

0				0 -- History	
Street/PO Box					
City					
State <span style="float:right">Drop Down Menu</span>					
Zip					
Years in existence:					
For Profit or Non Profit: <span style="float:right">Drop Down Menu</span>					
<b>Organizational Leader (OL)</b>					
OL Title					
OL First Name					
OL Last Name					
OL Email					
OL Phone					
<b>Billing Contact (BC)</b>					
BC First Name					
BC Last Name					
BC Email					
BC Phone					
<b>IRS 990 Information if Non-Profit</b>				<b>IRS 990 Information if Non-Profit -- Explanation of changes, if any.</b>	
Part I, Program Service Revenue	Enter Year	Enter Year	Enter Year	Directions for IRS 990: Provide data from last three completed 990s. For-profit agencies may skip 990 section.	
Part I, Total Revenue					
Part I, Total Expenses					
Part I, Revenues less expenses	\$ -	\$ -	\$ -		
Part X, Savings and temporary cash investments					
Part XI, Net assets or fund balances at beginning of year					
Total lines (5 through 9) enter as negative or positive					
Net assets or fund balances at end of year	\$ -	\$ -	\$ -		
<b>List top 5 highest compensated staff by Position Title Only and Annual Compensation.</b>	Enter Year	Enter Year	Enter Year		<b>List top 5 highest compensated staff by Position Title Only and Annual Compensation. -- Explanation of changes, if any.</b>
<b>Summary of Program Data (automatically filled with program data)</b>				<b>Summary of Program Data (automatically filled) -- Explanation of changes, if any.</b>	
	FY20 Allocation	FY21 Allocation	FY22 Request		
Boone County				Boone	
Fund: Drop Down Menu; Program #1; Unit Cost = \$0	\$0	\$0	\$0		
Fund: Drop Down Menu; Program #2; Unit Cost = \$0	\$0	\$0	\$0		
Fund: Drop Down Menu; Program #3; Unit Cost = \$0	\$0	\$0	\$0		
Fund: Drop Down Menu; Program #4; Unit Cost = \$0	\$0	\$0	\$0		
Fund: Drop Down Menu; Program #5; Unit Cost = \$0	\$0	\$0	\$0		
Fund: Drop Down Menu; Program #6; Unit Cost = \$0	\$0	\$0	\$0		
<b>Boone County Totals</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>		
Campbell County				Campbell	
Fund: Drop Down Menu; Program #1; Unit Cost = \$0	\$0	\$0	\$0		
Fund: Drop Down Menu; Program #2; Unit Cost = \$0	\$0	\$0	\$0		
Fund: Drop Down Menu; Program #3; Unit Cost = \$0	\$0	\$0	\$0		
Fund: Drop Down Menu; Program #4; Unit Cost = \$0	\$0	\$0	\$0		
Fund: Drop Down Menu; Program #5; Unit Cost = \$0	\$0	\$0	\$0		
Fund: Drop Down Menu; Program #6; Unit Cost = \$0	\$0	\$0	\$0		
<b>Campbell County Totals</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>		
Kenton County				Kenton	
Fund: Drop Down Menu; Program #1; Unit Cost = \$0	\$0	\$0	\$0		
Fund: Drop Down Menu; Program #2; Unit Cost = \$0	\$0	\$0	\$0		
Fund: Drop Down Menu; Program #3; Unit Cost = \$0	\$0	\$0	\$0		
Fund: Drop Down Menu; Program #4; Unit Cost = \$0	\$0	\$0	\$0		
Fund: Drop Down Menu; Program #5; Unit Cost = \$0	\$0	\$0	\$0		
Fund: Drop Down Menu; Program #6; Unit Cost = \$0	\$0	\$0	\$0		
<b>Kenton County Totals</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>		

0 - Program #1				0 - Program #1			
Program #1	Previous FY	Current FY	Application FY	Program #1			
Revenue(s)	20	21	22	Reason for Est. Change in Revenue, if any.			
				For-profit agencies should not input any revenues, but should include expenses and units to be supplied that produces unit cost.			
				Boone, Campbell, and Kenton Funds (Row 78): Contract amount for Previous/Current FY, and estimated amount for Application FY. These will not be included in your total revenues.			
Boone, Campbell and Kenton Funds (not included in total)	\$ -	\$ -	\$ -				
<b>Revenues (excluding Counties)</b>	\$ -	\$ -	\$ -				
Expense	20	21	22	Reason for Est. Change in Expenses, if any.			
Program Expenses							
Program Management Cost							
Program Development (Fund Raising Cost)							
<b>Total Expenses</b>	\$ -	\$ -	\$ -				
Fiscal Year Summary	20	21	22	Reason for Est. Change in Units, if any.			
Revenues (excluding Counties)	\$ -	\$ -	\$ -	Total Program Units = units for entire program, across all funding streams			
Total Expenses	\$ -	\$ -	\$ -				
<b>Net Gain or (Loss)</b>	\$ -	\$ -	\$ -				
Total Program Units Actual (C)/Projected (D, E)							
Agency Unit Cost	\$ -	\$ -	\$ -				
County Unit Cost = Net Gain or Loss/Total Program Units	\$ -	\$ -	\$ -				
General Program Information				Program Description Continued			
Years providing this program/service:				<b>PROGRAM DESCRIPTION (MUST BE VIEWABLE IN BOX BELOW)</b>			
Target client(s)	Drop Down Menu						
Unit of service defined (per hour, day, meal, etc.)	Drop Down Menu						
Funding Source MH/ID/AG:	Drop Down Menu						
ENTER COMPLETE PROGRAM DESCRIPTION HERE (CONTINUE IN COLUMN 'F' IF YOU NEED ADDITIONAL SPACE)							
Unduplicated Clients	20	21	22	Reason for Est. Change in Unduplicated Clients if any.			
Boone County							
Campbell County							
Kenton County							
Other County(ies)							
Total							
Requested Allocation Summary				Summary (State what your agency wants us to know.)			
County Unit Cost (Previous & Current)	\$0.00	\$0.00	\$0.00				
<b>Boone County</b>	<b>20</b>	<b>21</b>	<b>22</b>				
Actual Units Provided (C), Estimated Units (D, E)							
Total Boone County Dollars			\$0				
<b>Campbell County</b>	<b>20</b>	<b>21</b>	<b>22</b>				
Actual Units Provided (C), Estimated Units (D, E)							
Total Campbell County Dollars			\$0				
<b>Kenton County</b>	<b>20</b>	<b>21</b>	<b>22</b>				
Actual Units Provided (C), Estimated Units (D, E)							
Total Kenton County Dollars			\$0				
<b>All Other Counties</b>	<b>20</b>	<b>21</b>	<b>22</b>				
Units provided (Previous & Current) and to be provided.							
Total Units under "Requested Allocation Summary"	-	-	-				
Reconciliation of total program units (MUST equal zero)	-	-	-				

0 - Program #2				0 - Program #2			
Program #2	Previous FY	Current FY	Application FY	Program #2			
Revenue(s)	20	21	22	Reason for Est. Change in Revenue, if any.			
				For-profit agencies should not input any revenues, but should include expenses and units to be supplied that produces unit cost.			
				Boone, Campbell, and Kenton Funds (Row 129): Contract amount for Previous/Current FY, and estimated amount for Application FY. These will not be included in your total revenues.			
Boone, Campbell and Kenton Funds (not included in total)	\$ -	\$ -	\$ -				
<b>Revenues (excluding Counties)</b>	\$ -	\$ -	\$ -				
Expense	20	21	22	Reason for Est. Change in Expenses, if any.			
Program Expenses							
Program Management Cost							
Program Development (Fund Raising Cost)							
<b>Total Expenses</b>	\$ -	\$ -	\$ -				
Fiscal Year Summary	20	21	22	Reason for Est. Change in Units, if any.			
<b>Revenues (excluding Counties)</b>	\$ -	\$ -	\$ -	Total Program Units = units for entire program, across all funding streams			
Total Expenses	\$ -	\$ -	\$ -				
Net Gain or (Loss)	\$ -	\$ -	\$ -				
Total Program Units Actual (C)/Projected (D, E)							
Agency Unit Cost	\$ -	\$ -	\$ -				
County Unit Cost = Net Gain or Loss/Total Program Units	\$ -	\$ -	\$ -				
<b>General Program Information</b>				Program Description Continued			
Years providing this program/service:				<b>PROGRAM DESCRIPTION (MUST BE VIEWABLE IN BOX BELOW)</b>			
Target client(s)	Drop Down Menu						
Unit of service defined (per hour, day, meal, etc.)	Drop Down Menu						
Funding Source MH/ID/AG:	Drop Down Menu						
ENTER COMPLETE PROGRAM DESCRIPTION HERE (CONTINUE IN COLUMN 'F' IF YOU NEED ADDITIONAL SPACE)							
<b>Unduplicated Clients</b>	20	21	22	Reason for Est. Change in Unduplicated Clients if any.			
Boone County							
Campbell County							
Kenton County							
Other County(ies)							
Total							
<b>Requested Allocation Summary</b>	20	21	22	Summary (State what your agency wants us to know.)			
County Unit Cost (Previous & Current)	\$0.00	\$0.00	\$0.00				
<b>Boone County</b>	20	21	22				
Actual Units Provided (C), Estimated Units (D, E)							
Total Boone County Dollars			\$0				
<b>Campbell County</b>	20	21	22				
Actual Units Provided (C), Estimated Units (D, E)							
Total Campbell County Dollars			\$0				
<b>Kenton County</b>	20	21	22				
Actual Units Provided (C), Estimated Units (D, E)							
Total Kenton County Dollars			\$0				
<b>All Other Counties</b>	20	21	22				
Units provided (Previous & Current) and to be provided.							
Total Units under "Requested Allocation Summary"	-	-	-				
Reconciliation of total program units (MUST equal zero)	-	-	-				

0 - Program #3				0 - Program #3			
Program #3	Previous FY	Current FY	Application FY	Program #3			
Revenue(s)	20	21	22	Reason for Est. Change in Revenue, if any.			
1				For-profit agencies should not input any revenues, but should include expenses and units to be supplied that produces unit cost. Boone, Campbell, and Kenton Funds (Row 180): Contract amount for Previous/Current FY, and estimated amount for Application FY. These will not be included in your total revenues.			
2							
3							
4							
5							
6							
7							
Boone, Campbell and Kenton Funds (not included in total)	\$ -	\$ -	\$ -				
Revenues (excluding Counties)	\$ -	\$ -	\$ -				
<b>Program Expenses</b>	<b>20</b>	<b>21</b>	<b>22</b>	Reason for Est. Change in Expenses, if any.			
Program Expenses							
Program Management Cost							
Program Development (Fund Raising Cost)							
Total Expenses	\$ -	\$ -	\$ -				
<b>Fiscal Year Summary</b>	<b>20</b>	<b>21</b>	<b>22</b>	Reason for Est. Change in Units, if any.			
Revenues (excluding Counties)	\$ -	\$ -	\$ -	Total Program Units = units for entire program, across all funding streams			
Total Expenses	\$ -	\$ -	\$ -				
Net Gain or (Loss)	\$ -	\$ -	\$ -				
Total Program Units Actual (C)/Projected (D, E)							
Agency Unit Cost	\$ -	\$ -	\$ -				
County Unit Cost = Net Gain or Loss/Total Program Units	\$ -	\$ -	\$ -				
<b>General Program Information</b>				Explanation of Program Description Change, if any.			
Years providing this program/service:				<p style="text-align: center;"><b>PROGRAM DESCRIPTION</b> <b>(MUST BE VIEWABLE IN BOX BELOW)</b></p>			
Target client(s)	Drop Down Menu						
Unit of service defined (per hour, day, meal, etc.)	Drop Down Menu						
Funding Source MH/ID/AG:	Drop Down Menu						
ENTER COMPLETE PROGRAM DESCRIPTION HERE (CONTINUE IN COLUMN 'F' IF YOU NEED ADDITIONAL SPACE)							
<b>Unduplicated Clients</b>	<b>20</b>	<b>21</b>	<b>22</b>	Reason for Est. Change in Unduplicated Clients if any.			
Boone County							
Campbell County							
Kenton County							
Other County(ies)							
Total							
<b>Requested Allocation Summary</b>	<b>20</b>	<b>21</b>	<b>22</b>	Summary Statement (State what your agency wants us to know.)			
County Unit Cost (Previous & Current)	\$0.00	\$0.00	\$0.00				
<b>Boone County</b>	<b>Boone</b>	<b>Boone</b>	<b>Boone</b>				
Actual Units Provided (C), Estimated Units (D, E)							
Total Boone County Dollars			\$0				
<b>Campbell County</b>	<b>Campbell</b>	<b>Campbell</b>	<b>Campbell</b>				
Actual Units Provided (C), Estimated Units (D, E)							
Total Campbell County Dollars			\$0				
<b>Kenton County</b>	<b>Kenton</b>	<b>Kenton</b>	<b>Kenton</b>				
Actual Units Provided (C), Estimated Units (D, E)							
Total Kenton County Dollars			\$0				
<b>All Other Counties</b>	<b>Other Counties</b>	<b>Other Counties</b>	<b>Other Counties</b>				
Units provided (Previous & Current) and to be provided.							
Total Units under "Requested Allocation Summary"	-	-	-				
Reconciliation of total program units (MUST equal zero)	-	-	-				

0 - Program #4				0 - Program #4			
Program #4	Previous FY	Current FY	Next FY	Program #4			
Revenue(s)	20	21	22	Reason for Est. Change in Revenue, if any.			
				For-profit agencies should not input any revenues, but should include expenses and units to be supplied that produces unit cost.			
				Boone, Campbell, and Kenton Funds (Row 231): Contract amount for Previous/Current FY, and estimated amount for Application FY. These will not be included in your total revenues.			
Boone, Campbell and Kenton Funds (not included in total)	\$ -	\$ -	\$ -				
<b>Revenues (excluding Counties)</b>	\$ -	\$ -	\$ -				
Expense	20	21	22	Reason for Est. Change in Expenses, if any.			
Program Expenses							
Program Management Cost							
Program Development (Fund Raising Cost)							
<b>Total Expenses</b>	\$ -	\$ -	\$ -				
Fiscal Year Summary	20	21	22	Reason for Est. Change in Units, if any.			
Revenues (excluding Counties)	\$ -	\$ -	\$ -	Total Program Units = units for entire program, across all funding streams			
Total Expenses	\$ -	\$ -	\$ -				
<b>Net Gain or (Loss)</b>	\$ -	\$ -	\$ -				
Total Program Units Actual (C)/Projected (D, E)							
Agency Unit Cost	\$ -	\$ -	\$ -				
County Unit Cost = Net Gain or Loss/Total Program Units	\$ -	\$ -	\$ -				
General Program Information				Explanation of Program Description Change, if any.			
Years providing this program/service:							
Target client(s)	Drop Down Menu	<b>PROGRAM DESCRIPTION (MUST BE VIEWABLE IN BOX BELOW)</b>					
Unit of service defined (per hour, day, meal, etc.)	Drop Down Menu						
Funding Source MH/ID/AG:	Drop Down Menu						
ENTER COMPLETE PROGRAM DESCRIPTION HERE (CONTINUE IN COLUMN 'F' IF YOU NEED ADDITIONAL SPACE)							
Unduplicated Clients	20	21	22	Reason for Est. Change in Unduplicated Clients if any.			
Boone County							
Campbell County							
Kenton County							
Other County(ies)							
Total							
Requested Allocation Summary				Summary (State what your agency wants us to know.)			
County Unit Cost (Previous & Current)				\$0.00			
<b>Boone County</b>	<b>20</b>	<b>21</b>	<b>22</b>				
Actual Units Provided (C), Estimated Units (D, E)							
Total Boone County Dollars				\$0			
<b>Campbell County</b>	<b>20</b>	<b>21</b>	<b>22</b>				
Actual Units Provided (C), Estimated Units (D, E)							
Total Campbell County Dollars				\$ -			
<b>Kenton County</b>	<b>20</b>	<b>21</b>	<b>22</b>				
Actual Units Provided (C), Estimated Units (D, E)							
Total Kenton County Dollars				\$0			
<b>All Other Counties</b>	<b>20</b>	<b>21</b>	<b>22</b>				
Units provided (Previous & Current) and to be provided.							
Total Units under "Requested Allocation Summary"							
Reconciliation of total program units (should equal zero)							

0 - Program #5				0 - Program #5			
Program #5	Previous FY	Current FY	Next FY	Program #5			
Revenue(s)	20	21	22	Reason for Est. Change in Revenue, if any.			
				For-profit agencies should not input any revenues, but should include expenses and units to be supplied that produces unit cost.			
				Boone, Campbell, and Kenton Funds (Row 282): Contract amount for Previous/Current FY, and estimated amount for Application FY. These will not be included in your total revenues.			
Boone, Campbell and Kenton Funds (not included in total)	\$ -	\$ -	\$ -				
<b>Revenues (excluding Counties)</b>	\$ -	\$ -	\$ -				
<b>Expense</b>	20	21	22	Reason for Est. Change in Expenses, if any.			
Program Expenses							
Program Management Cost							
Program Development (Fund Raising Cost)							
<b>Total Expenses</b>	\$ -	\$ -	\$ -				
<b>Fiscal Year Summary</b>	20	21	22	Reason for Est. Change in Units, if any.			
<b>Revenues (excluding Counties)</b>	\$ -	\$ -	\$ -	Total Program Units = units for entire program, across all funding streams			
Total Expenses	\$ -	\$ -	\$ -				
Net Gain or (Loss)	\$ -	\$ -	\$ -				
Total Program Units Actual (C)/Projected (D, E)							
Agency Unit Cost	\$ -	\$ -	\$ -				
County Unit Cost = Net Gain or Loss/Total Program Units	\$ -	\$ -	\$ -				
<b>General Program Information</b>				Explanation of Program Description Change, if any.			
Years providing this program/service:				<b>PROGRAM DESCRIPTION (MUST BE VIEWABLE IN BOX BELOW)</b>			
Target client(s)	Drop Down Menu						
Unit of service defined (per hour, day, meal, etc.)	Drop Down Menu						
Funding Source MH/ID/AG:	Drop Down Menu						
ENTER COMPLETE PROGRAM DESCRIPTION HERE (CONTINUE IN COLUMN 'F' IF YOU NEED ADDITIONAL SPACE)							
<b>Unduplicated Clients</b>	20	21	22	Reason for Est. Change in Unduplicated Clients if any.			
Boone County							
Campbell County							
Kenton County							
Other County(ies)							
Total	-	-	-				
<b>Requested Allocation Summary</b>	20	21	22	Summary (State what your agency wants us to know.)			
County Unit Cost (Previous & Current)	\$0.00	\$0.00	\$0.00				
<b>Boone County</b>	20	21	22				
Actual Units Provided (C), Estimated Units (D, E)							
Total Boone County Dollars			\$0				
<b>Campbell County</b>	20	21	22				
Actual Units Provided (C), Estimated Units (D, E)							
Total Campbell County Dollars			\$0				
<b>Kenton County</b>	20	21	22				
Actual Units Provided (C), Estimated Units (D, E)							
Total Kenton County Dollars			\$0				
<b>All Other Counties</b>	20	21	22				
Units provided (Previous & Current) and to be provided.							
Total Units under "Requested Allocation Summary"	-	-	-				
Reconciliation of total program units (should equal zero)	-	-	-				

0 - Program #6				0 - Program #6			
Program #6	Previous FY	Current FY	Next FY	Program #6			
Revenue(s)	20	21	22	Reason for Est. Change in Revenue, if any.			
				For-profit agencies should not input any revenues, but should include expenses and units to be supplied that produces unit cost.			
				Boone, Campbell, and Kenton Funds (Row 333): Contract amount for Previous/Current FY, and estimated amount for Application FY. These will not be included in your total revenues.			
Boone, Campbell and Kenton Funds (not included in total)	\$ -	\$ -	\$ -				
Revenues (excluding Counties)	\$ -	\$ -	\$ -				
<b>Program Expenses</b>	<b>20</b>	<b>21</b>	<b>22</b>	<b>Reason for Est. Change in Expenses, if any.</b>			
Program Expenses							
Program Management Cost							
Program Development (Fund Raising Cost)							
Total Expenses	\$ -	\$ -	\$ -				
<b>Fiscal Year Summary</b>	<b>20</b>	<b>21</b>	<b>22</b>	<b>Reason for Est. Change in Units, if any.</b>			
Revenues (excluding Counties)	\$ -	\$ -	\$ -	Total Program Units = units for entire program, across all funding streams			
Total Expenses	\$ -	\$ -	\$ -				
Net Gain or (Loss)	\$ -	\$ -	\$ -				
Total Program Units Actual (C)/Projected (D, E)							
Agency Unit Cost	\$ -	\$ -	\$ -				
County Unit Cost = Net Gain or Loss/Total Program Units	\$ -	\$ -	\$ -				
<b>General Program Information</b>				<b>Explanation of Program Description Change, if any.</b>			
Years providing this program/service:							
Target client(s)	Drop Down Menu	<b>PROGRAM DESCRIPTION (MUST BE VIEWABLE IN BOX BELOW)</b>					
Unit of service defined (per hour, day, meal, etc.)	Drop Down Menu						
Funding Source MH/ID/AG:	Drop Down Menu						
ENTER COMPLETE PROGRAM DESCRIPTION HERE (CONTINUE IN COLUMN 'F' IF YOU NEED ADDITIONAL SPACE)							
<b>Unduplicated Clients</b>	<b>20</b>	<b>21</b>	<b>22</b>	<b>Reason for Est. Change in Unduplicated Clients if any.</b>			
Boone County							
Campbell County							
Kenton County							
Other County (ies)							
Total							
<b>Requested Allocation Summary</b>	<b>20</b>	<b>21</b>	<b>22</b>	<b>Summary Statement (State what your agency wants us to know.)</b>			
County Unit Cost (Previous & Current)			\$0.00				
<b>Boone County</b>	<b>Boone</b>	<b>Boone</b>	<b>Boone</b>				
Actual Units Provided (C), Estimated Units (D, E)							
Total Boone County Dollars			\$0				
<b>Campbell County</b>	<b>Campbell</b>	<b>Campbell</b>	<b>Campbell</b>				
Actual Units Provided (C), Estimated Units (D, E)							
Total Campbell County Dollars			\$0				
<b>Kenton County</b>	<b>Kenton</b>	<b>Kenton</b>	<b>Kenton</b>				
Actual Units Provided (C), Estimated Units (D, E)							
Total Kenton County Dollars			\$0				
<b>All Other Counties</b>	<b>Other Counties</b>	<b>Other Counties</b>	<b>Other Counties</b>				
Units provided (Previous & Current) and to be provided.							
Total Units under "Requested Allocation Summary"	-	-	-				
Reconciliation of total program units (should equal zero)	-	-	-				