

ACCOUNT NO.					RESOLUTION DESCRIPTION	INCREASE	DECREASE	UNIT COST	DEPARTMENT NAME
A9 4310 1 2205J 430040					Staff Social Worker	\$48,344.00		\$58,000.00	
A9 4310 1 5027J 430208					Peer Advocate	\$31,667.00		\$38,000.00	
A9 4310 8 9010					State Retirement	11,202.00			
A9 4310 8 9030					Social Security	6,121.00			
A9 4310 8 9060					Hospital And Medical Insurance	\$20,003.00			
A9 4310 2 2050					Computer Equipment	2,200.00			
A9 4310 4 4036					Telephone	2,200.00			
A9 4310 4 4038					Travel-Mileage, Freight	2,000.00			
A9 4310 4 4046					Fees For Services	37,000.00			
TOTAL APPROPRIATIONS						\$160,737.00	\$0.00		
ACCOUNT NO.					RESOLUTION DESCRIPTION	DECREASE	INCREASE	UNIT COST	DEPARTMENT NAME
A3 4310 03490					Mental Health (State Aid)		\$160,737.00		
TOTAL ESTIMATED REVENUES						\$0.00	\$160,737.00		
GRAND TOTALS						\$160,737.00	\$160,737.00		