	AR NO. 2004-14
1 2 3 4 5 6	A RESOLUTION OF THE MUNICIPALITY OF ANCHORAGE APPROPRIATING THIRTY-SEVEN THOUSAND ONE HUNDRED THIRTY-FIVE DOLLARS (\$37,135) FROM THE ALASKA DEPARTMENT OF HEALTH AND SOCIAL SERVICES TO THE STATE CATEGORICAL GRANTS FUND (231) FOR THE APPROVED PROVIDER CLOSE-OUT IN THE DEPARTMENT OF HEALTH AND HUMAN SERVICES.
7 8	THE ANCHORAGE ASSEMBLY RESOLVES:
9 10 11 12 13	Section 1. That the sum of Thirty-Seven Thousand One Hundred Thirty-Five Dollars (\$37,135) from the Alaska Department of Health and Social Services are hereby appropriated to the State Categorical Grants Fund (231) for the Approved Provider Close-Out in the Departmen of Health and Human Services.
14 15 16 17	Section 2. That this resolution shall take effect immediately upon passage and approval by the Anchorage Municipal Assembly.
18 19 20 21 22 23 24	PASSED AND APPROVED by the Anchorage Assembly this 20th day of <u>January</u> 2004 Chair
25 26	ATTEST:
27 28	Salae 5. Duesto
29	Municipal Clerk
30 31 32	Department of Appropriation: Department of Health and Human Services \$37,135

Submitted by:

Prepared by:

For reading:

CLERK'S OFFICE

APPROVEDDate: 1-20-04

Chairman of the Assembly at the Request of the Mayor Department of Health and

Human Services

January 20, 2004



MUNICIPALITY OF ANCHORAGE

ASSEMBLY MEMORANDUM

No. AM 50 -2004

Meeting Date: January 20, 2004

Subject:

From:

Resolution No. AR 2004- 14 , Appropriating the State of Alaska Grant Award for the Approved Provider Close-Out in the Department of Health and Human

Services.

Mayor

The accompanying Assembly Resolution appropriates Thirty-Seven Thousand One Hundred Thirty-Five Dollars (\$37,135) from the Alaska Department of Health and Social Services to the State Categorical Grants Fund (231) for the Approved Provider Close-Out in the Department of Health and Human Services.

The Municipality has been funded for several years by the State to register and approve child care homes exempt from licensing but seeking child care assistance funding. As of July 1, 2003, the Child Care Approved Provider Project was not fully funded by the State of Alaska so by agreement it was transferred back to the State Department of Health and Social Services.

The transitional funding to terminate the Child Care Approved Provider Project was identified and approved by the State of Alaska up to an amount not to exceed \$49,000 for administrative costs associated with the closeout of its Approved Care functions. The Project is now concluded and the administrative expenses total \$37,135.

The following budget is submitted:

State Categorical Grants Fund (231)

REVENUES		
231-23783G-9825	State Grant Revenue	\$37,135
	TOTAL	\$37,135
EXPENDITURES:		
231-23783G-1101	Salaries and Wages	25,760
231-23783G-1401	Retirement	6,580
231-23783G-6088	IT	10
231-23783G-6091	Office of Mgmt & Budget	30
231-23783G-6095	Purchasing Services	150
231-23783G-6103	Financial Reporting	370
231-23783G-6105	Financial Processing Accts Payable	20
231-23783G-6110	Financial Info Systems	140

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1	231-23783G-6145	General Liability	135
2	231-23783G-6147	Workers Compensation	1,500
3	231-23783G-6222	Fiscal Support	1,220
4	231-23783G-6232	Social Service Administration	1,220
5		TOTAL	\$37,135
6			
7	RECOMMENDATION:		
8			
9	THE ADMINISTRATION RE	COMMENDS THE APPROVAL OF THE	ATTACHED RESOLUTION.
10			
11	Prepared by: Beverly K. Wo	poley, Director, Department of Healt	h and Human Services
12	Fund Certification: Jeffrey I	E. Sinz, CFO	
13	231-23783G-9825-2378	330 (BP2003 \$37,135)	
14	State Grant		
15	Concur: Denis C. LeBlanc, I		
16	Respectfully submitted: Ma	rk Begich, Mayor	

Content Information

Content ID: 001395

Type: AR_FundsApprop - Funds Approp Resolution

A resolution to appropriate \$37,135 from the Alaska Department of Title: Health and Social Services for the Approved Provider Close-Out in

the Department of Health And Human Services.

Author: pinkleyda **Initiating Dept: HHS**

A resolution to appropriate \$37,135 from the Alaska Department of

Description: Health and Social Services for the Approved Provider Close-Out in

the Department of Health And Human Services.

Date Prepared: 12/22/03 3:05 PM Director Name: Beverly K. Wooley

Document Number: AR 2004-

Assembly Meeting 01/20/04 Date MM/DD/YY:

Workflow History

Workflow Name	Action Date	Action	<u>User</u>	Security Group	Content ID	
FundsAppropWorkflow	12/22/03 3:09 PM	Checkin	pinkleyda	Public	001395	
HHS_SubWorkflow	12/22/03 3:44 PM	Approve	wooleybk	Public	001395	
OMB_SubWorkflow	12/24/03 9:07 AM	Approve	wiltsep	Public	001395	
Finance_SubWorkflow	12/29/03 3:54 PM	Approve	sinzje	Public	001395	
MuniManager_SubWorkflow	1/11/04 1:32 PM	Approve	leblancdc	Public	001395	
MuniMgrCoord_SubWorkflow	1/12/04 12:06 PM	Approve	abbottmk	Public	001398	

CONSENT AGENDA - RESOLUTIONS FOR ACTION-OTHER

2004 JAH 12 PH 5: 00