trips (Connected with students education)				500
3-5200-50-411		Instructional Supplies				1,200
3-5200-50-418		Computer Software				500
3-5200-50-541		Instructional Equipment (See FPD 210-A)				340
Total Budgeted Amount						\$137,890

## Instructions for FPD 210

Enter the unit name and the name of the program for which the items on this form are being budgeted.

Column 1: Enter the full account code for the item being budgeted, including purpose code, program report code and object code. Use only codes listed in the current Program Report Code Chart of Accounts.

Column 2: Enter the number of items, employees, etc. being budgeted for this line item (for employees, enter number being budgeted for this code at this "percent employed" and "number of months employed").

Column 3: Enter the written account description for the code entered in column 1 (refer to descriptions in the Program Report Code Chart of Accounts).

Column 4: For salary codes only - enter the percent employed. (Each employee counted in column 2 of this line will be counted as working the percentage of time listed in this space.)

Column 5: For salary codes only - enter the number of months the persons counted in column 2 of this line will be paid.

Column 6: Enter the unit cost of one item (employee) listed on this line. (For salaries, enter the cost of one full-time employee for one month.)

Column 7: Enter the total cost being budgeted for this line:  
a. Purchases must equal column 2 X column 6 for this line.  
b. Salaries must equal column 2 X column 5 X column 6.

"Total Budgeted Amount": On the last page, enter the total of all entries in column 7 of each page used.

**NOTE:** Transfer the total of each code in column 1 to form FPD 208 as one entry. Do not transfer multiple lines for a single account code.

FPD 210  
(R 1/89)

DIVISION of FEDERAL PROGRAMS  
DEPARTMENT of PUBLIC INSTRUCTION  
116 West Edenton Street  
Raleigh, North Carolina 27603-1712

EXAMPLE

SUPPLEMENTARY SCHEDULE

UNIT NAME: ANY

PROGRAM: CHAPTER 1 - LOW INCOME

(1) Account Code	(2) Qty	(3) Description	(4) % Time Employed In Project	(5) No. of Months Employed	(6) Salary, Rental or Unit Cost	(7) Budgeted Amount
<u>5910</u>		Employee Benefits				
3-5910-50-211		Social Security 7.51%				\$10,052
3-5910-50-221		Retirement 11.19%				14,832
3-5910-50-231		Hospitalization Ins.				11,500
3-5910-50-232		W. C. Insurance				152
3-5910-50-239		Dental Insurance				600
<u>5920</u>		Additional Pay				
3-5920-50-179		Longevity				1,200
3-5920-50-181		Supplement Pay (5 teachers @ \$100 each)				500
Total Budgeted Amount						\$38,836

## Instructions for FPD 210

Enter the unit name and the name of the program for which the items on this form are being budgeted.

Column 1: Enter the full account code for the item being budgeted, including purpose code, program report code and object code. Use only codes listed in the current Program Report Code Chart of Accounts.

Column 2: Enter the number of items, employees, etc. being budgeted for this line item (for employees, enter number being budgeted for this code at this "percent employed" and "number of months employed").

Column 3: Enter the written account description for the code entered in column 1 (refer to descriptions in the Program Report Code Chart of Accounts).

Column 4: For salary codes only - enter the percent employed. (Each employee counted in column 2 of this line will be counted as working the percentage of time listed in this space.)

Column 5: For salary codes only - enter the number of months the persons counted in column 2 of this line will be paid.

Column 6: Enter the unit cost of one item (employee) listed on this line. (For salaries, enter the cost of one full-time employee for one month.)

Column 7: Enter the total cost being budgeted for this line:  
a. Purchases must equal column 2 X column 6 for this line.  
b. Salaries must equal column 2 X column 5 X column 6.

"Total Budgeted Amount": On the last page, enter the total of all entries in column 7 of each page used.

**NOTE:** Transfer the total of each code in column 1 to form FPD 208 as one entry. Do not transfer multiple lines for a single account code.

FPD 210  
(R 1/89)

DIVISION of FEDERAL PROGRAMS  
DEPARTMENT of PUBLIC INSTRUCTION  
116 West Edenton Street  
Raleigh, North Carolina 27603-1712

EXAMPLE

SUPPLEMENTARY SCHEDULE

UNIT NAME: ANY

PROGRAM: CHAPTER 1 - LOW INCOME

(1) Account Code	(2) Qty	(3) Description	(4) % Time Employed In Project	(5) No. of Months Employed	(6) Salary, Rental or Unit Cost	(7) Budgeted Amount
<u>6210</u>		Improvement of Instructional Services				
3-6210-50-312		Workshop Expenses (Staff Development for teachers and administrators)				4,000
<u>6330</u>		General Administration				
3-6330-50-113	1	Director - Salary	.25	12	718	8,616
3-6330-50-151	1	Secretary - Salary	.25	12	250	3,000
3-6330-50-313		Audit				500
3-6330-50-332		Travel - Director				500
3-6330-50-412		Supplies (Office Supplies for the Director and Secretary)				300
3-6330-50-542		Computer Hardware (See FPD 210-A)				2,992
<u>6540</u>						
3-6540-50-341		Telephone				400
3-6540-50-342		Postage				250
<u>6550</u>		Transportation of Pupils				
3-6550-50-331		Contracted Services				5,000
<u>6630</u>		Information Services				
3-6630-50-361		Printing and Binding Fees (Printing of materials for Instructional and Administrative Services)				1,000
<b>Total Budgeted Amount</b>						<b>\$ 26,558</b>

## Instructions for FPD 210

Enter the unit name and the name of the program for which the items on this form are being budgeted.

Column 1: Enter the full account code for the item being budgeted, including purpose code, program report code and object code. Use only codes listed in the current Program Report Code Chart of Accounts.

Column 2: Enter the number of items, employees, etc. being budgeted for this line item (for employees, enter number being budgeted for this code at this "percent employed" and "number of months employed").

Column 3: Enter the written account description for the code entered in column 1 (refer to descriptions in the Program Report Code Chart of Accounts).

Column 4: For salary codes only - enter the percent employed. (Each employee counted in column 2 of this line will be counted as working the percentage of time listed in this space.)

Column 5: For salary codes only - enter the number of months the persons counted in column 2 of this line will be paid.

Column 6: Enter the unit cost of one item (employee) listed on this line. (For salaries, enter the cost of one full-time employee for one month.)

Column 7: Enter the total cost being budgeted for this line:  
a. Purchases must equal column 2 X column 6 for this line.  
b. Salaries must equal column 2 X column 5 X column 6.

"Total Budgeted Amount": On the last page, enter the total of all entries in column 7 of each page used.

NOTE: Transfer the total of each code in column 1 to form FPD 208 as one entry. Do not transfer multiple lines for a single account code.

SUPPLEMENTARY SCHEDULE

UNIT NAME: ANY

PROGRAM: CHAPTER 1 - LOW INCOME

(1) Account Code	(2) Qty	(3) Description	(4) % Time Employed In Project	(5) No. of Months Employed	(6) Salary, Rental or Unit Cost	(7) Budgeted Amount
<u>6910</u>		Employee Benefits				
3-6910-50-211		Social Security 7.51%				872
3-6910-50-221		Retirement 11.19%				1,300
3-6910-50-231		Hospitalization Ins.				1,150
3-6910-50-232		W. C. Insurance				30
3-6910-50-239		Dental Insurance				75
<u>6920</u>		Additional Pay				
3-6920-50-179		Longevity-Dir.				375
3-6920-50-181		Supplement-Dir.				500
		Payments to Other Gov. Units and Transfer of Funds				
3-8100-50-692		Indirect Cost (2.165% approved rate)				4,422
		<u>EXAMPLE:</u>				
		Total Budget Line Items (Unbudgeted Funds not included)			207,586	
		Less: Equipment			- 3,332	
		Net			204,254	
		Indirect Cost Rat: 2.165%			x 2.165%	
		Indirect Cost			4,422	
3-8200-50-699		Unbudgeted Federal Grant Funds				33,150
<b>Total Budgeted Amount</b>						<b>\$ 41,874</b>

## Instructions for FPD 210

Enter the unit name and the name of the program for which the items on this form are being budgeted.

- Column 1: Enter the full account code for the item being budgeted, including purpose code, program report code and object code. Use only codes listed in the current Program Report Code Chart of Accounts.
- Column 2: Enter the number of items, employees, etc. being budgeted for this line item (for employees, enter number being budgeted for this code at this "percent employed" and "number of months employed").
- Column 3: Enter the written account description for the code entered in column 1 (refer to descriptions in the Program Report Code Chart of Accounts).
- Column 4: For salary codes only - enter the percent employed. (Each employee counted in column 2 of this line will be counted as working the percentage of time listed in this space.)
- Column 5: For salary codes only - enter the number of months the persons counted in column 2 of this line will be paid.
- Column 6: Enter the unit cost of one item (employee) listed on this line. (For salaries, enter the cost of one full-time employee for one month.)
- Column 7: Enter the total cost being budgeted for this line:  
a. Purchases must equal column 2 X column 6 for this line.  
b. Salaries must equal column 2 X column 5 X column 6.
- "Total Budgeted Amount": On the last page, enter the total of all entries in column 7 of each page used.
- NOTE:** Transfer the total of each code in column 1 to form FPD 208 as one entry. Do not transfer multiple lines for a single account code.



FPD 210-A  
(R 2/89)

DIVISION of FEDERAL PROGRAMS  
DEPARTMENT of PUBLIC INSTRUCTION  
116 West Edenton Street  
Raleigh, North Carolina 27603-1712

SUPPLEMENTAL SCHEDULE - EQUIPMENT ONLY

Program: CHAPTER 1 - LOW INCOME

Administrative Unit: ANY

QNTY	Description of Item	Unit Cost	Budgeted Amount	O/R	Justification for Purchase
4	<u>3-5200-50-541 INSTRUCTIONAL EQUIPMENT</u> Cassette Player	85.00	\$ 340.00	0	Cassette Player Recorders will be used by students in the reading labs to supplement instruction.
1	<u>3-6330-50-542 COMPUTER EQUIPMENT</u> PC System Unit, Keyboard 256 K Memory, 320 K Floppy Drive, 10M Fixed Disk, Asynch Communications, 8 Adapter Slots		2,992.00		This computer is needed to generate and store information on the Chapter 1 students served.
Total Budgeted Amount			\$3.332.00		

See Reverse for Preparation Instructions

## INSTRUCTIONS FOR PREPARATION OF FPD 210-A

1. QNTY - Enter the number of items of each description to be purchased.
2. Description of Item - Enter complete description of each item to be purchased. Include any special characteristics necessary for positive identification, as well as any pertinent attachments or accessories.
3. Unit Cost - Enter the purchase price of one of the described item.
4. Budgeted Amount - Enter the result of multiplying quantity times unit cost plus an appropriate amount for shipping and installation if applicable.
5. O/R - Enter letter indicating whether this is an original or replacement purchase.
6. Justification for Purchase - Indicate specific requirements necessitating purchase of the item(s).
  - 1) Original Purchase - Include, as a minimum, location of intended use, project component to use item, and number of comparable items on hand and their current use.
  - 2) Replacement Purchase - Include, as a minimum, the same information as original purchase, plus the date the disposition report was submitted for the item being replaced.

FPD 211  
(R 1/89)

DIVISION of FEDERAL PROGRAMS  
DEPARTMENT of PUBLIC INSTRUCTION  
116 West Edenton Street  
Raleigh, North Carolina 27603-1712

FEDERAL PROGRAMS EQUIPMENT INVENTORY LISTING  
FISCAL YEAR 1989-90

PROGRAM: CHAPTER 1 - LOW INCOME ADMINISTRATIVE UNIT ANY

DESCRIPTION	PURCHASE DATE	QNTY	UNIT COST	TOTAL COST	FOR STATE USE ONLY
Identify all prior year purchases: (not purchased in the current FY)					
Mobile Classrooms	Oct. - '69	2	3,500.00	\$7,000.00	
Tape Recorders	Nov. - '70	4	125.00	500.00	
IBM Electric Typewriter	Feb. - '79	1	650.00	650.00	
Overhead Projector	Dec. - '81	1	575.00	575.00	
Filmstrip Viewers	Nov. - '71	2	168.00	336.00	
Record Players	Nov. - '71	4	172.00	688.00	
Tape Players	Oct. - '72	2	119.00	238.00	
SUBTOTAL					
Identify equipment purchased in the current fiscal year:					
No equipment purchased in FY 88-89					
SUBTOTAL					
GRAND TOTAL				\$9,987.00	

Signature of Superintendent or designee \_\_\_\_\_

EQUIPMENT DISPOSITION EXAMPLE

October 3, 1989

TO: Chapter 1 Program Consultant  
North Carolina Department of Public Instruction

FROM: Jane Smith  
Chapter 1 Program Director

SUBJECT: Equipment Disposition

Enclosed is the form FPD 212, Equipment Disposition Request. It states clearly the physical condition and the disposition action.

Your permission to dispose of the items as listed is requested.

JS:hbn

Enclosure

DIVISION of FEDERAL PROGRAMS  
NORTH CAROLINA DEPARTMENT of PUBLIC INSTRUCTION  
116 West Edenton Street  
Raleigh, North Carolina 27603-1712

EXAMPLE

EQUIPMENT DISPOSITION REQUEST

Program: CHAPTER 1 - LOW INCOME

Administrative Unit: ANY

(1) Description Of Equipment Item	(2) Number To Be Disposed Of	(3) Date Purchased Month/Year	(4) Unit Cost	(5) Physical Condition	(6) Disposition Action Recommended
Filmstrip Viewers	2	Nov. - 71	168	Useless	Beyond Repair - Discard
Record Players	4	Nov. - 71	172	Poor	Beyond Repair - Discard
Tape Recorders	2	Oct. - 72	119	Useless	Cannibalize

- UNIT Project Director Approval Jane Smith 10/3/89  
(Date)

DPI Program Manager's Approval \_\_\_\_\_  
(Date)

Federal Programs Accountant Approval \_\_\_\_\_  
(Date)

See Reverse for Preparation Instructions

INSTRUCTIONS FOR PREPARATION OF FPD 212 (EQUIPMENT DISPOSITION REQUEST)

- A.
1. Complete columns 1 - 4 for each item needing to be purged from inventory.
  2. Complete column 5 for each item. Use "Excellent, Good, Fair, Poor, Useless" to describe actual current condition. If the item is not locatable and condition is not known, use "Unknown", however, a physical inventory of equipment must be taken and the results reconciled with the property records at least once every two years to verify the existence, current utilization, and continued need for the equipment.
  3. Complete column 6 for each item with recommended action.
    - a. Cannibalize - Equipment that has become unserviceable due to obsolete or excessive repair costs, but which still has serviceable component parts that can be used to repair, modify or construct other items of equipment.
    - b. Beyond Repair - Discard - Has become unserviceable through use, parts are not usable and will be thrown away.
    - c. Lost - Indicate the date of the last inventory taken when the item of equipment was unable to be located.
    - d. Stolen - Attach a copy of the Police or Sheriff Investigation Report.
    - e. Destroyed by Fire - Indicate insurance claim value as well as the date claim was filed and attach a copy, if possible.
    - f. No Longer Required - The equipment is not needed for the operation of the program and is available for transfer or sale. Indicate "Transfer on Loan to (other Federal Funded Education Program)" or "Sell at Auction" or "Sale Through Purchasing at a Fair Market Value" for any item of equipment with a unit cost of \$1,000 or more.
- B. The local project director signs to indicate approval of the request at the local level.
- C. Mail completed form with cover letter of explanation to:  
NORTH CAROLINA DEPARTMENT of PUBLIC INSTRUCTION  
(Appropriate DPI Division)  
116 West Edenton Street  
Raleigh, North Carolina 27603-1712
- D. The appropriate DPI program coordinator will sign to indicate program approval and forward to the Division of Federal Programs.
- E. You will be notified by return mail of approved disposition action and any further disposition instructions if necessary.



**NORTH CAROLINA  
DEPARTMENT OF  
PUBLIC INSTRUCTION**

116 West Edenton Street • Education Building  
Raleigh • 27603-1712

October 10, 1989

Jane Smith, Program Director  
Local School Administrative Unit  
Post Office Box Number  
City, North Carolina and Zip Code

Dear Ms. Smith:

We have approved your request for disposition of Chapter 1 - Low Income equipment listed on the attached FPD 212. Your equipment inventory card must indicate the manner of disposition and be placed in the inactive section of your inventory files.

If you have questions concerning these procedures, please call me at 919/733-3841.

Sincerely,

A handwritten signature in cursive script that reads "S. Royster".

Sharon Royster  
Budget Manager  
Division of Federal Programs

BU4/hbn  
Attachment



DIVISION of FEDERAL PROGRAMS  
NORTH CAROLINA DEPARTMENT of PUBLIC INSTRUCTION  
116 West Edenton Street  
Raleigh, North Carolina 27603-1712

EQUIPMENT DISPOSITION REQUEST

Program: CHAPTER 1 - LOW INCOME

Administrative Unit: ANY

(1) Description Of Equipment Item	(2) Number To Be Disposed Of	(3) Date Purchased Month/Year	(4) Unit Cost	(5) Physical Condition	(6) Disposition Action Recommended
Filmstrip Viewers	2	Nov. - 71	168	Useless	Beyond Repair - Discard
Record Players	4	Nov. - 71	172	Poor	Beyond Repair - Discard
Tape Recorders	2	Oct. - 72	119	Useless	Cannibalize

UNIT Project Director Approval Jane Smith 10/3/89  
(Date)

DPI Program Manager's Approval Chapter 1 Program Coordinator 10/6/89  
(Date)

Federal Programs Accountant Approval Chapter 1 Accountant 10/9/89  
(Date)

See Reverse for Preparation Instructions

INSTRUCTIONS FOR PREPARATION OF FPD 212 (EQUIPMENT DISPOSITION REQUEST)

- A.
1. Complete columns 1 - 4 for each item needing to be purged from inventory.
  2. Complete column 5 for each item. Use "Excellent, Good, Fair, Poor, Useless" to describe actual current condition. If the item is not locatable and condition is not known, use "Unknown", however, a physical inventory of equipment must be taken and the results reconciled with the property records at least once every two years to verify the existence, current utilization, and continued need for the equipment.
  3. Complete column 6 for each item with recommended action.
    - a. Cannibalize - Equipment that has become unserviceable due to obsolete or excessive repair costs, but which still has serviceable component parts that can be used to repair, modify or construct other items of equipment.
    - b. Beyond Repair - Discard - Has become unserviceable through use, parts are not usable and will be thrown away.
    - c. Lost - Indicate the date of the last inventory taken when the item of equipment was unable to be located.
    - d. Stolen - Attach a copy of the Police or Sheriff investigation Report.
    - e. Destroyed by Fire - Indicate insurance claim value as well as the date claim was filed and attach a copy, if possible.
    - f. No Longer Required - The equipment is not needed for the operation of the program and is available for transfer or sale. Indicate "Transfer on Loan to (other Federal Funded Education Program)" or "Sell at Auction" or "Sale Through Purchasing at a Fair Market Value" for any item of equipment with a unit cost of \$1,000 or more.
- B. The local project director signs to indicate approval of the request at the local level.
- C. Mail completed form with cover letter of explanation to:  
NORTH CAROLINA DEPARTMENT OF PUBLIC INSTRUCTION  
(Appropriate DPI Division)  
116 West Edenton Street  
Raleigh, North Carolina 27603-1712
- D. The appropriate DPI program coordinator will sign to indicate program approval and forward to the Division of Federal Programs.
- E. You will be notified by return mail of approved disposition action and any further disposition instructions if necessary.

BUDGET AMENDMENT APPROVAL EXAMPLE



**NORTH CAROLINA  
DEPARTMENT OF  
PUBLIC INSTRUCTION**

116 West Edenton Street • Education Building  
Raleigh • 27603-1712

October 3, 1989

Superintendent  
Local School Administrative Unit  
Post Office Box Number  
City, North Carolina and Zip Code

Dear Superintendent:

We have processed your budget amendment, number 1 for the federal project listed below:

Date Received:	9-18-89
Program:	Chapter 1 - Low Income
Project Number:	90-50-000
Effective Date:	9-18-89

If you have questions concerning this budget amendment please feel free to call the project accountant at (919) 733-3841.

Sincerely,

Nurham O. Warwick, Director  
Division of Federal Programs

BU3/hbn  
c Finance Officer  
DPI Program Officer

September 14, 1989

Proper State Program Consultant  
Department of Public Instruction  
Appropriate Division  
Raleigh, North Carolina 27603-1712

Dear Coordinator:

Please amend our Chapter 1 - Low Income Project, Number 90-50-000 as indicated on the attached FPD 209. The justifications are outlined below.

- 3-5200-50-121 Because of the number of Chapter 1 students at Happy Valley School, we need to hire a 25% teacher who will begin employment October 15, 1989. (Appropriate program pages are attached.)
- 3-5200-50-311 Additional funds are needed to support the total cost of Contracted Services. In our original projected budget we had not entered into a contract and therefore underestimated the cost.
- 3-6210-50-312 Funds budgeted for In-Service training need to be increased. Two additional Chapter 1 teachers will be attending the State Chapter 1 Conference in December.
- 3-8200-50-699 The net of the above line item adjustments is transferred from unbudgeted federal grant funds which covers these budget increases.

Thank you for your consideration of this request.

Sincerely,

Jane Smith  
Program Director

JS:hbn  
Attachment: FPD 209

DIVISION of FEDERAL PROGRAMS  
DEPARTMENT of PUBLIC INSTRUCTION  
116 West Edenton Street  
Raleigh, North Carolina 27603-1712

EXAMPLE

AMENDMENT REQUEST # 1  
PROGRAM REPORT CODE # 50

PROGRAM: CHAPTER 1 - LOW INCOME

ANY Unit Name		000 Unit Number		
90-50-000 Project Number		\$ 245,158 Approved Budget Amount		
Project Period: Beginning July 1, 1989		Ending June 30, 1990		
ACCOUNT CLASSIFICATION	(1)	(2)	(3)	(4)
	3-XXXX- -XX ACCOUNT CODE	APPROVED BUDGET	INCREASES AND/OR DECREASES	APPROVED REVISED BUDGET
Teachers - Salaries	3-5200-50-121	\$ 98,180.00	\$ 5,500.00 +	\$ 103,680.00
Contracted Services	3-5200-50-311	1,000.00	1,200.00 +	2,200.00
Inservice Training	3-6210-50-312	4,000.00	500.00 +	4,500.00
Unbudgeted Federal Grant Funds	3-8200-50-699	33,150.00	7,200.00 -	25,950.00
COLUMN TOTALS		\$ 136,330.00	\$ -0-	\$ 136,330.00

(OVER)



Submitted by Bookkeeper  
\* Signature Superintendent 9-14-89  
Superintendent or Finance Officer Date

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FOR STATE AGENCY USE ONLY:

Request Approved  \_\_\_\_\_

Request Returned Without Action \_\_\_\_\_

Complete Data Received in DPI Program Office \_\_\_\_\_

Signature State 9-19-89  
Appropriate Program Coordinator(s) Date

Signature State - Federal Programs Accountant 9-23-89  
Accountant, Division of Federal Programs Date

\* Submit this amendment by way of the appropriate Department of Public Instruction program coordinator. Do not submit amendments directly to the Division of Federal Programs.



**GENERAL INFORMATION**



DIVISION OF FEDERAL PROGRAMS  
BUDGET SECTION  
GENERAL INFORMATION  
FY 1989-90

1. BUDGETS

Should be prepared in accordance with the example booklet.

- Use the Uniform Chart of Accounts for your program area when preparing budgets and amendments. Invalid account codes in budgets and amendments cannot be approved.
- Budget line-items should be listed in numerical order.
- Original budgets must be rounded to the nearest dollar.

2. AMENDMENTS

The following policy should be followed in the preparation and submission of amendments to the State Education Agency.

- Limit to quarterly requests if possible.
- Request amendments before funds are expended; not after expenditures are incurred. A close monitoring of assessed needs and working with the fiscal staff to determine commitments in process can avoid this situation. Proper planning can also eliminate redundancy and excessive processing of amendments.
- Form FPD 209, Amendment Request, should reflect only the budget line-items requiring change. The Division of Federal Programs no longer requires the complete revised budget.
- Fill in Program Report Code (PRC) and Amendment Request Number in spaces provided at the top of Form FPD 209. Amendment request numbers should be sequential, beginning with number 1.
- Submit all budget amendments (Form FPD 209) to the appropriate DPI Consultant and/or Coordinators along with a letter of justification which properly describes the change. Avoid simple statements like, "insufficient funds for salaries." A better statement would be "Additional funds are needed in order to compensate for the legislative increase in teachers' salaries." Be very specific.
- When changing salaries, include any change in the number of personnel, length of employment and percent of employment.
- Ensure that incurred expenditures are within the 10% margin allowed for each budget line-item. The following example constitutes a budget line-item according to the Division of Federal Programs definition for this purpose.

<u>Code Purpose Object</u>	<u>Approved Budget</u>	<u>Expenditures</u>	<u>Balance</u>
5200-411	\$ 1,200	\$ 1,440	\$ (240)
5200-418	500	0	500
6210-312	4,000	4,450	(450)
6910-211	872	575	297
6910-221	1,300	1,120	180
6910-231	1,150	925	225
6910-232	30	40	(10)
6910-239	75	65	10
TOTALS	<u>\$ 9,127</u>	<u>\$ 8,615</u>	<u>\$ 512</u>

Line-items are distinguished by like four-digit purpose codes and like hundred series. In the example above, instructional supplies, which is object code 411, and computer software, which is 418, constitute a single line-item because both are classified under purpose code 5200. In the example above the negative balance in budget code 5200-411 for (\$240) does not constitute a budget discrepancy audit exception since two account codes make one budget line item totalling \$1,700. Total expenditures are within the 10% margin allowed for deviation. Budget code 6210-312 is a budget line-item by itself and needs an amendment since it has exceeded the 10% margin allowed.

### 3. SUBSTITUTE PAY

Compensation for substitute teacher services is allowed at the set daily rate (according to qualifications of the substitute) using the following object account codes which are included in the Uniform Chart of Accounts (PRC).

<u>Account Code</u>	<u>Classification</u>	<u>Rate Effective 7-1-87</u>
182	Substitute Pay - Certified	\$52.00
184	Substitute Pay - Non-Certified but with one week of Effective Teacher Training	\$45.00
185	Substitute Pay - Non-Certified	\$35.00

### 4. CAREER DEVELOPMENT - SALARIES

Salaries paid to eligible employees who have completed the Career Development Training will be coded according to the following classification. The example reflects payment for teachers, but is not limited to these codes. Account codes for all eligible employees are shown in the Uniform Chart of Accounts (PRC).

<u>Account Code</u>	<u>Classification</u>
5207-121	Career Development - Salary - Teacher (Prom. or Transfers)
5208-121	Career Development - Salary - Teacher (Career Status II)
5209-121	Career Development - Salary - Teacher (Career Status I)

5. UNEMPLOYMENT INSURANCE

Do not set up Unemployment Insurance Cost in your budget unless otherwise instructed.

6. BUDGET CODE 8200-699 - UNBUDGETED FEDERAL GRANT FUNDS

If this code reflects a negative balance, a budget amendment must be submitted to clear the deficit. You may not budget more funds than you have available.

7. NATIONAL DIFFUSION NETWORK PROJECTS (NDN)

Purpose codes 6230 and 6240 must only be used to identify NDN activities. These codes are outlined in the Uniform Chart of Accounts (PRC).

8. CLASSIFIED PRINCIPAL INCREMENTS

Use supplementary pay code 6920-XX-181 for all classified principal increments.

9. CHAPTER 1 - LOW INCOME CARRY-OVER AND WAIVER

Funds allotted under Chapter 1 - Low Income are restricted to carry-over provisions according to Part F - General Provisions, Sections 1432 (B) 1, 2 and 3. The law states the following:

- (1) not more than 25 percent of funds appropriated for fiscal year 1989 and 15 percent of funds appropriated for fiscal year 1990 and each subsequent year may remain available for obligation for 1 additional year;
- (2) a State educational agency may grant a 1-time waiver of the percentage limitation under paragraph (1) if the agency determines that the request by a local educational agency is reasonable and necessary or may grant a waiver in any fiscal year in which supplemental appropriations for this chapter become available for obligation; and
- (3) the percentage limitation under paragraph (1) shall not apply with respect to any local educational agency which receives less than \$50,000 under this chapter for any fiscal year.

25% Carry-Over Example:

Sept. 30, 1990 Budget Balance (Carry-over)	\$101,000.00
FY 89-90 Initial Allotment	
\$400,000 X 25% Carry-over Limitation	<u>100,000.00</u>
Excess Carry-over	<u>.(1,000.00)</u>

10. ADMINISTRATION AND SUPPORT COST

Administration and support costs cannot exceed 15% of the Chapter 1 - Low Income budget for fiscal year 1989-90 and each fiscal year thereafter.

BUDGET FORMS

DIVISION of FEDERAL PROGRAMS  
DEPARTMENT OF PUBLIC INSTRUCTION  
116 West Edenton Street  
Raleigh, North Carolina 27603-1712

APPROVED BUDGET  
PROGRAM REPORT CODE # \_\_\_\_\_  
PROGRAM: \_\_\_\_\_

Unit Name _____		Unit Number _____
Project Number _____	Project Approval Date _____	\$ Approved Budget Amount _____
Project Period: Beginning _____		Ending: _____
ACCOUNT CLASSIFICATION	3-XXXX- -XXX ACCOUNT CODE	APPROVED BUDGET
		\$
EXPENDITURE BUDGET TOTAL		\$
+ UNBUDGETED FEDERAL GRANT FUNDS	3-8200- -699	\$
= TOTAL GRANT FUNDS		\$

Continue on Reverse Side as Necessary





FPD 209  
(R 1/89)

DIVISION of FEDERAL PROGRAMS  
 DEPARTMENT of PUBLIC INSTRUCTION  
 116 West Edenton Street  
 Raleigh, North Carolina 27603-1712

AMENDMENT REQUEST # \_\_\_\_\_  
 PROGRAM REPORT CODE # \_\_\_\_\_

PROGRAM: \_\_\_\_\_

<u>Project Name</u>	<u>Unit Number</u>			
<u>Project Number</u>	\$ <u>Approved Budget Amount</u>			
Project Period: Beginning _____	Ending _____			
ACCOUNT CLASSIFICATION	(1)	(2)	(3)	(4)
	3-XXXX- -XX ACCOUNT C JE	APPROVED BUDGET	INCREASES + AND/OR DECREASES -	APPROVED REVISED BUDGET
		\$	\$	\$
COLUMN TOTALS		\$	\$	\$

(OVER)





FPD 209  
(R 1/89)

Submitted by \_\_\_\_\_

\* Signature \_\_\_\_\_  
Supervisor or Finance Officer \_\_\_\_\_ Date \_\_\_\_\_

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FOR STATE AGENCY USE ONLY:

Request Approved \_\_\_\_\_

Request Returned Without Action \_\_\_\_\_

Complete Data Received in DPI Program Office \_\_\_\_\_

Signature \_\_\_\_\_  
Appropriate Program Coordinator(s) \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_  
Accountant, Division of Federal Programs \_\_\_\_\_ Date \_\_\_\_\_

\* Submit this amendment by way of the appropriate Department of Public Instruction program coordinator. Do not submit amendments directly to the Division of Federal Programs.

SUPPLEMENTARY SCHEDULE

UNIT NAME: \_\_\_\_\_

PROGRAM: \_\_\_\_\_

(1) Account Code	(2) Qty	(3) Description	(4) % Time Employed In Project	(5) No. of Months Employed	(6) Salary, Rental, or Unit Cost	(7) Budgeted Amount
Total Budgeted Amount						\$

### Instructions for FPD 210

Enter the unit name and the name of the program for which the items on this form are being budgeted.

Column 1: Enter the full account code for the item being budgeted, including purpose code, program report code and object code. Use only codes listed in the current Program Report Code Chart of Accounts.

Column 2: Enter the number of items, employees, etc. being budgeted for this line item (for employees, enter number being budgeted for this code at this "percent employed" and "number of months employed").

Column 3: Enter the written account description for the code entered in column 1 (refer to descriptions in the Program Report Code Chart of Accounts).

Column 4: For salary codes only - enter the percent employed. (Each employee counted in column 2 of this line will be counted as working the percentage of time listed in this space.)

Column 5: For salary codes only - enter the number of months the persons counted in column 2 of this line will be paid.

Column 6: Enter the unit cost of one item (employee) listed on this line. (For salaries, enter the cost of one full-time employee for one month.)

Column 7: Enter the total cost being budgeted for this line:  
a. Purchases must equal column 2 X column 6 for this line.  
b. Salaries must equal column 2 X column 5 X column 6.

"Total Budgeted Amount": On the last page, enter the total of all entries in column 7 of each page used.

NOTE: Transfer the total of each code in column 1 to form FPD 208 as one entry. Do not transfer multiple lines for a single account code.

DIVISION of FEDERAL PROGRAMS  
DEPARTMENT of PUBLIC INSTRUCTION  
116 West Edenton Street  
Raleigh, North Carolina 27603-1712

SUPPLEMENTAL SCHEDULE - EQUIPMENT ONLY

Program: \_\_\_\_\_ Administrative Unit: \_\_\_\_\_

QNTY	Description of Item	Unit Cost	Budgeted Amount	O/R	Justification for Purchase
Total Budgeted Amount					

See Reverse for Preparation Instructions

## INSTRUCTIONS FOR PREPARATION OF FPD 210-A

1. QNTY - Enter the number of items of each description to be purchased.
2. Description of Item - Enter complete description of each item to be purchased. Include any special characteristics necessary for positive identification, as well as any pertinent attachments or accessories.
3. Unit Cost - Enter the purchase price of one of the described item.
4. Budgeted Amount - Enter the result of multiplying quantity times unit cost plus an appropriate amount for shipping and installation if applicable.
5. O/R - Enter letter indicating whether this is an original or replacement purchase.
6. Justification for Purchase - Indicate specific requirements necessitating purchase of the item(s).
  - 1) Original Purchase - Include, as a minimum, location of intended use, project component to use item, and number of comparable items on hand and their current use.
  - 2) Replacement Purchase - Include, as a minimum, the same information as original purchase, plus the date the disposition report was submitted for the item being replaced.

DIVISION of FEDERAL PROGRAMS  
DEPARTMENT of PUBLIC INSTRUCTION  
116 West Edenton Street  
Raleigh, North Carolina 27603-1712

FEDERAL PROGRAMS EQUIPMENT INVENTORY LISTING  
FISCAL YEAR \_\_\_\_\_

PROGRAM: \_\_\_\_\_ ADMINISTRATIVE UNIT \_\_\_\_\_

DESCRIPTION	PURCHASE DATE	QNTY	UNIT COST	TOTAL COST	FOR STATE USE ONLY
Identify all prior year purchases: (not purchased in the current FY)					
SUBTOTAL					
Identify equipment purchased in the current fiscal year:					
SUBTOTAL					
GRAND TOTAL					

Signature of Superintendent or designee \_\_\_\_\_



## INSTRUCTIONS FOR PREPARATION OF FPD 211

### I. Identify all prior year purchases.

1. DESCRIPTION - Enter complete description of each item purchased in prior year(s).
2. PURCHASE DATE - Enter date the item was purchased.
3. QNTY - Enter the number of items of each description purchased.
4. UNIT COST - Enter the purchase price of one of the described items.
5. TOTAL COST - Enter the result of multiplying QNTY (quantity) times unit cost.
6. FOR STATE USE ONLY - Do not complete this column.
7. SUBTOTAL - Enter the total of all entries in the TOTAL COST column for prior year purchases.

### II. Identify equipment purchased in the current fiscal year.

1. DESCRIPTION - Enter complete description of each item purchased this year.
2. PURCHASE DATE - Enter date the item was purchased.
3. QNTY - Enter the number of items of each description purchased.
4. UNIT COST - Enter the purchase price of one of the described items.
5. TOTAL COST - Enter the result of multiplying QNTY (quantity) times unit cost.
6. FOR STATE USE ONLY - Do not complete this column.
7. SUBTOTAL - Enter the total of all entries in the TOTAL COST column for current year purchases.

### III. GRAND TOTAL

Enter the total of all prior year and current year purchases identified on form.

### IV. SIGNATURE

Signature of local superintendent or his/her designee is required.

DIVISION of FEDERAL PROGRAMS  
 NORTH CAROLINA DEPARTMENT of PUBLIC INSTRUCTION  
 116 West Edenton Street  
 Raleigh, North Carolina 27603-1712

EQUIPMENT DISPOSITION REQUEST

Program: \_\_\_\_\_

Administrative Unit: \_\_\_\_\_

(1) Description Of Equipment Item	(2) Number To Be Disposed Of	(3) Date Purchased Month/Year	(4) Unit Cost	(5) Physical Condition	(6) Disposition Action Recommended

UNIT Project Director Approval \_\_\_\_\_ (Date) \_\_\_\_\_

DPI Program Manager's Approval \_\_\_\_\_ (Date) \_\_\_\_\_

Federal Programs Accountant Approval \_\_\_\_\_ (Date) \_\_\_\_\_

See Reverse for Preparation Instructions



## INSTRUCTIONS FOR PREPARATION OF FPD 212 (EQUIPMENT DISPOSITION REQUEST)

- A.
1. Complete columns 1 - 4 for each item needing to be purged from inventory.
  2. Complete column 5 for each item. Use "Excellent, Good, Fair, Poor, Useless" to describe actual current condition. If the item is not locatable and condition is not known, use "Unknown", however, a physical inventory of equipment must be taken and the results reconciled with the property records at least once every two years to verify the existence, current utilization, and continued need for the equipment.
  3. Complete column 6 for each item with recommended action.
    - a. Cannibalize - Equipment that has become unserviceable due to obsolete or excessive repair costs, but which still has serviceable component parts that can be used to repair, modify or construct other items of equipment.
    - b. Beyond Repair - Discard - Has become unserviceable through use, parts are not usable and will be thrown away.
    - c. Lost - Indicate the date of the last inventory taken when the item of equipment was unable to be located.
    - d. Stolen - Attach a copy of the Police or Sheriff Investigation Report.
    - e. Destroyed by Fire - Indicate insurance claim value as well as the date claim was filed and attach a copy, if possible.
    - f. No Longer Required - The equipment is not needed for the operation of the program and is available for transfer or sale. Indicate "Transfer on Loan to (other Federal Funded Education Program)" or "Sell at Auction" or "Sale Through Purchasing at a Fair Market Value" for any item of equipment with a unit cost of \$1,000 or more.
- B. The local project director signs to indicate approval of the request at the local level.
- C. Mail completed form with cover letter of explanation to:  
NORTH CAROLINA DEPARTMENT OF PUBLIC INSTRUCTION  
(Appropriate DPI Division)  
116 West Edenton Street  
Raleigh, North Carolina 27603-1712
- D. The appropriate DPI program coordinator will sign to indicate program approval and forward to the Division of Federal Programs.
- E. You will be notified by return mail of approved disposition action and any further disposition instructions if necessary.