

STATE OF TENNESSEE
Department of Human Services
INVOICE FOR REIMBURSEMENT

DHS USE ONLY P.O. #: 38418 Receipt #: 70099

Division Name: FAMILY ASSISTANCE
Program Type: Employment and Case Management Services (ECMS)

| | | |
|---|--|------------------------------------|
| Contractor/Grantee Information | | CONTRACT NUMBER: 62186 (Z20-45820) |
| Agency Name: EAST TN STATE UNIVERSITY | | CONTRACT PERIOD: FROM: 7/1/2019 |
| Address: P.O. Box 70732 | | TO: 6/30/2020 |
| City, State Zip Code: Johnson City, TN 37614 | | INVOICE NUMBER: 2019-10 |
| Contact Person/Phone Number: Pam Carr, 423-439-6064 | | INVOICE PERIOD: FROM: 10/1/2019 |
| VENDOR NUMBER: 2895 | | TO: 10/31/2019 |

| A | | | | B | C | D | E |
|-------------------------------------|--|------------|--------------|-----------------------------|---|---|---|
| COST CATEGORY OR PROGRAM | | | | TOTAL CONTRACT BUDGET | ACTUAL YTD EXPENDITURES through 10/31/2019 | TOTAL MONTHLY EXPENDITURES for 10/2019 | REMAINING CONTRACT BUDGET BALANCE |
| | | | | | (enter last day of invoice period: 10/31/2019) | (enter invoice month & year:10/2019) | |
| 4, 15 | PROFESSIONAL FEES/GRANT & AWARDS | | | \$3,352,709.72 | \$228,600.00 | \$265,800.00 | \$3,124,109.72 |
| | District # | Caseload # | Client Rate | \$2,930,600.00 | \$948,000.00 | \$238,800.00 | \$1,982,600.00 |
| | EAST District Caseload | 596 | \$ 200.00 | \$1,142,200.00 | \$0.00 | \$119,200.00 | \$1,142,200.00 |
| | N. EAST District Caseload | 311 | \$ 200.00 | \$580,800.00 | \$0.00 | \$62,200.00 | \$580,800.00 |
| | S. EAST District Caseload | 287 | \$ 200.00 | \$1,207,600.00 | \$0.00 | \$57,400.00 | \$1,207,600.00 |
| | Contractor Milestone Incentives | | | \$422,109.72 | \$66,600.00 | \$27,000.00 | \$355,509.72 |
| | EAST Contractor Milestone Incentive | | | \$164,517.07 | \$0.00 | \$11,800.00 | \$164,517.07 |
| | N. EAST Contractor Milestone Incentive | | | \$83,655.68 | \$0.00 | \$7,600.00 | \$83,655.68 |
| | S. EAST Contractor Milestone Incentive | | | \$173,936.97 | \$0.00 | \$7,600.00 | \$173,936.97 |
| | SPECIFIC ASSISTANCE TO INDIVIDUALS | | | \$684,349.20 | \$285,272.24 | \$89,021.42 | \$399,076.96 |
| | EAST : Supportive Services | | | \$266,724.79 | \$0.00 | \$26,878.31 | \$266,724.79 |
| | EAST : Transportation Assistance | | | | \$0.00 | \$15,275.00 | |
| EAST : Incentive Issuances | | | \$0.00 | | \$5,800.00 | | |
| N. EAST : Supportive Services | | | \$135,627.52 | \$0.00 | \$15,306.49 | \$135,627.52 | |
| N. EAST : Transportation Assistance | | | | \$0.00 | \$10,794.00 | | |
| N. EAST : Incentive Issuances | | | | \$0.00 | \$4,300.00 | | |
| S. EAST : Supportive Services | | | \$281,996.89 | \$0.00 | \$2,168.62 | \$281,996.89 | |
| S. EAST : Transportation Assistance | | | | \$0.00 | \$5,699.00 | | |
| S. EAST : Incentive Issuances | | | | \$0.00 | \$2,800.00 | | |
| 22 | INDIRECT COST | | | \$565,188.25 | \$180,358.11 | \$48,051.00 | \$384,830.14 |
| | EAST Indirect Costs | | | \$220,281.86 | \$44,991.25 | \$24,381.46 | \$175,290.61 |
| | N. EAST Indirect Costs | | | \$112,011.65 | \$21,158.09 | \$13,776.07 | \$90,853.56 |
| | S. EAST Indirect Costs | | | \$232,894.74 | \$19,217.95 | \$9,893.47 | \$213,676.79 |
| | OTHER: AUDIT QUESTION COSTS | | | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| TOTAL | | | | 4,602,247.17 | 1,480,230.35 | 402,872.42 | 3,122,016.82 |

I certify to the best of my knowledge and belief that the data above are correct and that all expenditures were made in accordance with the contract conditions and that payment is due and has not been previously requested.

TOTAL PAYMENT DUE

\$402,872.42

CONTRACTOR'S AUTHORIZED SIGNATURE

SIGNATURE: [Signature]
NAME/TITLE: Asst. VP of CO
DATE: 12-19-19

DHS AUTHORIZED CERTIFICATION

SIGNATURE: _____
NAME/TITLE: _____
DATE: _____