

# Community Action Partnership of Madera County, Inc. Board of Directors Meeting

<u>Agenda</u> Thursday, May 8, 2025 CAPMC Conference Room 1 / 1a 1225 Gill Avenue Madera, CA 93637 5:30 pm

Supporting documents relating to the items on this agenda that are not listed as "Closed Session" are available for inspection during the normal business hours at Community Action Partnership of Madera County, Inc., 1225 Gill Avenue, Madera, CA 93637. Supporting documents relating to the items on the agenda that are not listed as "Closed Session" may be submitted after the posting of the agenda and are available at Community Action Partnership of Madera County, Inc. during normal business hours. Please visit <u>www.maderacap.org</u> for updates.

# CALL TO ORDER BOARD OF DIRECTORS

ROLL CALL - Kelly Ryan

PLEDGE OF ALLEGIANCE – Judge Eric LiCalsi, Chairperson

# A. PUBLIC COMMENT

The first ten minutes of the meeting are reserved for members of the public to address the Board of Directors on items of interest to the public that are within the subject matter jurisdiction of the agency. Speakers shall be limited to three minutes. Attention is called to the fact that the Board is prohibited by law from taking any action on matters discussed that are not on the agenda, and no adverse conclusion should be drawn if the Board does not respond to the public comments at this time.

# B. ADOPTION OF THE AGENDA

**B-1 ADDITIONS TO THE AGENDA:** Items identified after posting the Agenda for which there is a need to take immediate action and cannot reasonably wait for the next regularly scheduled Board meeting. Two-third vote, or unanimous vote if quorum is less than full board, required for

consideration. (Government code54954.2(g) (2)) Any items added to the agenda will be heard following all Discussion/Action Items (Section E).

B-2 ADOPTION OF AGENDA: Adoption of agenda as presented or with approved additions.

# C. TRAINING/ADVOCACY ISSUES

None

# D. <u>CONSENT ITEMS</u>

All items listed under the Consent Calendar are considered to be routine and will be enacted by one motion. For discussion of any Consent Item, it will be made a part of the Discussion Items at the request of any member of the Board or any person in the audience.

- D-1 Review and consider approving the Minutes of the Regular Board of Directors Meeting April 10, 2025.
- D-2 Review and consider approving the Minutes for the Madera Regional & Early Head Start Policy Council Committee Meeting – March 6, 2025
- D-3 Review and consider accepting the Bank of America Credit Card Statements:
  - February 2025
  - March 2025
- D-4 Review and consider accepting the America Express and All Other Credit Card Statements:
  - January 2025
  - February 2025
  - March 2025
  - April 2025
- D-5 Review and consider approving the following **Madera Regional Head Start** Reports:
  - Monthly Enrollment Report March 2025
  - In-Kind Report February 2025
  - CACFP Program Report February and March 2025
- D-6 Review and consider approving the following Madera Regional Early Head Start Reports:
  - Monthly Enrollment Report March 2025
  - In-Kind Report February 2025
- D-7 Review the Child Care Alternative Payment and Resource & Referral Program Report for May 2025. (Informational Only).
- D-8 Review the Community Services Program Report for April 2025. (Informational Only).
- D-9 Review the Homeless Engagement for Living Program (H.E.L.P) Center Report for January 2025. (Informational Only).
- D-10 Review the Victim Services April Awareness Events 2025. (Informational Only)

# E. <u>DISCUSSION ITEMS</u>

- E-1 Review and consider approving the Community Action Partnership of Madera County 2024-2025 CSPP Budget Revisions to Stanislaus County Office of Education. Comparison Budgets included.
- E-2 Review and consider approving the proposal to provide a Retention Stipend to Head Start, Early Head Start, and Migrant Seasonal Head Start Staff.
- E-3 Review and consider approving the submission of the CAPMC Welfare Benefit 2024 Form 5500 tax return by the Chief Financial Officer.
- E-4 Review and consider approving the Workers' Compensation coverage under Service American Indemnity Company and broker's consulting fee.
- E-5 Review and consider approving the CAPMC 2024 Impact Report.

# F. ADMINISTRATIVE/COMMITTEE REPORTS TO THE BOARD OF DIRECTORS

- F-1 Finance Committee Report None
- F-2 Personnel Committee Report None
- F-3 Executive Director Monthly Report April 2025
- F-4 Financial Statements March and April 2025
- F-5 Head Start Policy Council/Committee Reports
- F-6 Work Related Injury Report April 2025
- F-7 CAPMC Board of Directors Attendance Report April 10, 2025.
- F-8 Staffing Changes Report for April 1, 2025 April 30, 2025

# G. <u>CLOSED SESSION</u>

None

# H. <u>CORRESPONDENCE</u>

H-1 Flyer for CAPMC and Madera Food Bank Warehouse Parking Lot Miscellaneous Sale on Friday May 9, 2025, at 528 Noble Ave.

# I. <u>ADJOURN</u>

I, Kelly Ryan, Executive Director Support / Grant Management and Compliance Administrator, declare under penalty of perjury that I posted the above agenda for the regular meeting of the CAPMC Board of Directors for May 8, 2025, in the Lobby of CAPMC as well as on the agency website by 5:00 p.m. on May 2, 2025.

# <u>Kelly Ryan</u>

Executive Director Support / Grant Management and Compliance Administrator

# COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY, INC. Regular Board of Directors Meeting April 10, 2025 1225 Gill Ave, Madera, CA 93637

# **ACTION SUMMARY MINUTES**

The Board of Directors Meeting was called to order at 5:31 p.m. by Vice-Chairperson David Hernandez

### Members Present

# Members Absent

Otilia Vasquez

Chairperson Judge Eric LiCalsi

Vice-Chairperson David Hernandez Secretary/Treasurer Sheriff Tyson Pogue Vivian Garcia Chairwomen Supervisor Leticia Gonzalez Councilmember Steve Montes Councilmember Jeff Troost Debi Bray Otilia Vasquez Donald Holley Martha Garcia Richard Gutierrez Diana Palmer Molly Hernandez Aurora Flores

Public – Others Present

Mattie Mendez Kelly Ryan Irene Yang Ana Gudino Maritza Gomez

**Personnel Present** 

None

# A. <u>PUBLIC COMMENT</u>

Mattie Mendez, Executive Director, shared the GoFundMe for remembering Erick Velazquez and support his family. Irene Yang, Human Resources Director, shared a card for Erick Velazquez's family.

# B. ADOPTION OF THE AGENDA

**ADDITIONS TO THE AGENDA:** Items identified after posting of the Agenda for which there is a need to take immediate action and cannot reasonably wait for the next regularly scheduled Board meeting. Two-thirds vote, or unanimous vote if quorum is less than full board, required for consideration. (Government Code 54954.2(g) (2)) Any items added to the agenda will be heard following all Discussion/Action Items (Section E).

# ADOPTION OF THE AGENDA: Adoption of the agenda.

Motion: APPROVED AS PRESENTED

Moved by Secretary/Treasurer Sheriff Tyson Pogue, Seconded by Chairwomen Supervisor Leticia Gonzalez

# Vote: Carried Unanimously

# C. TRAINING/ADVOCACY ISSUES

None

# D. BOARD OF DIRECTOR'S CONSENT CALENDAR

All items listed under Consent Calendar are considered to be routine and will be enacted by one motion. For discussion of any Consent Item, it will be made a part of the Discussion Items at the request of any member of the Board or any person in the audience.

- D-1 Review and consider approving the Minutes of the Regular Board of Directors Meeting February 13, 2025.
- D-2 Review and consider approving the Minutes for the Madera Migrant/Seasonal Head Start Policy Council Committee Meeting – December 10, 2024
- D-3 Review and consider approving the Minutes for the Fresno Migrant/Seasonal Head Start Policy Council Committee Meeting – November 13, 2024
- D-4 Review and consider approving the Minutes for the Madera Regional & Early Head Start Policy Council Committee Meeting – February 6, 2025
- D-5 Review and consider accepting the Bank of America Credit Card Statements:
  - February 2025
  - March 2025
- D-6 Review and consider accepting the America Express and All Other Credit Card Statements:
  - November 2024
  - December 2024
  - January 2025
  - February 2025
  - March 2025
- D-7 Review and consider approving the following **Madera Migrant and Seasonal Head Start** Reports:
  - Monthly Enrollment Report February 2025
  - In-Kind Report February 2025
  - CACFP Program Report February 2025
  - Program Information Report February 2025
- D-8 Review and consider approving the following **Madera Regional Head Start** Reports:
  - Monthly Enrollment Report February 2025
  - In-Kind Report January 2025
  - CACFP Program Report January 2025
- D-9 Review and consider approving the following **Madera Regional Early Head Start** Reports:
  - Monthly Enrollment Report February 2025
  - In-Kind Report January 2025
- D-10 Review and consider approving the following **Fresno Migrant and Seasonal Head Start** Reports:
  - Monthly Enrollment Report February 2025
  - In-Kind Report February 2025
  - CACFP Program Report December 2024 and February 2025

- D-11 Review and consider approving Community Action Partnership of Madera County 2024-2025 Basic, Blended and Training & Technical Assistance (T&TA) Comparison Budget Revisions to Stanislaus County Office of Education. Comparison Budgets included.
- D-12 Review and consider approving the Enrollment Selection Criteria and the Recruitment Procedure for the 2025-2026 program year.
- D-13 Review and consider approving the submission of CAPMC Fresno Migrant Seasonal Head Starts Basic Grant application. (September 1, 2025 August 31, 2026).
- D-14 Review and consider approving the Fresno Migrant Seasonal Head Start 5-Year Grant Cycle's Goals and Objectives.
- D-15 Review and consider approving Fresno Migrant/Seasonal Head Start's updates on Policy #12 "Determining, Verifying, and Documenting Eligibility" and Selection Procedures for the 2025 2026 program year.
- D-16 Review and consider approving Community Action Partnership of Madera County 2023-2025 One-Time Carryover Funds Comparison Budget Revision to Stanislaus County Office of Education. Comparison Budget included.
- D-17 Review and consider approving the 2025 Community Needs Assessment Final Report for Community Action Partnership of Madera County-Fresno Migrant/Seasonal Head Start
- D-18 Review the Child Care Alternative Payment and Resource & Referral Program Report for March and April 2025. (Informational Only).
- D-19 Review the Community Services Program Report for March 2025. (Informational Only).
- D-20 Review the Victim Services Report for April 2025. (Informational Only)
- D-21 Review the Madera County Child Advocacy Center Report for January-March 2025. (Informational Only).
- D-22 Review and consider approving the Minutes for the Fresno Migrant/Seasonal Head Start Policy Council Committee Meeting February 18, 2025.
- D-23 Review and consider approving the Fresno Migrant and Seasonal Head Start's 2023-2024 Annual Report.
- D-24 Review and consider approving the 2025-2030 Goals and Objectives for the Madera Head Start and Early Head Start Programs.

Motion: APPROVE AS PRESENTED

Moved by Martha Garcia, Seconded by Donald Holley

Vote: Carried Unanimously

# E. <u>DISCUSSION / ACTION ITEMS</u>

E-1 Review and consider approving the Agency's award of its annual entity-wide financial and single audit for June 30, 2025 and the CAPMC 403(b) Retirement Plan for the Year Ended 12/31/2024 to Hudson & Company, Inc. Certified Public Accountants.

Mattie Mendez, Executive Director, presented regarding Awarding Audit Services for Agencywide Audit 6/30/2025 and CAPMC 403(b) Retirement Plan for Year 12/31/2024 to Hudson & Company, Inc. Certified Public Accountants. This will be the second year that the Agency has used this firm. CAPMC is required by its contracts with the federal government to have an annual single-wide audit by its funding sources. Additionally, the Agency has additional tax and reporting requirements. The Agency is required to have an audit of its 403(b) Retirement Plan by the Department of Labor.

Motion: APPROVE AS PRESENTED

Moved by Donald Holley, Seconded by Aurora Flores

Vote: Carried Unanimously

# E-2 Review and consider approving the filings of the tax and information returns of Community Action Partnership of Madera County, Inc. prepared by Hudson & Company, Inc. CPAs.

Mattie Mendez, Executive Director, presented regarding the filings of the Tax and Information Returns of Community Action Partnership of Madera County, Inc. (CAPMC) prepared by Hudson & Company, Inc. CPAs for the Year Ended June 30, 2024. The agency is required to file certain tax and information returns each year. Hudson & Company, Inc. CPAs prepared the returns from the financial statement information for the year ended June 30, 2024.

Motion: APPROVE AS PRESENTED

Moved by Donald Holley, Seconded by Debi Bray

Vote: Carried Unanimously

# E-3 Review and consider approving the Risk Assessment completed during the second quarter of 2025 in accordance with the new Community Services Block Grant, Organizational Performance Standard 4.6.

Mattie Mendez, Executive Director, presented regarding the Community Action Partnership – Organizational Performance Standards, Standard 4 – Organizational Leadership, and Standard 4.6 – Risk Assessment. The Office of Community Services, Administration for Children and Families, U.S. Department of Health and Human Services has called for greater program accountability and measurable results from government-funded programs. Based on the Organizational Performance Standards, a risk assessment must be completed within the past two years and reported to the governing board.

Motion: APPROVE AS PRESENTED

Moved by Donald Holley, Seconded by Richard Gutierrez

Vote: Carried Unanimously

# E-4 Review and consider approving the request for the Board of Directors to authorize Community Action Partnership of Madera County (CAPMC) to open a 30-day comment period for the draft 2026-2027 Community Action Plan and Community Needs Assessment.

Ana Gudino, Community Services Program Manager, presented regarding the Community Services Block Grant (CSBG) 2026-2027 Community Action Plan / Community Needs Assessment (CAP/CAN). The Community Action Plan outlines CAPMC's 2-year strategic plan for how the agency plans to address the needs of Madera County based on the finalized Community Needs Assessment. The 30 -day comment period is part of the Community Services Block Grant (CSBG) requirements to ensure public engagement in identifying and prioritizing community needs affecting low-income residents.

Motion: APPROVE AS PRESENTED

Moved by Chairwomen Supervisor Leticia Gonzalez, Seconded by Aurora Flores

Vote: Carried Unanimously

Board Member Councilmember Steve Montes entered the room.

# E-5 Review and consider approving the updated Child Forensic Interview Team (CFIT) Guidelines and MOU effective April 1, 2025.

Mattie Mendez, Executive Director, presented regarding the Updated Child Forensic Interview Team (CFIT) Guidelines and Memorandum of Understanding (MOU). The purpose of the Child Forensic Interview Team Guidelines is to define a systematic approach for investigating, within a multidisciplinary framework, allegations of child sexual abuse within Madera County and to ensure a cooperative and coordinated effort between the Multidisciplinary Team (MDT). The need to update the CFIT Guidelines arose from leadership changes with Law Enforcement and County agencies. The CFIT Steering Committee is composed of the Madera County District Attorney, Madera County Sheriff, Madera County Department of Social Services Director, Madera County

Motion: APPROVE AS PRESENTED

Moved by Richard Gutierrez, Seconded by Debi Bray

Vote: Carried Unanimously

# F. ADMINISTRATIVE/COMMITTEE REPORTS TO BOARD OF DIRECTORS

- F-1 Finance Committee Report None
- F-2 Personnel Committee Report None
- F-3 Executive Director Monthly Report March 2025
- F-4 Financial Statements February, March 2025
- F-5 Head Start Policy Council/Committee Reports
- F-6 Work Related Injury Report February and March 2026
- F-7 CAPMC Board of Directors Attendance Report February 13, 2025
- F-8 Staffing Changes Report for February 5, 2025 March 31, 2025

# G. <u>CLOSED SESSION</u>

None

# H. <u>CORRESPONDENCE</u>

H-1 Correspondence from Victim Services regarding the National Crime Victims' Rights Week Victims Memorial Display on April 11, 2025 at CAPMC.

- H-2 Correspondence from Victim Services regarding the National Crime Victims' Rights Week Victims Memorial Display on April 25, 2025 at Courthouse Park.
- H-3 Correspondence from Victim Services regarding Denim Day to wear jeans with a purpose on April 30, 2025.
- H-4 Correspondence from Victim Services regarding to wear teal for Sexual Assault Awareness Day and to wear Teal on April 1, 2025.
- H-5 Correspondence from Victim Services regarding to wear blue for Child Abuse Prevention Month on April 4, 2025.
- H-6 Correspondence from U.S. Department of Health and Human Services and ACF Administration for Children and Families regarding Promoting Healthy Eating and Nutrition for Head Start Children and Families

# I. <u>ADJOURN</u>

Chairperson Vice-Chairperson David Hernandez, adjourned the Board of Directors Meeting at 5:53 p.m.

Motion: APPROVE AS PRESENTED

Moved by Donald Holley, seconded by Councilmember Jeff Troost

Vote: Carried Unanimously

# COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY Madera Regional & Early Head Start Policy Council Committee Meeting Thursday, March 6, 2024 MINUTES

The Madera Regional & Early Head Start Policy Council Committee meeting was called to order by Otilia Vasquez at 5:33 p.m.

### Committee Members Present

Ana Rodriguez Jasmin Lucas Otilia Vasquez Arianna Ruiz Griselda Solorio Connie Hernandez-Gomez Alexandra Parkill Michelle Castro Monica Juarez Martha Garcia

### **Committee Members Absent**

Michelle Manning Joanna Reducindo Irene Gomez

### Personnel Present

Maritza Gomez-Zaragoza, Program Director Jissel Rodriguez, Executive Administrative Assistant Maribel Aguirre, Parent and Governance Specialist

# ROLL CALL

# A. PUBLIC COMMENT

Ms. Aguirre mentioned that the staffing changes report was distributed during the meeting since it had not been included in the Policy Council packet that was mailed. No further comments.

# B. TRAINING - None

# C. ADOPTION OF THE AGENDA

**C-2** Otilia Vasquez asked for the motion to approve the agenda as presented. Motion made by Jasmin Lucas, seconded by Alexandra Parkill to approve the agenda as presented. Motion carried unanimously.

# D. ADJOURN TO CLOSED SESSION - None

# E. APPROVAL OF MINUTES

**E-1** Minutes Madera Regular Regional and Early Head Start Policy Council Meeting – February 6, 2025. Motion made by Griselda Solorio, seconded motion by Arianna Ruiz. Motion carried unanimously.

# F. DISCUSSION / ACTION ITEMS

**F-1** Review and consider approving the 2025-2030 Goals and Objectives for the Madera Head Start and Early Head Start Programs - Ms. Gomez-Zaragoza reviewed the 2025-2030 Goals and Objectives for the Madera Head Start and Early Head Start Programs. She explained the process of determining the program goals and how the data is analyzed. She provided a summary of the

goals and objectives for Education, Health, Nutrition, Mental Health, ERSEA and Family Community Engagement. She also mentioned that part of staff wellness will be to provide more resources and the possibility of providing more resources from our mental health consultant. Focusing on empowering and collaborating to provide workshops for families. The last goal is in the area of ERSEA, recruiting and strengthening partnerships within the community. Parents did not have any questions.

Motion made by Arianna Ruiz, seconded motion by Alexandra Parkill. Motion carried unanimously.

**F-2** Review and consider approving updated hiring policies to ensure recruitment activities are considered to increase efficiency and update background verification processes to meet funding terms and conditions - Ms. Gomez-Zaragoza reviewed and asked policy council parents to consider approving updated hiring policies to ensure recruitment activities are consolidated to increase efficiency and update background verification processes to meet funding terms and conditions. Ms. Gomez-Zaragoza explained that the new process will go from having two interviews to only having 1 interview therefore the new process would have a possible turn around time of about 2 weeks. Motion made by Arianna Ruiz, seconded motion by Alexandra Parkill. Motion carried unanimously.

**F-3** Review and consider approving the auditor reports for the year ended June 30, 2024 - Ms. Gomez- Zaragoza reviewed and asked policy council to consider accepting the auditor reports and the audited financial statements for the year ending June 30, 2024. Ms. Gomez Zaragoza explained the process of the audit as well as the cost. All purchases that the agency made had proper documentation and followed policy and procedures.

Motion made by Griselda Solorio, seconded motion by Ana Rodriguez. Motion carried unanimously.

# G. ADMINISTRATIVE REPORTS

G-1 Staffing Changes (February 2025) – Ms. Aguirre reviewed staffing changes.

**G-2** Bank of America Business Card Monthly Credit Card Statement and all other Credit Card Expenses (February 2025) – Ms. Aguirre reviewed the banking statement. No questions were asked.

G-3 Budget Status Reports (January 2025) – Ms. Aguirre reviewed the budget.

**G-4** In-Kind Report (January 2025) – Ms. Aguirre reviewed the in-kind percentages for the Regional and Early programs.

**G-5** Program Enrollment & Attendance Report (January 2025) – Ms. Aguirre went over the enrollment and attendance report for the Early program.

**G-6** CACFP Monthly Report (January 2025) – Ms. Aguirre reviewed CACFP and noted that the reimbursement for January.

### H. POLICY COMMITTEE MEMBER REPORTS

**H-1**- Center Report – Ms. Gomez-Zaragoza: mentioned the photography study will be held in the conference center. Photos the children took will be displayed.

**H-2-** BOD report – All items presented at the last meeting were approved. All items presented today will be presented at the next board meeting.

H-3 Active Supervision – Ms. Gomez-Zaragoza asked parents to make sure that gates are locked, to remind parents to supervise their own children. If there is anything concerning at the center contact the director and if it continues contact Maribel.

- I. <u>CORRESPONDENCE</u> None.
- J. FUTURE AGENDA ITEMS

J-1 Budget Revisions (If Any)

# K. ADJOURNMENT

Otilia Vasquez asked for a motion to adjourn the meeting at 6:08 p.m. Motion made by Griselda Solorio, seconded by Jasmin Lucas. Motion carried unanimously.

# Bank of America Business Card Credit Card Charges March 2025 Statement 2

# Mattie Mendez / Administration

Date of Transaction	Name of Vendor	PO #	Description of Purchase	Amount of Purchase	Account Charged	Receipt
03/31/25	CURB LV TAXT A CAB	No	Lodging Mattie Mendez for Region 9 Board Meeting, Las Vegas, March 31	\$549.17	200.0-6714-2.0-000-90	Yes
03/31/25	CURB LV TAXT A CAB	No	Taxi for Mattie Mendez for Region 9 Board Meeting, Las Vegas, March 31	\$77.64	200.0-6714-2.0-000-90	Yes
03/27/25	ROUND TABLE PIZZA_OAKH	No	HELP Center and Admin Oakhurst Lunch	\$47.66	200.0-6121-2.0-000-90	Yes
03/27/25	ROUND TABLE PIZZA_OAKH	No	HELP Center and Admin Oakhurst Lunch	\$94.04	200.0-6121-2.0-000-90	Yes
03/26/25	DOCUSIGN INC	No	User License for Administration	\$480.00	200.0-6130-2.0-000-90	Yes
03/25/25	DICICCOS I	No	CAC Steering Committee Meeting	\$312.03	200.0-6121-2.0-000-90	Yes
03/21/25	SQ COMMUNITY ACTION P	No	User License for Administration - Mattie Mendez and Kelly	\$495.00	200.0-6130-2.0-000-90	Yes
03/20/25	UNITED	No	Baggage Fee for Mattie Mendez for NMSHA & NCAF Conference, March 7-13	\$100.00	200.0-6714-2.0-000-90	Yes
03/17/25	UNITED	No	Baggage Fee for Mattie Mendez for NMSHA & NCAF Conference, March 7-13	\$40.00	200.0-6714-2.0-000-90	Yes
03/17/25	UNITED	No	Baggage Fee for Mattie Mendez for NMSHA & NCAF Conference, March 7-13	\$40.00	200.0-6714-2.0-000-90	No
03/14/25	SQ UVC INC	No	Taxi for Mattie Mendez for NMSHA & NCAF Conference, March 7-13	\$31.88	200.0-6714-2.0-000-90	Yes
03/14/25	HYATT REGENCY WASHINGT	No	Lodging for Mattie Mendez for NCAF Conference, March 7-13	\$1,300.97	200.0-6714-2.0-000-90	Yes
03/14/25	CURB DC TAXI	No	Taxi for Mattie Mendez for NMSHA & NCAF Conference, March 7-13	\$15.64	200.0-6714-2.0-000-90	Yes
03/12/25	SQ UVC INC	No	Taxi for Mattie Mendez for NMSHA & NCAF Conference, March 7-13	\$27.41	200.0-6714-2.0-000-90	Yes
03/11/25	HILTON HOTELS	No	Lodging for Mattie Mendez for NMSHA Conference, March 7-13	\$449.28	200.0-6714-2.0-000-90	Yes
03/11/25	MAILCHIMP MISC	No	Mass Communication Software (IT)	\$60.00	200.0-6130-2.0-000-90	Yes
03/10/25	RED ROCK ADV ROOM	No	Lodging advance for Region 9 Board Meeting, Las Vegas, March 31	\$270.07	200.0-6714-2.0-000-90	Yes
03/10/25	SQ TAXI	No	Taxi for Mattie Mendez for NMSHA & NCAF Conference, March 7-13	\$87.25	200.0-6714-2.0-000-90	Yes
03/10/25	CAMERENA PHARMACY	No	HELP Center Medication for Client	\$18.39	248.0-6132-2.0-000-00	Yes
			Total	\$4,496.43		

I certify that the items and charges above are true and correct and that the charges inquired have been for business purposes only. Receipts are attached (if available)

Mattie Mendez, Executive Director

Date: April 1, 2025

# Bank of America Business Card Credit Card Charges

# **April 2025 Statement**

Irene Yang / Human Resources

Date of Transaction	Name of Vendor	PO #	Description of Purchase	Amount of Purchase	Account Charged	Receipt
3/10/2025	Biometrics4all Inc.	No	Livescan relay fee	3.00	321.0-6852-3.2-000-00	Yes
TOTAL:				3.00		

### Bank of America Business Card ending 8462 Credit Card Charges

### April 2025 Statement

Ana Gudino / Community Services

Date of	Name of Vendor	PO#	Description of Purchase	Amount of	Account Charged	Receipt
Transaction				Purchase	_	
3/31/2025	Braga Organic Farms		Gift for Advocacy Days	\$40.50	218.0-6130-2.0-000-18	Yes
4/3/2025	Hyatt Centric Downtown		Valet Parking	\$47.00	218.0-6714-2.0-000-00	No
4/3/2025	Chevron		Refuel the Pickup for Advocacy Days	\$100.22	218.0-6610-2.0-000-00	Yes
			Total	\$187.72		

I certify that the items and charges above are true and correct, and that the charges inquired have been for business purposes only. Receipts are attached (if available)

April 7, 2025

Ana Gudino, Program Manager Community Services

# American Express Credit Card Charges JANUARY 2025 Statement

Fiscal

Name of Vendor	Description	Amount	Receipt
ATT	Telephone	17535.89	Yes
Comcast	Net service	1245.29	Yes
Community Playthings	Supplies for centers	0.00	
Discount School Supply	Supplies for centers	1212.09	Yes
Fedex	Postage	142.57	Yes
Lakeshore	Supplies for centers	2026.17	Yes
Matson Alarm	Alarm service	751.24	Yes
Verizon	Wireless devices	5617.78	Yes
Office Depot	Supplies for office/centers	0.00	
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	TOTAL	28531.03	01/28/25 LA

# **COSTCO Credit Card Charges**

# JANUARY 2025 Statement

		Card
Card Holder	Description	Amount
Irene Yang	WELLNESS SNACK CART	294.44
		294.44

J

U/CARD MEMBER BOD

# **Credit Card Charges**

# **JANUARY 2025**

# Fiscal

Name of Vendor	Description	Amount
Capital One/Walmart	Supplies for centers	2586.40
Home Depot	Supplies for centers	3873.93
Wex Bank (Chevron)	Fuel	0.00
Wex Bank (Valero)	Fuel	1724.07
JAN STMT DATES		
LA		

04/25 J

# American Express Credit Card Charges FEBRUARY 2025 Statement

Fiscal

Name of Vendor	Description	Amount	Receipt
ATT	Telephone	27739.30	Yes
Comcast	Net service	1260.73	Yes
Community Playthings	Supplies for centers	8649.18	Yes
Discount School Supply	Supplies for centers	551.06	Yes
Fedex	Postage	404.53	Yes
Lakeshore	Supplies for centers	0.00	
Matson Alarm	Alarm service	752.52	Yes
Verizon	Wireless devices	5617.78	Yes
Office Depot	Supplies for office/centers	17474.39	Yes
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i 	 		
i  	TOTAL	62449.49	02/28/25
   			LA

# **COSTCO Credit Card Charges**

# FEBRUARY 2025 Statement

		Card
Card Holder	Description	Amount
Irene Yang	WELLNESS SNACK CART	400.47
Maritza Gomez- Zaragoza	SNACKS FOR CLIENTS	103.63
Jennifer Coronado	SPACE HEATERS	162.33
Mattie Mendez	KITCHEN ITEMS/ CLEANING SUPPLIES FOOD ITEMS- FOOD INSECURITY GRANT	1136.96
Ana Gudino	FOOD ITEMS- FOOD INSECURITY GRANT	344.34
		2147.73

J

U/CARD MEMBER BOD

# **Credit Card Charges**

# **FEBRUARY 2025**

# Fiscal

Name of Vendor	Description	Amount
Capital One/Walmart	Supplies for centers	5344.17
Home Depot	Supplies for centers	7070.12
Wex Bank (Chevron)	Fuel	0.00
Wex Bank (Valero)	Fuel	4334.46
		++
FEB STMT DATES		++-
LA		

04/25 J

### MBNA America Business Card Credit Card Charges March / marzo 2025 Statement Maritza Gomez / Regional Head Start

Date of Transaction	Purchase Order #	Name of Vendor	Description	Amount	Account Charged	Receipt
02/11/2025	NA	Pita House	Lunch for Program Goals Meeting	\$235.44	311.0-6121-3.1-000-00	Yes
02/18/2025	NA	Linde Gas & Equipment	Propane refill for forklift	\$16.31	311.0-6420-3.1-000-00 <b>31%</b>	Yes
02/19/2025	NA	Zoom	Video Conferencing system	\$7.99	311.0-6130-3.1-000-00 <b>50%</b>	Yes
03/03/2025	NA	Venngage.com	Monthly subscription for flyer software	\$8.57	311.0-6130-3.1-000-00 <b>30%</b> (\$7.35) 312.0-6130-3.1-000-00 <b>5%</b> (\$1.22)	No
			TOTAL	\$268.31		

TOTAL | Comments: I certify that the items and charges above are true and correct and that the charges inquired have been for business purposes only. Receipts are attached (if available).

Maritza Gomez, Head Start Director

Date

### MBNA America Business Card Credit Card Charges April / abril 2025 Statement Maritza Gomez / Regional Head Start

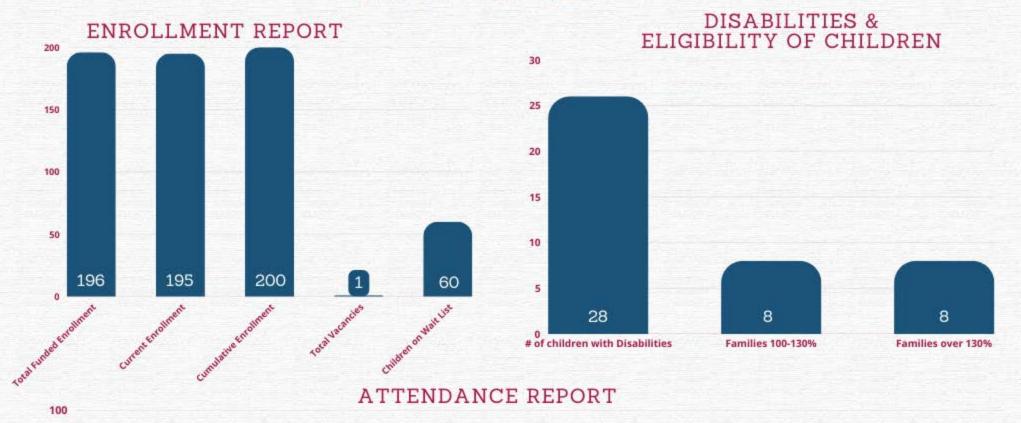
Date of Transaction	Purchase Order #	Name of Vendor	Description	Amount	Account Charged	Receipt
03/07/2025	NA	Panda Express	RHS PC Meal	\$162.92	311.0-7116-3.1-000-00	Yes
03/12/2025	NA	Panda Express	Rebates for RHS PC Meal	-\$6.52	311.0-7116-3.1-000-00	No
03/15/2025	NA	Eventbrite	2025 April Child Abuse Prevention Month Training	\$91.00	310.0-6742-3.1-000-00	Yes
03/19/2025	NA	Zoom	Video Conferencing system	\$7.99	311.0-6130-3.1-000-00 <b>50%</b>	Yes
03/18/2025	NA	Hyatt Regency	Hotel reservation for Advocacy Day	\$517.91	310.0-6714-3.1-000-00	Yes
03/18/2025	NA	Hyatt Regency	Parking fees for Advocacy Day	\$12.50	310.0-6714-3.1-000-00	Yes
03/18/2025	NA	Hyatt Regency	Hotel reservation for Advocacy Day	\$258.95	310.0-6714-3.1-000-00	Yes
04/03/2025	NA	Lyft	Transportation from airport to hotel – Stem Institute	\$40.34	310.0-6714-3.1-000-00	Yes
04/03/2025	NA	Venngage.com	Monthly subscription for flyer software	\$8.57	311.0-6130-3.1-000-00 30% 312.0-6130-3.1-000-00 5%	No
			TOTAL	\$1,093.66		

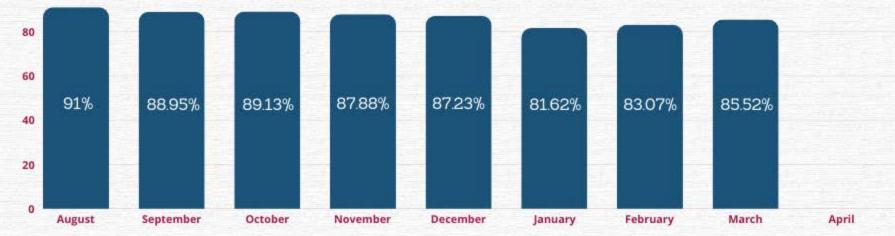
TOTAL Comments: I certify that the items and charges above are true and correct and that the charges inquired have been for business purposes only. Receipts are attached (if available).

Maritza Gomez, Head Start Director

Date

# Madera Regional Head Start Monthly Enrollment Report March 2025





May

# **IN-KIND MONTHLY SUMMARY REPORT**

Month
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**FEBRUARY** 

Year 2024-25

CATEGORY	BUDGET	PREVIOUS TOTAL	CURRENT TOTAL	Y-T-D TOTAL	REMAINING IN-KIND NEEDED
NON-FEDERAL CASH					
Volunteer Services/Servicios Voluntarios	136,819.00	385,656.40	146,581.00	532,237.40	(395,418.40)
A. Professional Services/Servicios Profesionales	-	1,189.13	270.00	1,459.13	(1,459.13)
B. Center Volunteers/Voluntarios en el Centro	134,118.00	384,438.95	146,311.00	530,749.95	(396,631.95)
C. Other/Policy Council/Otro/Comité de Póliza	2,701.00	28.32		28.32	2,672.68
Donated Food/Comida Donada	-	0.00		-	0.00
Donated Supplies/Materiales Donado	4,697.00	1,150.00		1,150.00	3,547.00
Donated Equipment	-	0.00		-	0.00
Donated Bus Storage	-	0.00		-	0.00
Donated Space/Sitio Donado	318,251.00	157,412.40	19,676.55	177,088.95	141,162.05
Transportation/ Transportación	-	0.00		-	0.00
REGIONAL TOTAL IN-KIND	459,767.00	544,218.80	166,257.55	710,476.35	(250,709.35)
CSPP STATE FUND 319	\$676,616	677,369.00	112,895.00	790,264.00	(113,648.00)
Grand Total	1,136,383.00	1,221,587.80	279,152.55	1,500,740.35	(364,357.35)

B. YTD In-Kind

\$ 1,500,740.35

C. Percent Y-T-D In-Kind 132.06%

### COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY REGIONAL HEAD START including BLENDED CSPP STATE PROGRAM INCOME CALCULATIONS February-2025

PERCENTAGES:	FREE MEALS REDUCED BASE TOTAL		197 0 0 197		137 0 <u>0</u> 137		
	FREE REDUCED BASE TOTAL		100.0000% 0.0000% 0.0000% 100.0000%		100.0000% 0.0000% 100.0000%		
MEAL BREAKFAST:	# 2,472	х	% 100.0000%	х	RATE \$2.3700	=	\$5,858.64
LUNCH:	2,700	х	100.0000%	Х	\$4.4300	=	\$11,961.00
SUPPLEMENTS:	180	Х	100.0000%	Х	\$1.2100	=	\$217.80
5,35		AL F	REIMBURSEMENT				\$18,037.44
CASH IN LIEU:	LUNCHES	Х	\$0.3000				\$810.00
TOTAL REIMBURSEMENT							\$18,847.44
STATE REIMBURSEMENTS: MEAL DESCRIPTION	MEALS		STATE RATE		% ALLOC		TOTAL STATE EARNINGS
TOTAL BREAKFAST	2,472	Х	\$0.2137	Х	100%		\$528.27
TOTAL LUNCHES	2,700	Х	\$0.2137	Х	100%		\$576.99
TOTAL:							\$1,105.26
TOTAL OF FEDERAL & STATE F	REIMBURESME	ENT	rs:				\$19,952.70

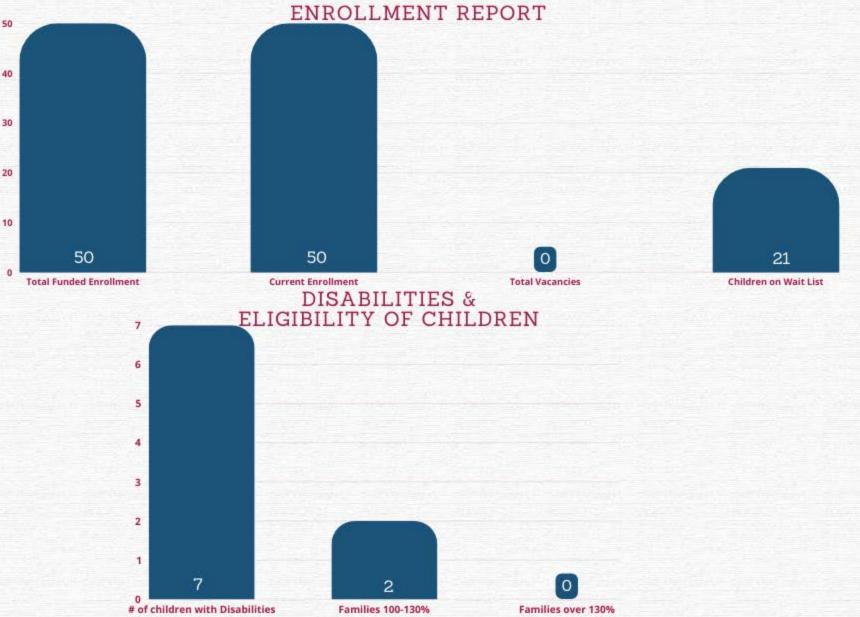
	Breakfast	Lunch	Snack	Total
RHS	532	2,700	180	3,412
CSPP	1,940	-	-	1,940
	2,472	2,700	180	5,352
TOTAL FEDERAL REIMBURSEMENT: CASH IN LIEU: TOTAL STATE REIMBURSEMENTS:	<u>RHS</u> \$13,439.64 \$810.00 \$528.27	<u>CSPP</u> \$4,597.80 \$0.00 \$576.99	<u>Total</u> \$18,037.44 \$810.00 \$1,105.26	
	\$14,777.91	\$5,174.79	\$19,952.70	

### COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY REGIONAL HEAD START including BLENDED CSPP STATE PROGRAM INCOME CALCULATIONS March-2025

PERCENTAGES:	FREE MEALS REDUCED BASE TOTAL		200 0 200		139 0 <u>0</u> 139		
	FREE REDUCED BASE TOTAL		100.0000% 0.0000% 0.0000% 100.0000%		100.0000% 0.0000% 0.0000% 100.0000%		
MEAL BREAKFAST:	# 2,660	х	% 100.0000%	х	RATE \$2.3700	=	\$6,304.20
LUNCH:	3,061	х	100.0000%	х	\$4.4300	=	\$13,560.23
SUPPLEMENTS:	174	х	100.0000%	х	\$1.2100	=	\$210.54
5,89		AL R	REIMBURSEMENT				\$20,074.97
CASH IN LIEU:	LUNCHES	х	\$0.3000				\$918.30
TOTAL REIMBURSEMENT							\$20,993.27
STATE REIMBURSEMENTS: MEAL DESCRIPTION	MEALS		STATE RATE		% ALLOC		TOTAL STATE EARNINGS
TOTAL BREAKFAST	2,660	х	\$0.2137	Х	100%		\$568.44
TOTAL LUNCHES	3,061	Х	\$0.2137	Х	100%		\$654.14
TOTAL:							\$1,222.58
TOTAL OF FEDERAL & STATE F	REIMBURESMI	ΕΝΤ	S:				\$22,215.85

	Breakfast	Lunch	Snack	Total
RHS	391	3,061	174	3,626
CSPP	2,269	-	-	2,269
	2,660	3,061	174	5,895
TOTAL FEDERAL REIMBURSEMENT: CASH IN LIEU: TOTAL STATE REIMBURSEMENTS:	<u>RHS</u> \$14,697.44 \$918.30 \$568.44 \$16,184.18	<u>CSPP</u> \$5,377.53 \$0.00 \$654.14 \$6,031.67	<u>Total</u> \$20,074.97 \$918.30 \$1,222.58 \$22,215.85	

# Madera Early Head Start Monthly Enrollment Report March 2025



# **IN-KIND MONTHLY SUMMARY REPORT**

Month	FEBRUARY			Year	2025
CATEGORY	BUDGET	PREVIOUS TOTAL	CURRENT TOTAL	Y-T-D TOTAL	REMAINING IN-KIND NEEDED
NON-FEDERAL CASH					
Volunteer Services/Servicios Voluntarios	208,787.00	219,197.87	23,040.78	242,238.65	(33,451.65)
A. Professional Services/Servicios Profesionales	-	0.00		-	0.00
B. Center Volunteers/Voluntarios en el Centro	206,086.00	219,197.87	23,040.78	242,238.65	(36,152.65)
C. Other/Policy Council/Otro/Comité de Póliza	2,701.00	0.00		-	2,701.00
Donated Food/Comida Donada	-	0.00		-	0.00
Donated Supplies/Materiales Donado	451.00	0.00	300.00	300.00	151.00
Donated Equipment	-	0.00		-	0.00
Donated Bus Storage	-	0.00		-	0.00
Donated Space/Sitio Donado	-	0.00		-	0.00
Transportation/ Transportación	-	0.00		-	0.00
TOTAL IN-KIND	209,238.00	219,197.87	23,340.78	242,538.65	(33,300.65)
		0.00		-	0.00
Grand Total	209,238.00	219,197.87	23,340.78	242,538.65	(33,300.65)

B. YTD In-Kind

\$ 242,538.65

C. Percent Y-T-D In-Kind

115.92%



# ALTERNATIVE PAYMENT AND RESOURCE & REFERRAL PROGRAM MONTHLY REPORTING – <u>MAY 2025</u>

# NUMBER OF CHILDREN ENROLLED IN EACH PROGRAM FOR THE ALTERNATIVE PAYMENT PROGRAM

General Contract - CAPP	588
CalWORKs Stage 2 – C2AP	140
CalWORKs Stage 3 – C3AP	128
Bridge Program - BP	23
Total Children Enrolled	879

# NUMBER OF IN-HOME LICENSE CHILD CARE PROVIDERS AND LICENSE-EXEMPT CHILD CARE PROVIDERS FOR ALTERNATIVE PAYMENT PROGRAM

IN - HOME LICENSE CHILD CARE PROVIDERS – SMALL	47
IN – HOME LICENSE CHILD CARE PROVIDERS – LARGE	47
LICENSE-EXEMPT CHILD CARE PROVIDERS	87
Total Providers Enrolled	181

# **RESOURCE & REFERRAL LICENSED PROVIDERS**

ACTIVE - LICENSED CHILD CARE PROVIDERS	148
CLOSED - LICENSED CHILD CARE PROVIDERS	N/A

# CHILD CARE INITIATIVE PROGRAM PROVIDER WORKSHOPS/TRAININGS

# CHILD CARE INITIATIVE PROJECT (CCIP) Workshops:

- LEAD Poisoning (English): 0 attendees
- LEAD Poisoning (Spanish): 13 attendees

# **KIDS PLAY DAY:**

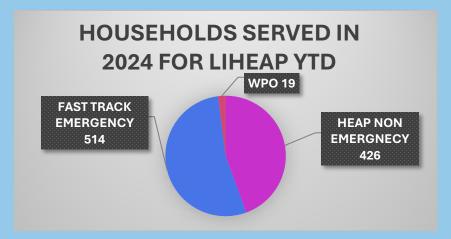
• 17 ATTENDEES (English/Spanish)

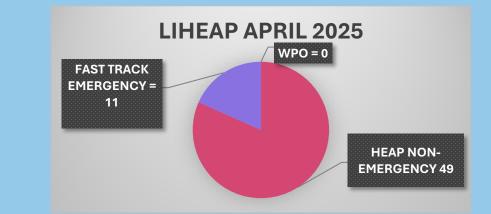
# Bridge Program Coaching Session:

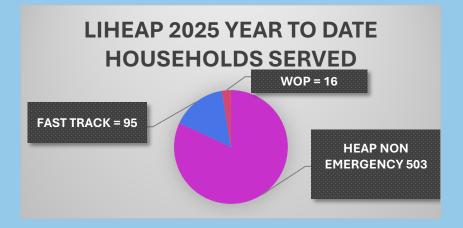
• Trauma – Informed Care Coaching (Spanish): 25 attendees

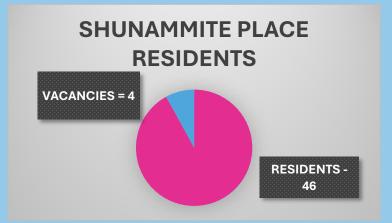


Low Income Home Energy Assistance Program (LIHEAP)



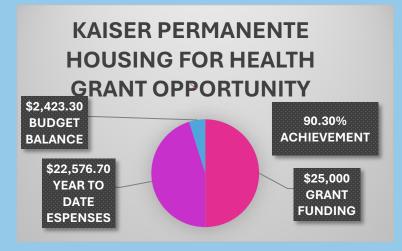






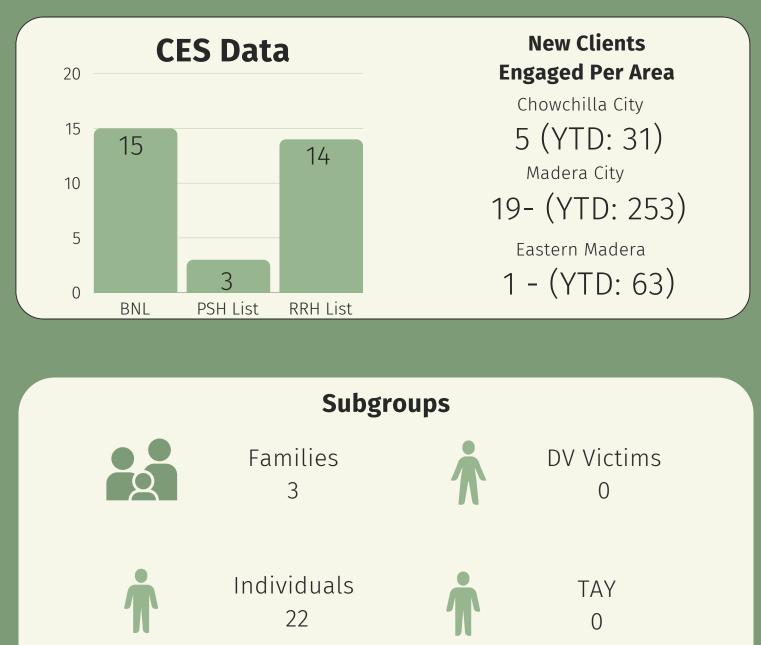


**RESIDENTS = 12** 









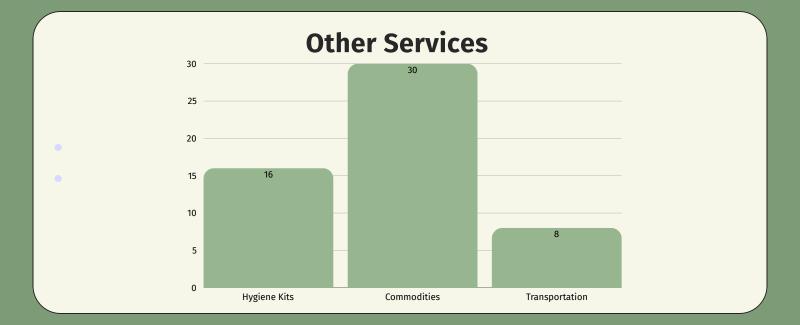
# **Referrals Received**



20

# Outcomes

3: assigned 6: no contact 11: not homeless







Below are the number of services provided and contacts made in Madera County for the period of 04/01/2025 - 4/30/2025.

	Individuals	Families	DV	TAY	Veterans
Madera City	219	34	8	16	2
Chowchilla City	25	6	0	0	0
Eastern Madera	60	3	0	0	0
Total:	304	43	8	16	2

Outcomes-Ser	vices Offered	
HOUSING SERVICES	CURRENT MONTH	YEAR TO DATE
SHELTER	1	28
REFERRED TO TRIAGE - MRM	13	13
TRIAGE HOUSING	7	46
REUNIFICATION WITH FAMILY	0	5
HOUSING RESOURCE GUIDE	4	62
SUBMITTED RENTAL APPLICATIONS	2	56
PERMANENT HOUSING	11	52
PERMANENT SUPPORTIVE HOUSING	1	36
PROVIDED MOVE-IN COSTS	3	33
RECEIVED EMERGENCY HOUSING VOUCHER	0	4
DOCUMENT COLLECTION	CURRENT MONTH	YEAR TO DATE
DMV VOUCHER FOR ID	6	40
ASSISTED IN OBTAINING DOCUMENTS THROUGH	<u> </u>	-10
CONSULATE	0	0
SOCIAL SECURITY CARD	3	16
BIRTH CERTIFICATE	3	16
INCOME VERIFICATION	2	40
DISABILITY CERTIFICATION	0	20
PSH SUPPORT LETTERS	1	46
EMOTIONAL SUPPORT ANIMAL LETTER	0	1
REFERRALS	CURRENT MONTH	YEAR TO DATE
WORKFORCE	6	28
VICTIM SERVICES	1	4
VETERAN AFFAIRS	0	1
BEHAVIORAL HEALTH	14	173
REFFERED TO BH BRIDGE HOUSING	1	5
IMMIGRATION SERVICES	0	14
FOSTER CARE SERVICES	0	1
RH COMMUNITY BUILDERS	2	14
SUBSTANCE ABUSE PROGRAM	0	14
DEPARTMENT OF SOCIAL SERVICES - APS	0	0
DEPARTMENT OF SOCIAL SERVICES - CPS	0	1
DEPARTMENT OF SOCIAL SERVICES - HOUSING	0	11
OTHER NON-CASH BENEFITS	CURRENT MONTH	YEAR TO DATE
ASSISTED IN OBTAINING MEDICAL APPTS	1	10
ASSISTED IN OBTAINING CASH AID / TANF	1	4
ASSISTED IN OBTAINING CALFRESH BENEFITS	0	2
ASSISTED IN OBTAINING HEALTH INSURANCE	0	4
OTHER SERVICES	CURRENT MONTH	YEAR TO DATE
SUICIDE PREVENTION	0	1
	0	
PROVIDED HYGIENE KITS	16	90
PROVIDED HYGIENE KITS DELIVERED COMMODITIES		
PROVIDED HYGIENE KITS DELIVERED COMMODITIES ASSISTED WITH SSI BENEFITS	16	90
PROVIDED HYGIENE KITS DELIVERED COMMODITIES ASSISTED WITH SSI BENEFITS ARRANGED TRANSPORTATION	16 30	90 203 0 72
PROVIDED HYGIENE KITS DELIVERED COMMODITIES ASSISTED WITH SSI BENEFITS ARRANGED TRANSPORTATION ADVOCACY WITH LEGAL MATTER	16 30 0	90 203 0
PROVIDED HYGIENE KITS DELIVERED COMMODITIES ASSISTED WITH SSI BENEFITS ARRANGED TRANSPORTATION ADVOCACY WITH LEGAL MATTER ASSISTED IN OBTAINING A GOVT. PHONE	16 30 0 8 0 0 0	90 203 0 72 5 2
PROVIDED HYGIENE KITS DELIVERED COMMODITIES ASSISTED WITH SSI BENEFITS ARRANGED TRANSPORTATION ADVOCACY WITH LEGAL MATTER ASSISTED IN OBTAINING A GOVT. PHONE PROVIDED SHOES OR CLOTHES TO CLIENT	16 30 0 8 0 0 0 0 0	90 203 0 72 5 2 8
PROVIDED HYGIENE KITS DELIVERED COMMODITIES ASSISTED WITH SSI BENEFITS ARRANGED TRANSPORTATION ADVOCACY WITH LEGAL MATTER ASSISTED IN OBTAINING A GOVT. PHONE PROVIDED SHOES OR CLOTHES TO CLIENT PROVIDED BICYCLE FOR TRANSPORTATION	16 30 0 8 0 0 0 0 0 0 0	90 203 0 72 5 2 8 0
PROVIDED HYGIENE KITS DELIVERED COMMODITIES ASSISTED WITH SSI BENEFITS ARRANGED TRANSPORTATION ADVOCACY WITH LEGAL MATTER ASSISTED IN OBTAINING A GOVT. PHONE PROVIDED SHOES OR CLOTHES TO CLIENT PROVIDED BICYCLE FOR TRANSPORTATION ASSISTED WITH JOB INTERVIEW	16 30 0 8 0 0 0 0 0 0 0 0 0	90 203 0 72 5 2 8 0 1
PROVIDED HYGIENE KITS DELIVERED COMMODITIES ASSISTED WITH SSI BENEFITS ARRANGED TRANSPORTATION ADVOCACY WITH LEGAL MATTER ASSISTED IN OBTAINING A GOVT. PHONE PROVIDED SHOES OR CLOTHES TO CLIENT PROVIDED BICYCLE FOR TRANSPORTATION ASSISTED WITH JOB INTERVIEW ASSISTED IN OBTAINING INCOME	16 30 0 8 0 0 0 0 0 0 0 0 0 0 0	90 203 0 72 5 2 8 0 1 1 1
PROVIDED HYGIENE KITS DELIVERED COMMODITIES ASSISTED WITH SSI BENEFITS ARRANGED TRANSPORTATION ADVOCACY WITH LEGAL MATTER ASSISTED IN OBTAINING A GOVT. PHONE PROVIDED SHOES OR CLOTHES TO CLIENT PROVIDED BICYCLE FOR TRANSPORTATION ASSISTED WITH JOB INTERVIEW ASSISTED IN OBTAINING INCOME OTHER COORDINATED ENTRY	16 30 0 8 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	90 203 0 72 5 2 8 0 1 1 YEAR TO DATE
PROVIDED HYGIENE KITS DELIVERED COMMODITIES ASSISTED WITH SSI BENEFITS ARRANGED TRANSPORTATION ADVOCACY WITH LEGAL MATTER ASSISTED IN OBTAINING A GOVT. PHONE PROVIDED SHOES OR CLOTHES TO CLIENT PROVIDED BICYCLE FOR TRANSPORTATION ASSISTED WITH JOB INTERVIEW ASSISTED IN OBTAINING INCOME OTHER COORDINATED ENTRY PLACED ON PSH PRIORITY LIST	16 30 0 8 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	90 203 0 72 5 2 8 0 1 1 YEAR TO DATE 24
PROVIDED HYGIENE KITS DELIVERED COMMODITIES ASSISTED WITH SSI BENEFITS ARRANGED TRANSPORTATION ADVOCACY WITH LEGAL MATTER ASSISTED IN OBTAINING A GOVT. PHONE PROVIDED SHOES OR CLOTHES TO CLIENT PROVIDED BICYCLE FOR TRANSPORTATION ASSISTED WITH JOB INTERVIEW ASSISTED IN OBTAINING INCOME OTHER COORDINATED ENTRY	16 30 0 8 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	90 203 0 72 5 2 8 0 1 1 YEAR TO DATE

# 

Addressing the Needs of our Community Since 1965





# Walk a Mile in Her Shoes



April 25, 2025







# obe



















Thank How



# Memorial & Awards Event



### National Crime Victims' Rights Week

















in Loving





# April is Child Abuse Prevention Month

# Wear Blue Day April 4, 2025

Wear blue to raise awareness and show your commitment to the prevention of child abuse







## #wearblue4kids











# Child Abuse Prevention Month









APRIL 30, 2025 MAKE A STATEMENT WITH YOUR CLOTHES WEAR JEANS WITH A PURPOSE

# CAPMC

# DA's Off



# Madera County



Big Brothers Big Sisters MCCAPC





# Thank you!



### **Report to the Board of Directors**

Agenda Item Number: <u>E-1</u> Board of Directors Meeting for: <u>May 8, 2025</u> Author: <u>Maritza Gomez-Zaragoza</u>

- DATE: April 14, 2025
- TO: Board of Directors
- FROM: Maritza Gomez-Zaragoza, Head Start Program Director

SUBJECT: 2024-2025 California State Preschool Program (CSPP) Budget Revision

### I. <u>RECOMMENDATION</u>:

Review and consider approving the Community Action Partnership of Madera County 2024-2025 CSPP Budget Revisions to Stanislaus County Office of Education. Comparison Budgets included.

### II. <u>SUMMARY:</u>

Stanislaus County Office of Education awarded CAPMC additional CSPP to include the Oakhurst center. A budget comparison based on agency's funding allocations for the 2024-2025 guidance and amounts received from Stanislaus County Office of Education has been prepared for review and approval.

### III. DISCUSSION:

- a. Stanislaus County Office of Education approached CAPMC with availability of additional CSPP funding.
- b. Staff considered the proposal in order to extend service hours for the Oakhurst Head Start site. The Oakhurst center typically serves children for 3.5 hours. With the additional funding, the center is able to provide 6 hours of service.
- c. Staff have prepared a budget revision comparison to indicate how the funding will be utilized.
- The 2024-2025 California State Preschool Program (CSPP) Budget Revision will be presented to the Policy Council for review and approval on May 1, 2025.
- A. **<u>FINANCING</u>**: Total funding \$91,244

### STANISLAUS COUNTY OFFICE OF EDUCATION California State Preschool Program (CSPP) 2024-2025 BUDGET COMPARISON Budget Revision #1

### Subrecipient Agency Name: Community Action Partnership of Madera County

		Currently Approved	Net	Revised	
		Budget	Changes	Budget	
6a	Personnel	790,615	51,328	841,943	
6b	Fringe	209,675	19,075	228,750	
6c	Travel		-		
6d	Equipment > \$5,000		-		
6e	Supplies		1,163	1,163	
6f	Contracts		-		
<b>C</b>	Major				
6g	Renovations/Construction		-		
6h	Other		12,067	12,067	
	Total Direct	1,000,290	83,633	1,083,923	
6i	Indirect	91,026	7,611	98,637	
	Total	1,091,316	91,244	1,182,560	
Exp	Explanation of requested variance/changes: Changes				

6a	Net Increase:	Increase due to personnel changes for Oakhurst (provide more specific on type of change)	51,328
6b	Net Increase:	Increase due to changes in 6a	19,075
6c	No Change		-
6d	No Change		-
6e	No Change		-
6e	Net Increase:	Increased	1,163
6f	No Change		-
6g	No Change		-
6h	Net Increase:	Increase	12,067
6i	Net Increase:	Increase due to change in overall budget amount.	7,611
Tota	I		91,244

Approval Section				
Agency Head Start Director:	Date:			
Agency Executive Director:	Date:			
Policy Committee Approval:	Date:			
Board Approval:	Date:			
Recipient Director:	Date:			

<u>Note:</u> Any changes to category 6d require the Bid Documentation Form. For any Renovations/Repairs refer to the required Contractors Checklist Form.



### **Report to the Board of Directors**

Agenda Item Number: <u>E-2</u> Board of Directors Meeting for: <u>May 8, 2025</u> Author: <u>Maritza Gomez-Zaragoza</u>

- DATE: May 1, 2025
- TO: Board of Directors
- FROM: Maritza Gomez-Zaragoza, Head Start Program Director
- SUBJECT: 2024-2025 Head Start, Early Head Start, and Migrant Seasonal Head Start Staff Retention Stipend

### I. <u>RECOMMENDATION</u>:

Review and consider approving proposal to provide a one time Retention Stipend to Head Start, Early Head Start, and Migrant Seasonal Head Start staff.

### II. <u>SUMMARY:</u>

CAPMC-Head Start wants to ensure retention of its workforce. CAPMC Head Start is experiencing a turn-over in positions that are essential for the continuation of services to children and families.

### III. DISCUSSION:

- A. Office of Head Start released an Informational Memorandum (ACF-IM-HS-22-04) Competitive Bonuses for the Head Start Workforce. CAPMC's plan to provide a retention stipend is within Head Start allowable expenses.
- B. In the last three years, the Head Start programs have experienced a high turnover of teaching staff even though CAPMC has made great efforts to increase wages. Currently, there are over 11 vacant positions between center and office staff.
- C. CAPMC is proposing a Retention Stipend of \$1,200 that will be paid out to staff on May of 2025 following Board approval. If approved the one time stipend will be distributed as a separate payroll check. CAPMC hopes that the stipend will encourage staff to remain with the program and avoid any lapses in services to the children and families due to vacancies.
- D. The stipend will not only support the program to retain staff but will also provide financial support to staff who might be experiencing financial hardship.
- E. The one time Retention Stipend will be given to all Head Start staff across the board and will be allocated to the appropriate budget for those staff members who are allocated to multiple programs.

### IV. FINANCING:

Funds for the Retention Stipend have been allocated to all 2024-2025 Head Start budgets.



### **Report to the Board of Directors**

Agenda Item Number: <u>E-3</u> Board of Directors Meeting for: <u>May 8, 2025</u> Author: <u>Donna Tooley</u>

- DATE: April 30, 2025
- TO: Board of Directors
- FROM: Donna Tooley, Interim Chief Financial Officer
- SUBJECT: Accept and Approve the Submission of the CAPMC Welfare Benefit 2024 Form 5500 Tax Return

### I. <u>RECOMMENDATION</u>:

Review and consider approving the submission of the CAPMC Welfare Benefit 2024 Form 5500 tax return by the Chief Financial Officer.

### II. <u>SUMMARY:</u>

CAPMC must file an annual return for its Health and Welfare Benefit plan each calendar year. Heffernan Insurance Brokers have prepared the Form 5500 for the CAPMC Health and Welfare Benefit Plan.

### III. DISCUSSION:

- A. A draft Form 5500 is attached for your review and consideration. The CFO has reviewed the tax return prior to the submission to the Board of Directors.
- B. The information for the Welfare Benefit Plan Form 5500 was prepared from records of the health insurance providers and CAPMC's vendor payment records.
- C. CAPMC is subject to the filing requirement because its plan has more than 100 participants.
- D. The due date for the return is July 31, 2025 and is filed electronically.
- E. The Welfare Benefit Plan Form 5500 does not require an outside audit like the CAPMC 403(b) Retirement Plan.

### IV. <u>FINANCING</u>:

The Welfare Benefit Plan is less complicated than the audit 403(b) Form 5500 and was completed by Heffernan Insurance Brokers for no additional fee.

Form 5500	Annual Return/Report	t of Employee Benefit Plan		OMB Nos. 12	10-0110
Department of the Treasury Internal Revenue Service	This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). Complete all entries in accordance with the instructions to the Form 5500.			2024	
Department of Labor Employee Benefits Security Administration					
Pension Benefit Guaranty Corporation			This	Form is Open to Pu Inspection	ıblic
Part I Annual Report Ide	entification Information				
For calendar plan year 2024 or fiscal	l plan year beginning 01/01/202	24 and ending $12/3$	1/202	4	
A This return/report is for:	a multiemployer plan	a multiple-employer plan (Filers checking the employer information in accordance with the the employer information in accordance with the employer informa			ting
	X a single-employer plan	a DFE (specify)			
<b>B</b> This return/report is:	the first return/report	the final return/report			
·	an amended return/report	a short plan year return/report (less than 12	months	)	
C If the plan is a collectively-bargained plan, check here					
<b>D</b> Check box if filing under:	Form 5558	automatic extension	the	e DFVC program	
	special extension (enter description)	)			
E If this is a retroactively adopted pl	an permitted by SECURE Act section 2	01, check here	•		
Part II Basic Plan Inform	ation—enter all requested information				
<b>1a</b> Name of plan	·	nty, Inc. Welfare Benefit	1b	Three-digit plan number (PN) ▶	501
Plan		ney, me. werrare benefic	1c	Effective date of pla 01/01/2017	an
	, if for a single-employer plan) apt., suite no. and street, or P.O. Box) country, and ZIP or foreign postal code (i	if foreign, see instructions)	2b	Employer Identifica Number (EIN) 94-1612823	tion
Community Action Pa	rtnership of Madera Cou	nty, Inc.	2c	Plan Sponsor's tele number 415-526-7510	•
1225 Gill Avenue Madera	CA 93637		2d	Business code (see instructions) 813000	9
madera	CA 33031				

### Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE			
HERE	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
HERE	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
NEKE	Signature of DFE	Date	Enter name of individual signing as DFE
For Don	anuark Daduation Act Nation, and the Instructions for Form FF	00	Form EE00 (2024)

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

	Form 5500 (2024)	Page <b>2</b>		
<b>3a</b> P	an administrator's name and address $X$ Same as Plan Sponsor		3b Ad	ministrator's EIN
				ministrator's telephone mber
	the name and/or EIN of the plan sponsor or the plan name has changed sind nter the plan sponsor's name, EIN, the plan name and the plan number from		4b El	N
	ponsor's name Ian Name		<b>4d</b> PN	J
<b>5</b> T	otal number of participants at the beginning of the plan year		5	248
	umber of participants as of the end of the plan year unless otherwise stated <b>a(2), 6b, 6c,</b> and <b>6d</b> ).	welfare plans complete only lines 6a(1),		
a(1)	Total number of active participants at the beginning of the plan year		6a(1)	247
a(2)	Total number of active participants at the end of the plan year			266
b	Retired or separated participants receiving benefits			1
С	Other retired or separated participants entitled to future benefits		6c	0
d	Subtotal. Add lines 6a(2), 6b, and 6c.		6d	267
е	Deceased participants whose beneficiaries are receiving or are entitled to r	eceive benefits	6e	
f	Total. Add lines 6d and 6e.		6f	
g(1)	Number of participants with account balances as of the beginning of the pla complete this item)		6g(1)	
g(2)			6g(2)	
h	Number of participants who terminated employment during the plan year w less than 100% vested		6h	
<b>7</b> E	nter the total number of employers obligated to contribute to the plan (only m	ultiemployer plans complete this item)	7	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:

**b** If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions: 4A 4B 4D 4E

9a	Plan fu	nding	arrangement (check all that apply)	9b	Plan be	nefit	arrangement (check all that apply)
	(1)	Х	Insurance		(1)	Х	Insurance
	(2)		Code section 412(e)(3) insurance contracts		(2)		Code section 412(e)(3) insurance contracts
	(3)		Trust		(3)		Trust
	(4)	Х	General assets of the sponsor		(4)	Х	General assets of the sponsor
10	Check	all ap	plicable boxes in 10a and 10b to indicate which schedules are at	tache	d, and, v	vhere	e indicated, enter the number attached. (See instructions)
а	Pensic	on Scl	nedules	b	Genera	al Sc	hedules
	(1)		R (Retirement Plan Information)		(1)		H (Financial Information)
	(2)	Π	MB (Multiemployer Defined Benefit Plan and Certain Money		(2)		I (Financial Information – Small Plan)
	.,		Purchase Plan Actuarial Information) - signed by the plan		(3)	Х	A (Insurance Information) – Number Attached $2$
			actuary		(4)		C (Service Provider Information)
	(3)		<b>SB</b> (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary		(5)		D (DFE/Participating Plan Information)
	(4)		DCG (Individual Plan Information) – Number Attached		(6)		G (Financial Transaction Schedules)
	(5)		MEP (Multiple-Employer Retirement Plan Information)				

Page 3

Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)
11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.)
If "Yes" is checked, complete lines 11b and 11c.
11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.)
11c Enter the Receipt Confirmation Code for the 2024 Form M-1 annual report. If the plan was not required to file the 2024 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code\_\_\_\_\_

		•					
SCHEDULE		Insurar	nce Informatio	n		ON	IB No. 1210-0110
(Form 5500 Department of the Treas		This schedule is require	ed to be filed under sect	ion 104 of th	е		
Internal Revenue Servi Department of Labor		Employee Retirement I	ncome Security Act of 1	974 (ERISA)	).		2024
Employee Benefits Security Ad	ministration		attachment to Form 5				
Pension Benefit Guaranty Co	rporation		ERISA section 103(a)(2				rm is Open to Public Inspection
For calendar plan year 202	24 or fiscal pla	an year beginning 01/01/	2024	and en	Ŭ	2/31/2024	
A Name of plan Community Acti	ion Partr	nership of Madera Co	ounty, Inc.	B Three	0	.n <b>b</b>	501
Welfare Benefi				pian	number (PN	N) 🕨	
<b>C</b> Plan sponsor's name a	is shown on lii	ne 2a of Form 5500		D Emplo	ver Identific:	ation Number	(EIN)
					-		(=)
		nership of Madera Co		-	.612823	• Davida ista	
		A. Individual contracts grouped					
1 Coverage Information:							
(a) Name of insurance ca	rrier						
The Guardian	Life Ins	urance Company of A	merica				
	1		(e) Approximate r	number of		Policy or c	ontract year
(b) EIN (c) NAIC code		(d) Contract or identification number	persons covered policy or contra	at end of	(f)	From	<b>(g)</b> To
13-5123390	64246	00057677	266	266 01		1/2024	12/31/2024
2 Insurance fee and com descending order of the		nation. Enter the total fees and to	otal commissions paid. I	List in line 3	the agents,	brokers, and c	other persons in
		nmissions paid		<b>(b)</b> To	tal amount o	of fees paid	
		6,011					0
3 Persons receiving com		fees. (Complete as many entrie					_
Heffernan Insura		and address of the agent, broke ers	r, or other person to who	om commissi	ons or fees	were paid	
1350 Carlback Ave							
Walnut Creek	C	CA 94596					
(b) Amount of sales ar	nd base	Fe	ees and other commission	ons paid			
commissions pai		(c) Amount		(d) Purpose	9		(e) Organization code
	5,266						3
	(a) Name	and address of the agent, broke	r. or other person to who	om commissi	ons or fees	were paid	
Enrollease 660 York Street,							
San Francisco	C	CA 94110					
(b) Amount of sales ar	nd base	Fe	ees and other commission	ons paid			
commissions pai		(c) Amount		(d) Purpose	9		(e) Organization code
	745						3
Example Device all Device the	n Aat Nation	and the location of the East	5500			0.1.	dula A (Farm 5500) 2024

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

Page **2 –** 

### (a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

		Fees and other commissions paid	(e)
(b) Amount of sales and base commissions paid	(c) Amount	(d) Purpose	Organization code

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

		Fees and other commissions paid	(e)
(b) Amount of sales and base commissions paid	(c) Amount	(d) Purpose	Organization code
			L

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

	Fees and other commissions paid			
(b) Amount of sales and base commissions paid	(c) Amount	(d) Purpose	<b>(e)</b> Organization code	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

		Fees and other commissions paid	(e)
(b) Amount of sales and base commissions paid	(c) Amount	(d) Purpose	Organization code

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

		Fees and other commissions paid	(e)
(b) Amount of sales and base commissions paid	(c) Amount	(d) Purpose	Organization code

Schedule A (Form 5500) 2024

Page 3	3
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I	Part	II Investment and Annuity Contract Information Where individual contracts are provided, the entire group of such indiv	vidual contracts with each carrier may	/ be treated	as a unit for purposes of
		this report.			
4	Curr	ent value of plan's interest under this contract in the general account at year	end	4	
5		ent value of plan's interest under this contract in separate accounts at year e	end	5	
6		tracts With Allocated Funds:			
	а	State the basis of premium rates			
	h	Dramiuma noid to corrier		6b	
	b C	Premiums paid to carrier Premiums due but unpaid at the end of the year		60 60	
	d	If the carrier, service, or other organization incurred any specific costs in co			
	ŭ	retention of the contract or policy, enter amount.	•	6d	
		Specify nature of costs			
	е	Type of contract: (1) individual policies (2) group deferre	d annuity		
		(3) other (specify)			
	f	If contract purchased, in whole or in part, to distribute benefits from a termin	nating plan, check here		
7	Cont	tracts With Unallocated Funds (Do not include portions of these contracts ma			
-	а		ate participation guarantee		
		(3) guaranteed investment (4) other	•		
	b	Balance at the end of the previous year		7b	0
	С	Additions: (1) Contributions deposited during the year			
		(2) Dividends and credits	7c(2)		
		(3) Interest credited during the year			
		(4) Transferred from separate account			
		(5) Other (specify below)	7c(5)		
		•			
		(6)Total additions		7c(6)	0
	d	Total of balance and additions (add lines 7b and 7c(6)).		7d	0
	е	Deductions:			
		(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)		
		(2) Administration charge made by carrier	7.(0)		
		(3) Transferred to separate account			
		(4) Other (specify below)	7e(4)		
		P			
		(5) Total deductions		7e(5)	0
	f	Balance at the end of the current year (subtract line 7e(5) from line 7d)		7f	0

Specify nature of costs.

P	Part	III Welfare Benefit Contract Informa If more than one contract covers the same g the information may be combined for reportin employees, the entire group of such individu	roup of employees of the ng purposes if such contr	acts are exp	erience-rated as a unit	. Where cor	ntracts cover individual	
8	Ben	nefit and contract type (check all applicable boxes)						
	а	Health (other than dental or vision)	<b>b</b> Dental	CX	Vision		<b>d</b> X Life insurance	
	е	Temporary disability (accident and sickness)	f Long-term disabilit	v g	Supplemental unem	oloyment	<b>h</b> Prescription drug	
	ιĒ		j HMO contract		PPO contract	,		
	• L							
	m	X Other (specify) Accidental Death &	2 Dismemberment					
0	Eve	perience-rated contracts:						
9		Premiums: (1) Amount received	]	9a(1)			4	
		<ul><li>(2) Increase (decrease) in amount due but unpaid.</li></ul>	-	9a(1) 9a(2)			1	
		<ul><li>(3) Increase (decrease) in unearned premium rese</li></ul>		9a(3)			4	
		(4) Earned ((1) + (2) - (3))	L			9a(4)		0
	-	Benefit charges (1) Claims paid	ſ	9b(1)				-
		(2) Increase (decrease) in claim reserves	•	9b(2)				
		(3) Incurred claims (add (1) and (2))				9b(3)		0
		(4) Claims charged				9b(4)		
	С	Remainder of premium: (1) Retention charges (on						
		(A) Commissions		9c(1)(A)				
		(B) Administrative service or other fees		9c(1)(B)				
		(C) Other specific acquisition costs		9c(1)(C)			]	
		(D) Other expenses		9c(1)(D)				
		(E) Taxes		9c(1)(E)				
		(F) Charges for risks or other contingencies		9c(1)(F)				
		(G) Other retention charges		9c(1)(G)		1		
		(H) Total retention	_			9c(1)(H)		0
		(2) Dividends or retroactive rate refunds. (These a	amounts were paid in	cash, or	credited.)	9c(2)		
	d	Status of policyholder reserves at end of year: (1)	Amount held to provide I	benefits after	r retirement	9d(1)		
		(2) Claim reserves				9d(2)		
		(3) Other reserves				9d(3)		
	е	Dividends or retroactive rate refunds due. (Do not	t include amount entered	in line 9c(2)	.)	9e		_
10	) No	onexperience-rated contracts:						
	а	Total premiums or subscription charges paid to ca	arrier			10a	52,3	311
	b	If the carrier, service, or other organization incurre						
		retention of the contract or policy, other than report	rted in Part I, line 2 above	e, report amo	ount	10b		

Pa	art IV Provision of Information			
11	Did the insurance company fail to provide any information necessary to complete Schedule A?	Yes	X No	
12	If the answer to line 11 is "Yes," specify the information not provided.			

SCHEDULE	Α	Insuran	ce Informatio	on			
(Form 5500	))					OM	B No. 1210-0110
Department of the Treas Internal Revenue Serv	sury	This schedule is required Employee Retirement In					2024
Department of Labo Employee Benefits Security Ad		File as an a	attachment to Form 5	5500.			
Pension Benefit Guaranty Co	orporation	Insurance companies a pursuant to I		ion		m is Open to Public Inspection	
For calendar plan year 20	24 or fiscal pl	an year beginning 01/01/2	2024	and en	ding 1	2/31/2024	
A Name of plan Community Act. Welfare Benef.		nership of Madera Co	unty, Inc.	B Three plan	e-digit number (P	N) ►	501
C Plan sponsor's name a	as shown on li	ine 2a of Form 5500		D Emplo	yer Identifi	cation Number (	EIN)
Community Act	ion Dart	nership of Madera Co	untu Ing	94-1	612823		
		erning Insurance Contract		s, and Con	missior	<b>IS</b> Provide infor	mation for each contract
	ate Schedule	A. Individual contracts grouped a	is a unit in Parts II and	III can be re	ported on a	single Schedul	e A.
1 Coverage Information:							
(a) Name of insurance ca	arrier						
Kaiser Founda	tion Hea	alth Plan Inc					
	(c) NAIC	(d) Contract or		(e) Approximate number of		Policy or contract year	
<b>(b)</b> EIN	code	identification number	persons covered policy or contra		(f)	From	<b>(g)</b> To
94-1340523	00000	34950	177		01/0	01/2024	12/31/2024
2 Insurance fee and com descending order of the		mation. Enter the total fees and tot I.	tal commissions paid.	List in line 3	the agents,	brokers, and o	ther persons in
<b>(a)</b> Total :	amount of cor	mmissions paid		<b>(b)</b> To	otal amount	of fees paid	
		71,247					(
3 Persons receiving com	missions and	l fees. (Complete as many entries	as needed to report a	all persons).			
Heffernan Insura		and address of the agent, broker,	, or other person to wh	nom commiss	ions or fees	s were paid	
1350 Carlback Av							
Walnut Creek	(	CA 94596					
(b) Amount of sales a	nd base	Fee	es and other commiss	ions paid			1
commissions pa	id	(c) Amount		(d) Purpose	Э		(e) Organization code
	71,247						3
	/1,24/						5
	<b>(a)</b> Name	and address of the agent, broker,	, or other person to wh	nom commiss	ions or fees	s were paid	
(b) Amount of sales a	nd base	Fe	es and other commiss	ions paid			
commissions pa		(c) Amount		(d) Purpose	9		(e) Organization code

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

Page **2 –** 

### (a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

		Fees and other commissions paid	(e)
(b) Amount of sales and base commissions paid	(c) Amount	(d) Purpose	Organization code

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

		Fees and other commissions paid	(e)
(b) Amount of sales and base commissions paid	(c) Amount	(d) Purpose	Organization code
			L

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

		Fees and other commissions paid	(e)
(b) Amount of sales and base commissions paid	(c) Amount	(d) Purpose	Organization code

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

		Fees and other commissions paid	(e)
(b) Amount of sales and base commissions paid	(c) Amount	(d) Purpose	Organization code

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

		Fees and other commissions paid	(e)
(b) Amount of sales and base commissions paid	(c) Amount	(d) Purpose	Organization code

Schedule A (Form 5500) 2024

Page 3	3
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I	Part	II Investment and Annuity Contract Information Where individual contracts are provided, the entire group of such indiv	idual contracts with each carrier may	v be treated	d as a unit for purposes of
		this report.		, 50 104100	
4	Curr	ent value of plan's interest under this contract in the general account at year	end	4	
5		ent value of plan's interest under this contract in separate accounts at year e	nd	5	
6		tracts With Allocated Funds:			
	а	State the basis of premium rates			
	h	Dramiuma paid to corrige		6b	
	b C	Premiums paid to carrier Premiums due but unpaid at the end of the year		60 60	
	d	If the carrier, service, or other organization incurred any specific costs in co			
	ŭ	retention of the contract or policy, enter amount.	•	6d	
		Specify nature of costs			
	е	Type of contract: (1) individual policies (2) group deferre	d annuity		
		(3) other (specify)			
	f	If contract purchased, in whole or in part, to distribute benefits from a termin	nating plan, check here		
7	Cont	tracts With Unallocated Funds (Do not include portions of these contracts ma			
-	а		ate participation guarantee		
		(3) guaranteed investment (4) other			
	b	Balance at the end of the previous year		7b	0
	c	Additions: (1) Contributions deposited during the year		10	
	-	(2) Dividends and credits	7c(2)		
		(3) Interest credited during the year			
		(4) Transferred from separate account	7c(4)		
		(5) Other (specify below)	7c(5)		
		•			
		(6)Total additions		7c(6)	0
	d	Total of balance and additions (add lines 7b and 7c(6))		7d	0
	е	Deductions:			
		(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)		
		(2) Administration charge made by carrier	7e(2)		
		(3) Transferred to separate account			
		(4) Other (specify below)	7e(4)		
		•			
		(5) Total deductions		7e(5)	0
	f	Balance at the end of the current year (subtract line 7e(5) from line 7d)		7f	0

Specify nature of costs.

F	Part	III Welfare Benefit Contract Informa If more than one contract covers the same the information may be combined for report employees, the entire group of such individu	group ing pu	of employees of the proses if such contra	acts are exp	perien	ce-rated as a unit	. Where co	ontracts cover individual	3
8	Ben	efit and contract type (check all applicable boxes)								
	a	K Health (other than dental or vision)	b	Dental	С	Visi	ion		d Life insurance	
	еĪ	Temporary disability (accident and sickness)	f	Long-term disability	∕ q [	Sup	oplemental unemp	oloyment	<b>h</b> X Prescription drug	
	ιĒ	Stop loss (large deductible)	iv	HMO contract	k	_	O contract	,	I Indemnity contract	
			J 21				o contract			
	m	Other (specify)								
9	Expe	erience-rated contracts:								
Ŭ		Premiums: (1) Amount received			9a(1)				-	
		(2) Increase (decrease) in amount due but unpaid			9a(2)					
		(3) Increase (decrease) in unearned premium res			9a(3)					
		(4) Earned ((1) + (2) - (3))		-				9a(4)		0
	b	Benefit charges (1) Claims paid			9b(1)					
		(2) Increase (decrease) in claim reserves			9b(2)					
		(3) Incurred claims (add (1) and (2))						9b(3)		0
		(4) Claims charged						9b(4)		
	С	Remainder of premium: (1) Retention charges (o	n an a	accrual basis)						
		(A) Commissions			9c(1)(A)					
		(B) Administrative service or other fees			9c(1)(B)					
		(C) Other specific acquisition costs			9c(1)(C)					
		(D) Other expenses			9c(1)(D)					
		(E) Taxes			9c(1)(E)					
		(F) Charges for risks or other contingencies			9c(1)(F)					
		(G) Other retention charges			9c(1)(G)					
		(H) Total retention		_	_			9c(1)(H)		0
		(2) Dividends or retroactive rate refunds. (These	amou	ints were paid in	cash, or	credit	ted.)	9c(2)		
	d	Status of policyholder reserves at end of year: (1	) Amo	unt held to provide b	enefits afte	r retire	ement	9d(1)		
		(2) Claim reserves						9d(2)		
		(3) Other reserves						9d(3)		
	е	Dividends or retroactive rate refunds due. (Do no	ot incl	ude amount entered	in line <b>9c(2</b> )	<b>)</b> .)		9e		
10	) No	nexperience-rated contracts:								
	а	Total premiums or subscription charges paid to c	arrier					10a	1,656,	921
	b	If the carrier, service, or other organization incurr	ed an	y specific costs in co	nnection wi	ith the	acquisition or			
		retention of the contract or policy, other than repo	orted i	n Part I, line 2 above	e, report am	ount		10b		

Part IV Provision of Information					
11	Did the insurance company fail to provide any information necessary to complete Schedule A?	Yes	X No		
12	If the answer to line 11 is "Yes," specify the information not provided.				



### **Report to the Board of Directors**

Agenda Item Number: <u>E-4</u> Board of Directors' Meeting for: <u>May 8, 2025</u> Author: Irene Yang

**DATE:** April 30, 2025

TO: Board of Directors

**FROM:** Irene Yang, Human Resources Director

SUBJECT: 2025-2026 Workers' Compensation Renewal

### I. <u>RECOMMENDATION:</u>

Review and consider approving the Workers' Compensation coverage under Service American Indemnity Company and broker's consulting fee.

### II. <u>SUMMARY.</u>

CAPMC's Workers' Compensation Insurance Broker, Heffernan Insurance Brokers (HIB) recommended to consider accepting Service American Indemnity (Tangram Insurance Services) for the coverage effective June 1, 2025, to June 1, 2026.

### III. DISCUSSION.

A. Marketing results are: Service American Indemnity Company(Tangram) \$410,175

Berkshire Hathway Homestate Companies	\$500,000
ICW Group	Declined
Comp West	\$500,000
State Fund	\$575,000
Care West	Declined
Employers Insurance	Declined
Church Mutual	Declined

- B. Heffernan Insurance Brokers (HIB) proposed to accept Service American Indemnity Company under the group of Tangram Insurance Services because:
  - i. It wants to continue providing service with us, and it provides a lower premium compared to other carriers.
  - ii. Tangram is based in Petaluma, California that is specialized in niche industry, notably in social services industries. It has been in business since 1999 and has written more than \$100M total premium across our national programs.

- iii. Insured employers will have full access to a dedicated team, complimentary nurse triage, online access to claims, claims reviews and stewardship reports. The nurse triage service will change from Medcore and Service Insurance Companies.
- iv. Tangram will tailor loss control services to meet specific needs; services will include onsite survey, consultation, training, safety review and development, return to work program assistance.
- v. Tangram has an "A++" rating under A.M. Best standard.
- C. The experience modification rate decreases from 1.72 to 1.49 this renewal; it is a change of 23 points due to the decrease in claims.
- D. The renewal rate increase is due to an 11% increase in payroll from 2024 to 2025.
- E. Heffernan Insurance Broker's consulting fee is \$5,000. This fee provides webinar training, legislation updates, issuing certificates of insurance, accessing risk management centers for safety training materials, reviewing and managing claims and providing loss control supports.
- IV. <u>FINANCIAL IMPACT</u>: Funds are allocated in the appropriate budgets for the year 2025-2026.

### **PROPOSAL OF INSURANCE**

### PREPARED FOR COMMUNITY ACTION PARTNERSHIP OF MADERA COUNTY



Because You're Different

### PRESENTED BY

Brian O'Callaghan Senior Vice President (925) 942-4606 BrianOC@heffins.com

Jessica Musso Account Manager (925) 386-3179 JessicaMu@heffins.com

### ADDRESS

(WC) Heffernan Insurance Brokers 1350 Carlback Avenue Walnut Creek, CA 94596

#### INFORMATION

WWW.HEFFINS.COM LICENSE # 0564249 (925) 934-8500 (925) 934-8278 DATE PREPARED

4/30/2025

## YOUR HEFFERNAN SERVICE TEAM

SERVICING OFFICE	1350 CARLBACK AVENUE WALNUT CREEK, CA 94596						
PRODUCER	Brian O'Callaghan	BrianOC@heffins.com	(925) 942-4606				
	Facilitate marketing and carrier negotiations, assess client exposures, and analyze coverages. Work closely with Account Manager to assure proper servicing of account.						
ACCOUNT MANAGER	Jessica Musso Jessica Mu@heffins.com (925) 386-3179						
	Marketing of renewals, including negotiate terms, conditions, coverages and pricing, premium/coverage comparisons, policy changes, invoicing, facilitate premium financing, coverage questions, claim reporting and claim questions, day to day handling of all aspects of your account.						
ASSOCIATE ACCOUNT MANAGER	Karla Esch KarlaE@heffins.com (925) 280-2202						
	Assist Account Manager with processing of audits, endorsements, certificates, auto ID cards, and all other aspects of account servicing.						

# **AUTHORIZATION TO BIND COVERAGE**

This is a coverage summary, not a legal contract. This summary is provided to assist in your understanding of your insurance program. Please refer to the actual policies for specific terms, conditions, limitations, and exclusions that will govern in the event of a loss.

This proposal for insurance coverage is based on the information submitted by Community Action Partnership of Madera County. Please indicate your acceptance of it by marking the appropriate line below.

Proposal accepted as outlined.

Proposal accepted with changes listed below:

### PLEASE NOTE:

- Your coverage will not be bound unless and until the indicated binding requirements are met.
- Higher limits of insurance and different types of coverage may be available, please contact us.
- I consent to electronic delivery of insurance policies and disclosures.

Acknowledged and Agreed:

NAME

SIGNATURE

TITLE

DATE SIGNED

EMAIL ADDRESS

# NAMED INSURED AND LOCATIONS

### NAMED INSURED

ENTITY	WORKERS COMPENSATION		
Community Action Partnership of Madera County	Х		

### LOCATIONS

LOC #	BLDG #	ADDRESS
1	1	1225 GILL AVENUE, MADERA, CA 93637
2	1	1777 THOMAS CONBOY, FIREBAUGH, CA 93622
3	1	18849 W. EXCELSIOR ROAD, FIVE POINT, CA 93624
4	1	435 SORENSON, MENDOTA, CA 93640
5	1	315 ADAMS STREET, ORANGE COVE, CA 93646
6	1	12898 S. FOWLER AVE, SELMA, CA 93662
7	1	265 HOSPITAL DRIVE, CHOWCILLA, CA 93610
8	1	2236 TOZER AVE, MADERA, CA 93638
9	1	29551 AVENUE 8, MADERA, CA 93638
10	1	1112 S A STREET, MADERA, CA 93638
11	1	22850 ROAD 19 ½, CHOWCILLA, CA 93610
12	1	29171 DESHA STREET, MADERA, CA 93638
13	1	131 MACE STREET, MADERA, CA 93638
14	1	33087 ROAD 228, NORTH FOLK, CA 93643
15	1	40094 INDIAN SPRINGS ROAD, OAKHURST, CA 93644
16	1	11777 WOOD WARD WAY, MADERA, CA 93637
17	1	838 LILY STREET, MADERA, CA 93638
18	1	917 E. OLIVE AVE, MADERA, CA 93638
19	1	101 ADELL STREET, MADERA, CA 93638
20	1	1901 CLINTON AVE, MADERA, CA 93638
21	1	510 SOUTH G STREET #102, MADERA, CA, 93637
22	1	VICTIM SERVICE SHELTER, MADERA, CA
23	1	1501 N. DEL ALTAIR, REEDLEY, CA 93654
24	1	75 E. ADELL STREET, MADERA, CA 93637
25	1	14143 ROAD 28, MADERA, CA 93637

# NAMED INSURED AND LOCATIONS

LOC #	BLDG #	ADDRESS
26	1	201 SOUTH B STREET, MADERA, CA 93638
27	1	49269 GOLDEN OAK DRIVE SUITE 200, OAKHURST, CA 93644
28	1	228 TRINITY AVENUE, CHOWCHILLA, CA 93610
29	1	28219 AVENUE 14, MADERA, CA 93638
30	1	209 EAST 7 <sup>TH</sup> STREET, MADERA, CA 93638
31	1	325 S. PINE STREET SUITE 103, MADERA, CA 93637
32	1	812 W. YOSEMITE AVE #101 AND #102, MADERA, CA 93637
33	1	675 S. PINE STREET SUITE 101, MADERA, CA 93637
34	1	675 S. PINE STREET SUITE 106, MADERA, CA 93637
35	1	528 NOBLE STREET, MADERA, CA 90837
36	1	690 NOBLE STREET, MADERA, CA 90837
37	1	504 S. G STREET #104, MADERA, CA 93637
38	1	506 S. G STREET #102, MADERA, CA 93637
39	1	675 S. PINE STREET SUITE 103, MADERA, CA 93637
40	1	675 S. PINE STREET SUITE 104, MADERA, CA 93637
41	1	506 S. STREET #204, MADERA, CA 93637

### **MAILING ADDRESS**

1225 Gill Avenue, Madera, CA 93637

### **PRIMARY CONTACT**

Irene Yang

### **PREMIUM SUMMARY**

COVERAGE	CARRIER	POLICY TERM	EXPIRING PREMIUM	RENEWAL PREMIUM
Workers' Compensation	Service American Indemnity Company (Tangram)	6/1/2025- 6/1/2026	\$349,732 Premium \$21,158 Assessments	\$390,503 Premium \$19,672 Assessments
Heffernan Service Fee	ffernan Service Fee -		\$5,000	\$5,000
Tota	\$375,890	\$415,175		

	Limits of Insurance			Limits of Insurance	
Coverages	2024-2025 Expiring Polcy Term			2025-2026 Renewal Polcy Term	
Workers Compensation	Tangram		Γ	Tangram	
Employers Liability Limit	\$	1,000,000		\$ 1,000,000	
Workers Compensation	St	atutory limits		Statutory limits	
PAYROLL					
8742 CA	\$	1,662,888		\$ 1,928,286	16%
8810 CA	\$	3,879,071		\$ 4,192,232	8%
9059 CA	\$	8,325,779		\$ 9,017,048	8%
8804 CA	\$	750,434		\$ 808,023	8%
Payroll Totals	\$	14,618,172		\$ 15,945,589	9%
BASE RATES					
8742 CA	\$	0.46		\$ 0.47	2%
8810 CA	\$	0.33	- F	\$ 0.33	0%
9059 CA	\$	3.02		\$ 2.97	-2%
8804 CA	\$	3.88		\$ 4.22	9%
EXPERIENCE MODIFICATION			Ē		
California ExMod		172%		149%	-13%
PREMIUM	\$	349,732	F	\$ 390,503	12%
TAXES & FEES	\$	21,158		\$ 19,672	-7%
WORKERS COMPENSATION TOTAL PREM	\$	370,890		410,175	11%

#### **PAYMENT OPTIONS**

\*Monthly Reporting (0% Deposit)

\*23,062 Down Payment

#### **QUOTE CONDITIONS**

Required copy of this proposal with coverage options, changes and deletions shown on the proposal along with the Signed Authorization to Bind Coverage is required prior to binding coverage.

Signed Acord Application

Signed Additional Service Fee Agreement

### **PREMIUM SUMMARY**

	<b>INFORMATION</b>
INPURIANT	INFURIVIATION

If the insurance carrier issues a Notice of Cancellation, all open items such as sales/payroll reports, premiums due etc., MUST be sent to the insurance carrier PRIOR to the Cancellation date for the policy to be reinstated. MOST insurance carriers now only send out one notice of cancellation and if all items are not met, no further notice is sent to you AND your policy will have cancelled.

Should you (the insured) elect to cancel your policy mid-term, you may be charged a short-rate cancellation penalty as determined by the insurance carrier regardless of the reasons to cancel. Please read your policy and endorsements for cancellation provisions.

Please refer to the policy for a complete list of exclusions, warranties, endorsements, and limitations.

We recommend that you keep a copy of your policy (ies) and endorsements. Heffernan Insurance Brokers' retention policy is five (5) years from the expiration date of the policy as required by The Department of Insurance.

Insurance carriers are rated by AM Best for financial Solvency. AM Best ratings are included in the above as of April 30, 2025. For the most current insurance company rating information, please go to www.ambest.com

It is the policy of the Heffernan Insurance Brokers to discourage the use of carriers whose Best Rating is less than B+. If you are offered a quote with a carrier rated lower than B+, it is typically the only viable option we could obtain.

If you are offered a quote for less than B+ rated, then you will be required to sign an authorization to bind with a carrier less than B+ rated except for California State Compensation Insurance Fund for Workers Compensation as they withdrew from AM Best Rating.

### **MINIMUM EARNED PREMIUM**

### <mark>\*\$1,000 Fee</mark>

Please be advised that this quote will expire on the expiration date of your current coverage. For new coverage the quote will expire on the date determined by the Insurance Company.

### **MARKETING ANALYSIS**

INSURANCE CARRIER	QUOTE	NOTES
ВННС	Quoted	\$500,000 Annual Premium
ICW Group	Declined	Operations do not fit guidelines
Comp West	Quoted	\$500,000 Annual Premium
State Fund	Quoted	\$575,000 Annual Premium
Care West	Declined	Could not compete
Employers Insurance	Declined	Operations do not fit guidelines
Church Mutual	Declined	Operations do not fit guidelines

### WORKERS COMPENSATION COVERAGE

**ISSUING COMPANY:** Service American Indemnity Company **POLICY TERM:** 6/1/2025 to 6/1/2026

### **3.A. COVERED STATES**

CA

### 3. B. LIABILITY LIMITS

COVERAGE DESCRIPTION	LIMITS
Employers Liability – Bodily Injury by Accident - Each Accident	\$1,000,000
Employers Liability – Bodily Injury by Disease - Policy Limit	\$1,000,000
Employers Liability – Bodily Injury by Disease - Each Employee	\$1,000,000

Experience Modification Factor The Experience Modification used in preparing this quote is: 1.49

### **CLASSIFICATION SCHEDULE**

LOC.	CLASS DESCRIPTION	CLASS CODE	CURRENT PAYROLL	BASE RATE	PREMIUM	NET RATE
1	Salespersons	8742	\$1,928,286	0.47	\$9,063	0.56
1	Social Rehab Facilities	8804	\$808,023	4.22	\$34,099	5.03
1	Clerical	8810	\$4,192,232	0.33	\$13,834	0.39
1	Day Care Centers	9059	\$9,017,048	2.97	\$267,806	3.54

3,573	0.011	9812	Employers Liability (in 000's) Limit: 1,000/1,000/1,000	
328,375			Total Unmodified Premium	
160,904	1.490	9898	Experience Mod Final	
489,279			Total Modified Premium	
-48,928	0.90	9 <mark>1</mark> 38	Territory Modification	
440,351			Standard Premium	
-53,238		0063	Premium Discount	
200		0900	Expense Constant	
160,904 489,279 -48,928 440,351 -53,238		9138 0063	Experience Mod Final Total Modified Premium Territory Modification Standard Premium Premium Discount	Experience Mod Total Modified Pr Territory Modifica Standard Premiu Premium Discour

### WORKERS COMPENSATION COVERAGE

Terrorism	9740	0.0100		1,595
Catastrophe (other than Certified Acts of Terrorism)	9741	0.0100		1,595
Total Estimated Premium			390,503	

Five Year Loss Summary										
Policy			Total #						_	
Year	Carrier	ExMod	of Claims	Open Claims	Closed Claims	Total Paid	Total Reserved	Total Incurred	Premium	Loss Ratio
2024	Tangram	172%	30	6	24	\$107,496.00	\$104,252.00	\$211,749.00	\$349,732.00	49%
2023	BHHC	179%	52	2	50	\$167,041.98	\$107,234.75	\$274,276.73	\$342,668.00	39%
2022	BHHC	154%	43	0	43	\$37,508.13	\$0.00	\$37,508.13	\$329,108.00	0%
2021	BHHC	104%	50	3	47	\$187,342.25	\$132,642.48	\$319,984.73	\$277,686.00	41%
2020	BHHC	124%	33	1	32	\$215,499.20	\$22,632.85	\$238,132.05	\$323,689.00	10%
	Totals	N/A	208	12	196	\$714,887.56	\$366,762.08	\$1,081,650.64	\$1,622,883.00	34%

### WAIVER OF SUBROGATION

Charge 5% for specific waiver or 2% blanket waiver

### **IMPORTANT INFORMATION**

This policy is subject to audit at expiration to verify your actual payroll(s). An additional or return premium may result from this audit.

If an individual, partner, owner or officer is not eligible to be covered or wants to be excluded from Workers' Compensation and Employer's Liability coverage, we suggest that they purchase life, health, and disability insurance. Your personal health insurance MAY not pay for any WORK RELATED injury or disease. Please consider this before choosing to be excluded from coverage on your Workers' Compensation policy.

Independent Contractors and Subcontractors – at the final audit, the insured must provide certificates of workers' compensation insurance for all Subcontractors and Independent Contractors utilized during the policy term. In the event, any form of this documentation is not available for review or deemed otherwise insufficient, amounts paid to these subcontractors or independent contractors will be included as payroll and utilized in the calculation of the final audit premium.

### HEFFERNAN INSURANCE BROKERS DATA COLLECTION & DISCLOSURE INFORMATION

This notice describes our policy on collection and disclosure of your information.

### **Categories of Information Collected and May Be Disclosed:**

We obtain most of the information directly from you. We may collect and disclose the following non-public personal information about you for the purpose of obtaining insurance products and services on your behalf:

- Your business dealings with us and other companies.
- Information about your transactions with us, our affiliates, or others such as your policy coverage, premiums, and payment history.
- Information you provide us on applications or other forms such as your name, address, Federal ID Number or Social Security number, assets, drivers' license numbers and drivers' Motor Vehicle Records.

### To Whom Information is Disclosed:

We disclose your information to other parties to help us fulfill our obligations to you; this includes disclosure to:

- Insurance carriers, wholesalers, MGAs for the purpose of obtaining insurance for you.
- A third-party partner to assist in administrative tasks and projects on behalf of you and Heffernan.
- A risk and insurance benchmarking organization that aggregates information in their database to give us access to resources so we can better serve you and to fulfill our contractual obligation.
- Opt Out: If you do not want us to disclose any of your information to the benchmarking company, this can be stated on the Authorization to Bind document.

**Commissions.** The insurer that underwrites your policy generally pays our firm a sales commission. For our efforts, we are compensated primarily by standard commissions. Standard Commissions are based on the commission schedules developed by each insurance company and calculated as a percentage of the premium. This commission percentage is set by the insurance company, not by us, and is included as part of the insurance premium you pay.

**Commissions and Incentive Compensation from Insurance Companies.** We may also receive compensation through incentive or profit-sharing arrangements with insurance companies with which we place business. Eligibility for and the amount of contingency compensation is based on pre-established thresholds that consider the overall profitability of the business we place with insurers and other factors. This incentive compensation is never tied to any individual policyholder, and there is no meaningful method to determine in advance the impact that any policy has on these payments. If in a given year our firm does not meet the profitability thresholds outlined above, we are not eligible for any incentive compensation.

Additional Services Fees. Heffernan Insurance Brokers may charge fees for additional services in addition to the compensation & commissions described above, for our additional services. Additional Services Fees charged to YOU, if any, have been disclosed to YOU in this proposal, and you will acknowledge by signing our Additional Services Agreement included in this proposal.

# **CLAIMS REPORTING INFORMATION**

Failure to provide notice of a Claim or an Incident to your insurance carrier can result in denial of coverage for both expiring and renewal policies.

### **IMPORTANT FACTS TO KNOW**

Every insurance policy is written differently. To ensure you receive the full benefits of the insurance policy you have purchased it is vitally important that you read and understand your policy including incident/claim reporting, definition of claim/incident, conditions of reporting etc. The below definitions of incidents or claims are only examples and are not intended to be inclusive of every matter that could rise to an incident/claim. If in doubt as to whether a situation should be reported, contact us or your insurance carrier.

The policy contract is between you and your insurance company, so while we can assist you in reporting your claims you should always seek the advice of your attorney.

The definition of an incident or claim may include (refer to your policy):

- Any knowledge by <u>anyone in your company of a claim **or** any incident that may result in a claim;</u>
- Demand for monetary or non-monetary relief;
- Notice that a non-employee, such as a customer or client, intends to hold you responsible for Third Party Discrimination;
- Civil, criminal, administrative, regulatory or mediation/arbitration proceedings, etc.
- Workers Compensation:
  - Lawsuits filed by an injured worker, or their family, against our client alleging negligence or discrimination
  - Penalty Petitions, under a State's Workers' Compensation Statute or Federal Statute, alleging the employer's unsafe actions knowingly caused an injury to occur or that they discriminated against an employee for filing a workers' compensation claim (For example a 132A or Serious & Willful under California's workers' compensation Statute
  - Any lawsuits related to a Workers Compensation claim or claimant, and/or when a Workers Compensation claim includes allegations of wrongful termination, discrimination, sexual harassment, a written demand for modified or alternative work, or any such employment related allegations.

There are some other types of governmental or regulatory matters that may qualify as a Claim or Notice of Incident depending upon the terms of the policy, especially:

- Formal investigations
- Any communication received from the EEOC, DFEH or ANY State Regulatory Agency or similar Federal, State or local administrative proceeding.
- Often these communications may simply state that they are investigating a matter, and no action is required on your part. This is notice of an incident and MUST be reported to your carrier.

# **CLAIMS REPORTING INFORMATION**

Be sure you read and understand all of your policies' definitions of claim or incident and their reporting requirements:

- Any situation meeting your policy's definition of a claim or incident during the policy period should be reported to the carrier immediately.
- You should make certain that those individuals in your company who are responsible for receiving notification of Claims are aware of the procedures in the event of a Claim, those procedures are set forth in detail in the notice provisions of your policy.
- If a claim or incident is presented to you after the policy has expired there may be specific provisions that permit noticing the claim after expiration.

Be sure that you communicate with Heffernan Insurance Brokers and state on all applications all incidents, claims or potential claims.

Be aware of policy quote conditions that require all incidents be reported prior to binding coverage. If you report it after the policy is bound, the insurance carrier may void the binder or change their terms and conditions of the policy. In addition, the claim may not be covered under expiring policy or the renewal policy.

During Renewal Process, be sure that you report all claims, all incidents and all potential claims within the policy period to your carrier as there will be no coverage if the claim is submitted in the subsequent (renewal) policy period if you knew about it during the expiring policy term.

### **VERY IMPORTANT TO REMEMBER**

- Do not appoint defense counsel or incur any legal costs without consent from your insurance carrier. Pursuant to the terms of the policy, carrier may have the right to either appoint counsel or in some instances, approve your choice of counsel. Most carriers will not pay for attorneys' fees incurred prior to giving the carrier notice of the claim.
- Do not enter into settlement negotiations without consent from your insurance carrier.

### HEFFERNAN INSURANCE BROKERS ADDITIONAL SERVICES AGREEMENT

### **ADDITIONAL SERVICE FEE**

Client acknowledges the additional services fee disclosure and consent for the fee is given as evidenced by the signature below.

This agreement shall become operative on \_\_\_6/1/2025\_\_\_\_\_\_ (date) and shall continue for one year.

Heffernan Insurance Brokers agrees to provide the following to Client:

- Consultative Services
- Invitations to HIB's, and its vendors', webinars, and seminars
- Informative mailings
- Access to HIB247, HIB's client portal with visibility to policy information, documents, and certificates of insurance
- Access to Risk Management Center provided by KPA
- Access to various on-line software products
- Workers Compensation Claims Management
- Loss Control
- HR Consulting
- Return to Work Program
- Access to vendor partner providing both telephonic and on-site medical triage service

If client cancels their insurance policies midterm for any reason, services as outlined in this document shall cease immediately.

Client agrees to pay Heffernan Insurance Brokers a fee for these additional services in the amount of \$5,000\_\_\_\_\_. This fee is fully earned and nonrefundable upon execution of this agreement. Heffernan Insurance Brokers may also receive compensation from the insurers of insurance policies.

Client's Signature

Date



### **Report to the Board of Directors**

Agenda Item Number: <u>E-5</u> Board of Directors Meeting for: <u>May 8, 2025</u> Author: <u>Kelly Ryan</u>

- DATE: May 1, 2025
- TO: Board of Directors
- FROM: Mattie Mendez, Executive Director
- SUBJECT: 2024 Impact Report for Community Action Partnership of Madera County, Inc. (CAPMC)

### I. <u>RECOMMENDATION</u>:

Review and consider approving the CAPMC 2024 Impact Report.

### II. <u>SUMMARY:</u>

The 2024 Annual Impact Report serves as a comprehensive overview of the achievements, challenges, program participant success stories, and the overall impact of CAPMC.

### III. DISCUSSION:

- The 2024 Impact Report represents a comprehensive assessment of activities, achievements, program participant success stories, and the impact CAPMC has had over the past year.
- It provides a detailed overview of progress towards CAPMC's mission highlighting key accomplishments.
- Through quantitative data and qualitative insights, the report showcases CAPMC's commitment to making a positive difference in the communities we serve.
- The report serves as a valuable tool for staff, community partners, and stakeholders to understand the breadth and depth of CAPMC's impact.
- The 2024 Impact Report will be distributed at the Board of Directors meeting.

### IV. FINANCING:

Not Applicable

DEPARTMENT/ PROGRAM TITLE	AMOUNT FUNDED	FUNDS SPENT YTD	BUDGET % YTD	ACTUAL% YTD	PROGRAM DESCRIPTION
CSBG 01/01/2025 - 12/31/2025 - ABOUT 50% AUTHORIZED 218	318,202.00	51,450.53	33.33%	 16.17%	Provide social service programs and administrative expenses
CSBG DISCRETIONARY NO CONTRACT YET 217	0.00	0.00	#DIV/0!	#DIV/0!	Provide social service programs and administrative expenses
HEAD START & CHILD DEVELOPMENT			·		
HEAD START REGIONAL 06/1/24 - 05/31/25 311/380	4,499,507.00	4,162,599.64	91.67%	92.51%	Provide HS services to low income preschool children and families
HEAD START T/TA 06/1/24 - 05/31/25 310	46,025.00	46,025.00	91.67%	100.00%	Provide training for staff and parents
EARLY HEAD START REGIONAL 06/1/24 - 05/31/25 312	823,578.00	782,855.24	91.67%	95.06%	Provide early HS services to 50 low income infant, toddlers and pregnant women
EARLY HEAD START T/TA 06/1/24 - 05/31/25 309	13,373.00	13,373.00	91.67%	100.00%	Provide training for staff and parents
MADERA STATE CSPP/RHS LAYERED 07/01/24 - 06/30/25 319	1,091,317.00	939,484.52	83.33%	86.09%	Provide child care services to HS preschool children and families
CHILD & ADULT CARE FOOD PROGRAM 10/01/24 - 09/30/25 390	602,510.00	259,264.11	58.33%	43.03%	Provide funds to serve hot meals to HS & state childcare children
MADERA MIGRANT HEAD START 03/01/25 - 02/28/26 - 50% CONTRACT 321/362	3,151,611.00	355,209.91	16.67%	11.27%	Provide HS services to 479 migrant and seasonal children and families
MADERA MIGRANT HS TRAINING 03/01/24 - 02/28/25 - 50% CONTRACT 320	15,089.00	18,889.04	116.67%	125.18%	Provide training for staff and parents
MADERA MIGRANT CHILD CARE - PART YEAR 07/01/24 - 06/30/25 322/324	992,716.00	732,285.89	83.33%	73.77%	Provide child care services to migrant eligible infant and toddlers
MADERA MIGRANT CHILD CARE SPECIALIZED SERVICES 07/01/24 - 06/30/25 325	169,936.00	133,192.45	83.33%	78.38%	Provide start up funding for supplies and staff to provide services to migrant eligible infant and toddlers
REGIONAL MADERA COE QUALITY COUNTS 06/01/2024 - 05/31/2025 356	150,862.00	0.00	91.67%	0.00%	Provide low-income children high quality preschool programs with focus on child development, teaching, and program/environment quality

DEPARTMENT/ PROGRAM TITLE	AMOUNT FUNDED	FUNDS SPENT YTD	BUDGET % YTD	ACTUAL% YTD	PROGRAM DESCRIPTION
FRESNO MIGRANT HEAD START 09/01/24 - 08/31/25 331	======================================	======================================	66.67% <b>66</b> .67%	62.51%	Provide HS services to to 469 migrant children and families
FRESNO MIGRANT HS -TRAINING 09/01/24 - 08/31/25 330	82,690.00	55,173.07	66.67%	66.72%	Provide training for staff and parents
FRESNO MIGRANT FRESNO COE QUALITY COUNTS 09/01/2024 - 08/31/2025 351	425,745.25	0.00	66.67%	0.00%	Provide low-income children high quality preschool programs with focus on child development, teaching, and program/environment quality
DSS STRENGTHENING FAMILIES 07/01/2024 - 06/30/2025 371	277,136.00	229,714.91	83.33%	82.89%	Provides training and education to parentx to strengthen family relationships

DEPARTMENT/ PROGRAM TITLE	AMOUNT FUNDED	FUNDS SPENT YTD	BUDGET % YTD	ACTUAL% YTD	PROGRAM DESCRIPTION
SOURCE & REFERRAL:					
CCDF-HEALTH & SAFETY 07/01/24 - 06/30/25 411	7,997.00	5,046.22	83.33%	63.10%	Training and supplies for child care providers
R & R GENERAL 07/01/24 - 06/30/25 401	294,215.00	231,213.35	83.33%	78.59%	Provide resources and referrals regarding child care and related issues
EMERGENCY CHILD CARE BRIDGE PROGRAM 07/01/24 - 06/30/25 407	307,121.00	211,122.55	83.33%	68.74%	Provide subsidized child care for eligible foster children
CHILD CARE INITIATIVE PROJECT 07/01/24 - 06/30/25 424	55,064.00	39,705.37	83.33%	72.11%	Recruiting and training child care providers for infants and toddlers
ALTERNATIVE PAYMENT 07/01/23 - 06/30/25 429	8,144,824.00	3,781,644.99	91.67%	46.43%	Provide subsidized child care for eligible families
ALTERNATIVE PAYMENT STAGE 2 07/01/24 - 06/30/25 427	1,785,876.00	1,018,419.96	83.33%	57.03%	Provide subsidized child care for eligible families
ALTERNATIVE PAYMENT STAGE 3 07/01/24 - 06/30/25 428	1,245,481.00	847,972.58	83.33%	68.08%	Provide subsidized child care for eligible families

DEPARTMENT/ PROGRAM TITLE	AMOUNT FUNDED	FUNDS SPENT YTD	BUDGET % YTD	ACTUAL% YTD	PROGRAM DESCRIPTION
TIM SERVICES:					
RSVP/CALOES (10/01/24 - 09/30/25) 500	340,538.00	189,772.21	58.33%	55.73%	Assist victims of sexual assault
VICTIM WITNESS/CALOES (10/01/24 - 09/30/25) 501	442,782.00	206,952.14	58.33%	46.74%	Assist victims of crime
SHELTER-BASED DOMESTIC VIOLENCE (10/01/24 - 09/30/25) 533	537,587.00	272,781.33	58.33%	50.74%	Provide shelter services for domestic violence victims
DOM. VIO. MARRIAGE LICENSE (07/01/24 - 06/30/25) 502	22,000.00	292.32	83.33%	1.33%	Provides shelter and services to domestic violence victims
DOMESTIC VIOLENCE RESTITUTION (07/01/24 - 06/30/25) 504	4,000.00	0.00	83.33%	0.00%	Provides shelter and services to domestic violence victims
VSC DOMESTIC VIOLENCE GENERAL FUND (07/01/24 - 06/30/25) DONATIONS ONLY 507/525	2,000.00	0.00	83.33%	0.00%	Assist victims of domestic violence
VICTIM SERVICES CENTER FUND (07/01/24 - 06/30/25) DONATIONS ONLY 510	2,500.00	1,026.51	83.33%	41.06%	Assist with program operations for all Victim Services clients
UNSERVED/UNDERSERVED VICTIM ADVOCACY & OUTREACH (01/01/25 - 12/31/25) 508	196,906.00	43,661.87	33.33%	22.17%	Assist unserved/underserved, primarily Hispanic, victims of crime
TRANSITIONAL HOUSING (01/01/25 - 12/31/25) 531	135,000.00	29,463.44	33.33%	21.82%	Provide long-term shelter services for domestic violence and human trafficking victims
UTH AND SPECIALIZED SERVICES:					
CHILD ADVOCACY CENTER (07/01/24 - 06/30/25) 516	1,000.00	0.00	83.33%	0.00%	Provide child sexual assault interviews
CHILD ADVOCACY CENTER (KC) PROGRAM CALOES (04/01/2025 -03/31/2026) 535	200,000.00	15,083.78	8.33%	7.54%	Provide funding to operate child advocacy center and provide child sexual assault interviews

DEPARTMENT/ PROGRAM TITLE	AMOUNT FUNDED	FUNDS SPENT YTD	BUDGET % YTD	ACTUAL% YTD	PROGRAM DESCRIPTION
COMMUNITY SERVICES - EMERGENCY & OTHER SERVICES:					
FEMA NO CONTRACT YET 205 OR 235	0.00	0.00	#DIV/0!	#DIV/0!	Administration of the FEMA program
E.C.I.P./LIHEAP (11/01/23 - 06/30/25) 207	885,225.00	820,784.68	90.00%	92.72%	Assistance for low income clients for energy bills and weatherization services
E.C.I.P./LIHEAP (11/01/24 - 06/30/26) 208	729,173.00	556,551.73	30.00%	76.33%	Assistance for low income clients for energy bills and weatherization services
MADERA MENTAL HEALTH PROPERTY MGMT (07/01/24 - 06/30/25) 216	50,000.00	40,998.14	83.33%	82.00%	Provides property management services for the County of Madera Behavioral Health
EMERGENCY SUPPLEMENTAL LOW INCOME HOME ENERGY ASSISTANCE PROGRAM (ESLIHEAP) (04/15/23 - 05/31/25) 282	149,644.00	148,587.46	96.00%	99.29%	Assistance for low income clients for energy bills and weatherization services

DEPARTMENT/ PROGRAM TITLE	AMOUNT FUNDED	FUNDS SPENT YTD	BUDGET % YTD	ACTUAL% YTD	PROGRAM DESCRIPTION
COMMUNITY SERVICES - HOMELESS PROGRAMS:					
VALLARTA/THE GONZALEZ FAMILY DONATION (07/01/24 - 06/30/25) 221	465.34	0.00	83.33%	0.00%	Provides funding for homeless support and emergency services
SHUNAMMITE PLACE (11/01/24 - 10/31/25) 224	848,597.00	349,332.63	50.00%	41.17%	Provides permanent supportive housing for homeless people with disabilities
ONE-TIME FUNDING HOMELESSNESS (07/01/23 - 06/30/25) 226	24,418.00	8,837.38	91.67%	36.19%	Provides funding for homeless support and emergency services
CITY OF MADERA - CDBG (07/01/24 - 06/30/25) 231	20,000.00	20,065.69	83.33%	100.33%	Provides funding for Fresno- Madera Continuum of Care and homeless support
HOMELESS HOUSING, ASSISTANCE & PREVENTION (HHAP) BEHAVIORAL HEALTH (06/01/20 - 6/30/25) 246	411,434.26	411,434.26	96.72%	100.00%	Provides rental assistance and rapid rehousing, outreach and coordination, prevention and shelter diversion to permanent housing
HOMELESS HOUSING, ASSISTANCE & PREVENTION (HHAP IV) BEHAVIORAL HEALTH (01/01/24 - 6/30/27) 246	346,709.12	71,354.67	38.10%	20.58%	Provides rental assistance and rapid rehousing, outreach and coordination, prevention and shelter diversion to permanent housing
HOMELESS HOUSING, ASSISTANCE & PREVENTION (HHAP-III) BEHAVIORAL HEALTH (07/01/23 - 06/30/26) 278	526,635.86	443,048.23	61.11%	84.13%	Provides rental assistance and rapid rehousing, outreach and coordination, prevention and shelter diversion to permanent housing
HOUSING & HOMELESSNESS INCENTIVE PROGRAM (HHIP) (04/01/23 - 06/30/25) 281	250,000.00	226,541.38	92.59%	90.62%	Improves health outcomes and access to whole person care services by addressing housing insecurity and instability
HUD COORDINATED ENTRY SUPPORTIVE SERVICES HELP CENTER (11/01/24 - 10/31/25) 284	539,797.00	186,600.08	50.00%	34.57%	Provides coordinated entry supportive housing for homeless people within the FMCoC area

### Community Action Partnership of Madera County, Inc. Consolidated Statement of Financial Position by Object March 31, 2025

	This Year
Assets	
1113- CASH IN WESTAMERICA PAYROLL CK	(298,621.30)
1116- CASH IN WESTAMERICA HEAD START MONEY MARKET	2,516.76
1117- CASH IN WESTAMERICA ACCTS PAYABLE CHECKING	(346,082.56)
1122- SAVINGS - WESTAMERICA	7,636,433.88
1130- PETTY CASH	710.00
1310- GRANTS RECEIVABLE	2,515,165.35
1320- ACCOUNTS RECEIVABLE	2,476.96
1323- A/R IGNITE MY CITY CHURCH	626.77
1326- EMPLOYEE RECEIVABLES	0.00
1328- EMPLOYEE & TRAVEL ADVANCES	1,003.98
1329- ADVANCE CLEARING	6,369.27
1410- PREPAID EXPENSES	113,636.25
1420- SECURITY DEPOSITS	46,661.04
1421- WORKERS' COMP DEPOSIT	58,943.00
1450- INVENTORY	23,188.90
1512- EQUIPMENT	1,742,135.69
1513- VEHICLES	1,427,955.57
1514- BUILDINGS	4,021,500.45
1515- LAND IMPROVEMENTS	190,835.13
1516- BUILDING IMPROVEMENTS	427,857.12
1519- LAND	59,005.00
1522- ACC DEPR - EQUIPMENT	(1,079,481.74)
1523- ACC DEPR - VEHICLES	(934,489.01)
1524- ACC DEPR - BUILDINGS	(3,570,319.36)
1525- ACC DEPR - LAND IMPROVE.	(182,114.05)
1526- ACC DEPR - BUILDING IMPROVE.	(219,640.21)
1590- ROU ASSETS - OPERATING LEASES	15,880,941.00
Total Assets	27,527,213.89
Liabilities and Net Assets	
2101- ACCOUNTS PAYABLE	1,012,978.98
2111- ACCOUNTS PAYABLE - MANUAL	139,458.35
2112- ACCOUNTS PAY-FUNDING SOURCE	103,822.84
2115- A/P OTHERS	7,716.14
2121- ACCRUED PAYROLL	474,276.32
2122- ACCRUED VACATION	1,135,801.20
2123- ACCRUED PAYROLL - MANUAL	849.40
2211- FICA PAYABLE	(28,702.30)

F-4A

2213- FIT PAYABLE   (28,863.72)     2215- SIT PAYABLE   (30,202.59)     2216- SDI PAYABLE   (4,636.72)     2217- SUI PAYABLE   (1,561.82)     2220- WORKER'S COMP PAYABLE   19,542.94     2233- W/H RETIREMENT PAYABLE-ER CONTRIB   803,491.04     2232- W/H RETIREMENT PAYABLE-ER CONTRIB   803,491.04     2233- W/H RETIREMENT   (10.00)     2234- KAISER MID20   19,700.28     2244- KAISER MID20   19,700.28     2244- KAISER HIGH15   51,641.22     2248- KAISER DHMO40   4,781.84     2252- SELF INSURANCE - LIFE & ADD   (43,311.42)     2253- VISION INSURANCE PAYABLE   (24,802.31)     2254- SELF INSURANCE - DENTAL   (34,957.21)     2255- UNION DUES & FEE PAYMENTS   43.72     2258- TELEMEDICINE   (3.75)     2260- MADERA RHS PARENT GROUPS   552.34     2262- FRESNO MHS PARENT GROUPS   2.130.16     2264- KAC EMP FUND-UNIFICATION   64.15     2265- FRESNO - EDS - FUNDS   1,854.17     2266- R & R PROGRAM   3,485.67     2410- DEFERRED GRANT REVENUE   430,007.38     2600- INVESTMENT IN FIXED ASSETS   0.00	2212- FICA-MED PAYABLE	117.02
2215- SIT PAYABLE   (30,202.59)     2216- SDI PAYABLE   (4,636.72)     2217- SUI PAYABLE   (1,561.82)     2220- WORKER'S COMP PAYABLE   19,542.94     2231- RETIREMENT PAYABLE-ER CONTRIB   803,491.04     2232- W/H RETIREMENT MAYABLE-ER CONTRIB   803,491.04     2232- W/H RETIREMENT MAYABLE-ER CONTRIB   803,491.04     2233- W/H RETIREMENT MAYABLE   (10.00)     2234- KAISER MID20   19,700.28     2244- KAISER MID20   19,700.28     2244- KAISER HIGH15   51,641.22     2248- KAISER DHMO40   4,781.84     2252- SELF INSURANCE - LIFE & ADD   (43,311.42)     2253- VISION INSURANCE - DENTAL   (34,957.21)     2254- SELF INSURANCE - DENTAL   (34,957.21)     2255- UNION DUES & FEE PAYMENTS   43.72)     2260- MADERA RHS PARENT GROUPS   52.34     2262- FRESNO MHS PARENT GROUPS   2,130.16     2264- MCAC EMP FUND-UNIFICATION   64.15     2265- FRESNO - EDS - FUNDS   1,854.17     2266- R & R PROGRAM   3,485.67     2410- DEFERED GRANT REVENUE   433,007.38     2600- INVESTMENT IN FIXED ASSETS   0.00     2610- REDUCT IN INVEST IN FIXED	-	
2216- SDI PAYABLE   (4,636.72)     2217- SUI PAYABLE   (1,561.82)     2220- WORKER'S COMP PAYABLE   19,542.94     2231- RETIREMENT PAYABLE-ER CONTRIB   803,491.04     2232- W/H RETIREMENT   (10.00)     2233- W/H RETIREMENT   400.00     2243- KAISER MID20   19,700.28     2244- KAISER MID20   19,700.28     2244- KAISER HIGH15   51,641.22     2248- KAISER HOW30   27,139.22     2249- KAISER DHMO40   4,781.84     2252- SELF INSURANCE - LIFE & ADD   (43,311.42)     2253- VISION INSURANCE - DENTAL   (34,957.21)     2255- UNION DUES & FEE PAYMENTS   43.72     2256- MADERA RHS PARENT GROUPS   552.34     2260- MADERA RHS PARENT GROUPS   2,130.16     2264- MCAC EMP FUND-UNIFICATION   64.15     2265- FRESNO - EDS - FUNDS   1,854.17     2266- R & R PROGRAM   3,485.67     2410- DEFERED GRANT REVENUE   430,007.38     2600- INVESTMENT IN FIXED ASSETS   0.00     2610- REDER DERA RHS PARENT GROUPS   2430.007.38     2600- OTHER DEFERED REVENUE   430,007.38     2600- INVESTMENT IN FIXED ASSETS   0.00	2215- SIT PAYABLE	
2217- SUI PAYABLE   (1,561.82)     2220- WORKER'S COMP PAYABLE   19,542.94     2231- RETIREMENT PAYABLE-ER CONTRIB   803,491.04     2232- W/H RETIREMENT   (10.00)     2233- W/H RETIREMENT-ER403B BENEFIT   400.00     0244- KAISER MID20   19,700.28     2245- KAISER HIGH15   51,641.22     2248- KAISER DHMO40   4,781.84     2252- SELF INSURANCE - LIFE & ADD   (43,311.42)     2253- VISION INSURANCE PAYABLE   (24,802.31)     2254- SELF INSURANCE - DENTAL   (34,957.21)     2255- UNION DUES & FEE PAYMENTS   43.72     2258- TELEMEDICINE   (3.75)     2260- MADERA RHS PARENT GROUPS   2,130.16     2262- FRESNO HMS PARENT GROUPS   2,130.16     2264- MCAC EMP FUND-UNIFICATION   64.15     2265- FRESNO - EDS - FUNDS   1,854.17     2266- R & R PROGRAM   3,485.67     2410- DEFERRED GRANT REVENUE   430,007.38     2600- INVESTMENT IN FIXED ASSETS   0.00     2610- REDUCT IN INVEST IN FIXED ASSET   0.00     2610- REDUCT IN INVEST IN FIXED ASSET   0.00     2610- REDUCT IN INVEST IN FIXED ASSET   0.00     2610- REDUCT IN INVEST IN FIX	2216- SDI PAYABLE	
2220- WORKER'S COMP PAYABLE   19,542.94     2231- RETIREMENT PAYABLE-ER CONTRIB   803,491.04     2232- W/H RETIREMENT   (10.00)     2233- W/H RETIREMENT-ER403B BENEFIT   400.00     2244- KAISER MID20   19,700.28     2245- KAISER HIGH15   51,641.22     2248- KAISER DIMO40   4,781.84     2252- SELF INSURANCE - LIFE & ADD   (43,311.42)     2253- VISION INSURANCE PAYABLE   (24,802.31)     2254- SELF INSURANCE - DENTAL   (34,957.21)     2255- UNION DUES & FEE PAYMENTS   43.72     2258- TELEMEDICINE   (3.75)     2260- MADERA RHS PARENT GROUPS   2,130.16     2265- FRESNO MHS PARENT GROUPS   1,854.17     2266- R & R PROGRAM   3,485.67     2410- DEFERRED GRANT REVENUE   430,007.38     2600- INVESTMENT IN FIXED ASSETS   0.00     2610- REDUCT IN INVEST IN FIXED ASSET   0.00     269		
2231- RETIREMENT PAYABLE-ER CONTRIB   803,491.04     2232- W/H RETIREMENT   (10.00)     2233- W/H RETIREMENT-ER403B BENEFIT   400.00     2244- KAISER MID20   19,700.28     2245- KAISER HIGH15   51,641.22     2248- KAISER DHMO40   4,781.84     2252- SELF INSURANCE - LIFE & ADD   (43,311.42)     2253- VISION INSURANCE PAYABLE   (24,802.31)     2254- SELF INSURANCE - DENTAL   (34,957.21)     2255- UNION DUES & FEE PAYMENTS   43.72     2256- TRESNO MHS PARENT GROUPS   552.34     2260- MADERA RHS PARENT GROUPS   2,130.16     2264- MCAC EMP FUND-UNIFICATION   64.15     2265- FRESNO - EDS - FUNDS   1,854.17     2266- R & R PROGRAM   3,485.67     2410- DEFERRED GRANT REVENUE   430,007.38     2600- INVESTMENT IN FIXED ASSETS   0.00     2610- REDUCT IN INVEST IN FIXED ASST   0.00     2690- OPERATING LEASE LIABILITY   15,880,941.00     2690- OPERATING LEASE LIABILITY   15,880,941.00     2690- OPERATING LEASE LIABILITY   15,880,941.00		
2232- W/H RETIREMENT   (10.00)     2233- W/H RETIREMENT-ER403B BENEFIT   400.00     2244- KAISER MID20   19,700.28     2245- KAISER HIGH15   51,641.22     2248- KAISER DHM040   4,781.84     2252- SELF INSURANCE - LIFE & ADD   (43,311.42)     2253- VISION INSURANCE PAYABLE   (24,802.31)     2254- SELF INSURANCE - DENTAL   (34,957.21)     2255- UNION DUES & FEE PAYMENTS   43.72     2255- TELEMEDICINE   (3.75)     2260- MADERA RHS PARENT GROUPS   552.34     2262- FRESNO MHS PARENT GROUPS   2,130.16     2264- MCAC EMP FUND-UNIFICATION   64.15     2265- FRESNO - EDS - FUNDS   1,854.17     2266- R & R PROGRAM   3,485.67     2410- DEFERRED GRANT REVENUE   430,007.38     2600- INVESTMENT IN FIXED ASSETS   0.00     2610- REDUCT IN INVEST IN FIXED ASST   0.00     2690- OPERATING LEASE LIABILITY   15,880,941.00     2690- OPERATING LEASE LIABILITY   15,880,941.00     2000- NET ASSETS W/O DONOR RESTRICTIONS   658,101.76	2231- RETIREMENT PAYABLE-ER CONTRIB	
2233- W/H RETIREMENT-ER403B BENEFIT   400.00     2244- KAISER MID20   19,700.28     2245- KAISER MID20   19,700.28     2245- KAISER HIGH15   51,641.22     2248- KAISER LOW30   27,139.22     2249- KAISER DHMO40   4,781.84     2252- SELF INSURANCE - LIFE & ADD   (43,311.42)     2253- VISION INSURANCE - DENTAL   (24,802.31)     2254- SELF INSURANCE - DENTAL   (34,957.21)     2255- UNION DUES & FEE PAYMENTS   43.72     2258- TELEMEDICINE   (3.75)     2260- MADERA RHS PARENT GROUPS   552.34     2262- FRESNO MHS PARENT GROUPS   2,130.16     2264- MCAC EMP FUND-UNIFICATION   64.15     2265- FRESNO - EDS - FUNDS   1,854.17     2266- R & R PROGRAM   3,485.67     2410- DEFERRED GRANT REVENUE   4,30,007.38     2600- INVESTMENT IN FIXED ASSETS   0.00     2610- REDUCT IN INVEST IN FIXED ASST   0.00     2630- OPERATING LEASE LIABILITY   15,880,941.00     2400- NET ASSETS W/O DONOR RESTRICTIONS   658,101.76	2232- W/H RETIREMENT	•
2244- KAISER MID20   19,700.28     2245- KAISER HIGH15   51,641.22     2248- KAISER LOW30   27,139.22     2249- KAISER DHMO40   4,781.84     2252- SELF INSURANCE - LIFE & ADD   (43,311.42)     2253- VISION INSURANCE PAYABLE   (24,802.31)     2254- SELF INSURANCE - DENTAL   (34,957.21)     2255- UNION DUES & FEE PAYMENTS   43.72     2258- TELEMEDICINE   (3.75)     2260- MADERA RHS PARENT GROUPS   2,130.16     2264- MCAC EMP FUND-UNIFICATION   64.15     2265- FRESNO - EDS - FUNDS   1,854.17     2266- R & R PROGRAM   3,485.67     2410- DEFERRED GRANT REVENUE   4,819,276.44     2415- RESERVE ACCOUNT   66,545.00     2420- OTHER DEFERRED REVENUE   430,007.38     2600- INVESTMENT IN FIXED ASSETS   0.00     2610- REDUCT IN INVEST IN FIXED ASSET   0.00     2690- OPERATING LEASE LIABILITY   15,880,941.00     2690- OPERATING LEASE LIABILITY   15,880,941.00     2690- NET ASSETS W/O DONOR RESTRICTIONS   658,101.76	2233- W/H RETIREMENT-ER403B BENEFIT	
2245- KAISER HIGH15   51,641.22     2248- KAISER LOW30   27,139.22     2249- KAISER DHMO40   4,781.84     2252- SELF INSURANCE - LIFE & ADD   (43,311.42)     2253- VISION INSURANCE PAYABLE   (24,802.31)     2254- SELF INSURANCE - DENTAL   (34,957.21)     2255- UNION DUES & FEE PAYMENTS   43.72     2258- TELEMEDICINE   (3.75)     2260- MADERA RHS PARENT GROUPS   552.34     2262- FRESNO MHS PARENT GROUPS   2,130.16     2264- MCAC EMP FUND-UNIFICATION   64.15     2265- FRESNO - EDS - FUNDS   1,854.17     2266- R & R PROGRAM   3,485.67     2410- DEFERRED GRANT REVENUE   4,30,007.38     2600- INVESTMENT IN FIXED ASST   0.00     2610- REDUCT IN INVEST IN FIXED ASST   0.00     2610- REDUCT IN INVEST IN FIXED ASST   0.00     2690- OPERATING LEASE LIABILITY   15,880,941.00     2600- NET ASSETS W/O DONOR RESTRICTIONS   658,101.76		
2248- KAISER LOW30   27,139.22     2249- KAISER DHM040   4,781.84     2252- SELF INSURANCE - LIFE & ADD   (43,311.42)     2253- VISION INSURANCE PAYABLE   (24,802.31)     2254- SELF INSURANCE - DENTAL   (34,957.21)     2255- UNION DUES & FEE PAYMENTS   43.72     2258- TELEMEDICINE   (3.75)     2260- MADERA RHS PARENT GROUPS   552.34     2262- FRESNO MHS PARENT GROUPS   2,130.16     2264- MCAC EMP FUND-UNIFICATION   64.15     2265- FRESNO - EDS - FUNDS   1,854.17     2266- R & R PROGRAM   3,485.67     2410- DEFERRED GRANT REVENUE   4,819.276.44     2415- RESERVE ACCOUNT   66,545.00     2420- OTHER DEFERRED REVENUE   430,007.38     2600- INVESTMENT IN FIXED ASST   0.00     2610- REDUCT IN INVEST IN FIXED ASST   0.00     2690- OPERATING LEASE LIABILITY   15,880,941.00     2690- OPERATING LEASE LIABILITY   15,880,941.00     24,809,564.98   3000- NET ASSETS W/O DONOR RESTRICTIONS   658,101.76	2245- KAISER HIGH15	
2249- KAISER DHMO40   4,781.84     2252- SELF INSURANCE - LIFE & ADD   (43,311.42)     2253- VISION INSURANCE PAYABLE   (24,802.31)     2254- SELF INSURANCE - DENTAL   (34,957.21)     2255- UNION DUES & FEE PAYMENTS   43.72     2258- TELEMEDICINE   (3.75)     2260- MADERA RHS PARENT GROUPS   552.34     2262- FRESNO MHS PARENT GROUPS   2,130.16     2264- MCAC EMP FUND-UNIFICATION   64.15     2265- FRESNO - EDS - FUNDS   1,854.17     2266- R & R PROGRAM   3,485.67     2410- DEFERRED GRANT REVENUE   4,819,276.44     2415- RESERVE ACCOUNT   66,545.00     2420- OTHER DEFERRED REVENUE   430,007.38     2600- INVESTMENT IN FIXED ASSETS   0.00     2610- REDUCT IN INVEST IN FIXED ASSET   0.00     2690- OPERATING LEASE LIABILITY   15,880,941.00     Total Liabilities   24,809,564.98     3000- NET ASSETS W/O DONOR RESTRICTIONS   658,101.76	2248- KAISER LOW30	
2253- VISION INSURANCE PAYABLE   (24,802.31)     2254- SELF INSURANCE - DENTAL   (34,957.21)     2255- UNION DUES & FEE PAYMENTS   43.72     2258- TELEMEDICINE   (3.75)     2260- MADERA RHS PARENT GROUPS   552.34     2262- FRESNO MHS PARENT GROUPS   2,130.16     2264- MCAC EMP FUND-UNIFICATION   64.15     2265- FRESNO - EDS - FUNDS   1,854.17     2266- R & R PROGRAM   3,485.67     2410- DEFERRED GRANT REVENUE   4,819,276.44     2415- RESERVE ACCOUNT   66,545.00     2420- OTHER DEFERRED REVENUE   430,007.38     2600- INVESTMENT IN FIXED ASSETS   0.00     2610- REDUCT IN INVEST IN FIXED ASST   0.00     2690- OPERATING LEASE LIABILITY   15,880,941.00     Total Liabilities   24,809,564.98     3000- NET ASSETS W/O DONOR RESTRICTIONS   658,101.76	2249- KAISER DHMO40	•
2254- SELF INSURANCE - DENTAL   (34,957.21)     2255- UNION DUES & FEE PAYMENTS   43.72     2258- TELEMEDICINE   (3.75)     2260- MADERA RHS PARENT GROUPS   552.34     2262- FRESNO MHS PARENT GROUPS   2,130.16     2264- MCAC EMP FUND-UNIFICATION   64.15     2265- FRESNO - EDS - FUNDS   1,854.17     2266- R & R PROGRAM   3,485.67     2410- DEFERRED GRANT REVENUE   4,819,276.44     2415- RESERVE ACCOUNT   66,545.00     2420- OTHER DEFERRED REVENUE   430,007.38     2600- INVESTMENT IN FIXED ASSETS   0.00     2610- REDUCT IN INVEST IN FIXED ASST   0.00     2690- OPERATING LEASE LIABILITY   15,880,941.00     Total Liabilities   24,809,564.98     3000- NET ASSETS W/O DONOR RESTRICTIONS   658,101.76	2252- SELF INSURANCE - LIFE & ADD	(43,311.42)
2254- SELF INSURANCE - DENTAL   (34,957.21)     2255- UNION DUES & FEE PAYMENTS   43.72     2258- TELEMEDICINE   (3.75)     2260- MADERA RHS PARENT GROUPS   552.34     2262- FRESNO MHS PARENT GROUPS   2,130.16     2264- MCAC EMP FUND-UNIFICATION   64.15     2265- FRESNO - EDS - FUNDS   1,854.17     2266- R & R PROGRAM   3,485.67     2410- DEFERRED GRANT REVENUE   4,819,276.44     2415- RESERVE ACCOUNT   66,545.00     2420- OTHER DEFERRED REVENUE   430,007.38     2600- INVESTMENT IN FIXED ASSETS   0.00     2610- REDUCT IN INVEST IN FIXED ASST   0.00     2690- OPERATING LEASE LIABILITY   15,880,941.00     Total Liabilities   24,809,564.98     3000- NET ASSETS W/O DONOR RESTRICTIONS   658,101.76	2253- VISION INSURANCE PAYABLE	(24,802.31)
2258- TELEMEDICINE   (3.75)     2260- MADERA RHS PARENT GROUPS   552.34     2262- FRESNO MHS PARENT GROUPS   2,130.16     2264- MCAC EMP FUND-UNIFICATION   64.15     2265- FRESNO - EDS - FUNDS   1,854.17     2266- R & R PROGRAM   3,485.67     2410- DEFERRED GRANT REVENUE   4,819,276.44     2415- RESERVE ACCOUNT   66,545.00     2420- OTHER DEFERRED REVENUE   430,007.38     2600- INVESTMENT IN FIXED ASSETS   0.00     2610- REDUCT IN INVEST IN FIXED ASST   0.00     2690- OPERATING LEASE LIABILITY   15,880,941.00     Total Liabilities   24,809,564.98     3000- NET ASSETS W/O DONOR RESTRICTIONS   658,101.76	2254- SELF INSURANCE - DENTAL	(34,957.21)
2260- MADERA RHS PARENT GROUPS   552.34     2262- FRESNO MHS PARENT GROUPS   2,130.16     2264- MCAC EMP FUND-UNIFICATION   64.15     2265- FRESNO - EDS - FUNDS   1,854.17     2266- R & R PROGRAM   3,485.67     2410- DEFERRED GRANT REVENUE   4,819,276.44     2415- RESERVE ACCOUNT   66,545.00     2420- OTHER DEFERRED REVENUE   430,007.38     2600- INVESTMENT IN FIXED ASSETS   0.00     2610- REDUCT IN INVEST IN FIXED ASST   0.00     2690- OPERATING LEASE LIABILITY   15,880,941.00     Total Liabilities   24,809,564.98     3000- NET ASSETS W/O DONOR RESTRICTIONS   658,101.76	2255- UNION DUES & FEE PAYMENTS	43.72
2262- FRESNO MHS PARENT GROUPS   2,130.16     2264- MCAC EMP FUND-UNIFICATION   64.15     2265- FRESNO - EDS - FUNDS   1,854.17     2266- R & R PROGRAM   3,485.67     2410- DEFERRED GRANT REVENUE   4,819,276.44     2415- RESERVE ACCOUNT   66,545.00     2420- OTHER DEFERRED REVENUE   430,007.38     2600- INVESTMENT IN FIXED ASSETS   0.00     2610- REDUCT IN INVEST IN FIXED ASST   0.00     2690- OPERATING LEASE LIABILITY   15,880,941.00     Total Liabilities   24,809,564.98     3000- NET ASSETS W/O DONOR RESTRICTIONS   658,101.76	2258- TELEMEDICINE	(3.75)
2264- MCAC EMP FUND-UNIFICATION   64.15     2265- FRESNO - EDS - FUNDS   1,854.17     2266- R & R PROGRAM   3,485.67     2410- DEFERRED GRANT REVENUE   4,819,276.44     2415- RESERVE ACCOUNT   66,545.00     2420- OTHER DEFERRED REVENUE   430,007.38     2600- INVESTMENT IN FIXED ASSETS   0.00     2610- REDUCT IN INVEST IN FIXED ASST   0.00     2690- OPERATING LEASE LIABILITY   15,880,941.00     Total Liabilities   24,809,564.98     3000- NET ASSETS W/O DONOR RESTRICTIONS   658,101.76	2260- MADERA RHS PARENT GROUPS	552.34
2265- FRESNO - EDS - FUNDS   1,854.17     2266- R & R PROGRAM   3,485.67     2410- DEFERRED GRANT REVENUE   4,819,276.44     2415- RESERVE ACCOUNT   66,545.00     2420- OTHER DEFERRED REVENUE   430,007.38     2600- INVESTMENT IN FIXED ASSETS   0.00     2610- REDUCT IN INVEST IN FIXED ASST   0.00     2690- OPERATING LEASE LIABILITY   15,880,941.00     Total Liabilities   24,809,564.98     3000- NET ASSETS W/O DONOR RESTRICTIONS   658,101.76	2262- FRESNO MHS PARENT GROUPS	2,130.16
2266- R & R PROGRAM   3,485.67     2410- DEFERRED GRANT REVENUE   4,819,276.44     2415- RESERVE ACCOUNT   66,545.00     2420- OTHER DEFERRED REVENUE   430,007.38     2600- INVESTMENT IN FIXED ASSETS   0.00     2610- REDUCT IN INVEST IN FIXED ASST   0.00     2690- OPERATING LEASE LIABILITY   15,880,941.00     Total Liabilities   24,809,564.98     3000- NET ASSETS W/O DONOR RESTRICTIONS   658,101.76	2264- MCAC EMP FUND-UNIFICATION	64.15
2410- DEFERRED GRANT REVENUE   4,819,276.44     2415- RESERVE ACCOUNT   66,545.00     2420- OTHER DEFERRED REVENUE   430,007.38     2600- INVESTMENT IN FIXED ASSETS   0.00     2610- REDUCT IN INVEST IN FIXED ASST   0.00     2690- OPERATING LEASE LIABILITY   15,880,941.00     Total Liabilities   24,809,564.98     3000- NET ASSETS W/O DONOR RESTRICTIONS   658,101.76	2265- FRESNO - EDS - FUNDS	1,854.17
2415- RESERVE ACCOUNT   66,545.00     2420- OTHER DEFERRED REVENUE   430,007.38     2600- INVESTMENT IN FIXED ASSETS   0.00     2610- REDUCT IN INVEST IN FIXED ASST   0.00     2690- OPERATING LEASE LIABILITY   15,880,941.00     Total Liabilities   24,809,564.98     3000- NET ASSETS W/O DONOR RESTRICTIONS   658,101.76	2266- R & R PROGRAM	3,485.67
2420- OTHER DEFERRED REVENUE430,007.382600- INVESTMENT IN FIXED ASSETS0.002610- REDUCT IN INVEST IN FIXED ASST0.002690- OPERATING LEASE LIABILITY15,880,941.00Total Liabilities24,809,564.983000- NET ASSETS W/O DONOR RESTRICTIONS658,101.76	2410- DEFERRED GRANT REVENUE	4,819,276.44
2600- INVESTMENT IN FIXED ASSETS0.002610- REDUCT IN INVEST IN FIXED ASST0.002690- OPERATING LEASE LIABILITY15,880,941.00Total Liabilities24,809,564.983000- NET ASSETS W/O DONOR RESTRICTIONS658,101.76	2415- RESERVE ACCOUNT	66,545.00
2610- REDUCT IN INVEST IN FIXED ASST   0.00     2690- OPERATING LEASE LIABILITY   15,880,941.00     Total Liabilities   24,809,564.98     3000- NET ASSETS W/O DONOR RESTRICTIONS   658,101.76	2420- OTHER DEFERRED REVENUE	430,007.38
2690- OPERATING LEASE LIABILITY     15,880,941.00       Total Liabilities     24,809,564.98       3000- NET ASSETS W/O DONOR RESTRICTIONS     658,101.76	2600- INVESTMENT IN FIXED ASSETS	0.00
Total Liabilities24,809,564.983000- NET ASSETS W/O DONOR RESTRICTIONS658,101.76	2610- REDUCT IN INVEST IN FIXED ASST	0.00
3000- NET ASSETS W/O DONOR RESTRICTIONS658,101.76	2690- OPERATING LEASE LIABILITY	15,880,941.00
	Total Liabilities	24,809,564.98
	3000- NET ASSETS W/O DONOR RESTRICTIONS	658,101.76
SUSU- NET ASSETS - BOARD DESIGNATED S00,000.00	3050- NET ASSETS - BOARD DESIGNATED	560,000.00
3100- NET ASSETS - RESTRICTED FIXED ASSETS 1,780,656.82	3100- NET ASSETS - RESTRICTED FIXED ASSETS	1,780,656.82
Change in Net Assets (281,109.67)	Change in Net Assets	(281,109.67)
Total Net Assets 2,717,648.91	Total Net Assets	2,717,648.91
Total Liabilities and Net Assets 27,527,213.89	Total Liabilities and Net Assets	27,527,213.89

### Community Action Partnership of Madera County, Inc. Consolidated Revenue and Expense March 31, 2025

	<u>Year-To-Date</u> <u>Actual</u>
Revenues	
4110- GRANT INCOME-FEDERAL	20,845,576.66
4120- GRANT INCOME-STATE	6,741,690.52
4130- GRANT INCOME-AREA	573,467.94
4210- DONATIONS	20,885.10
4220- IN KIND CONTRIBUTIONS	2,801,739.67
4315- CHILD CRE REVENUE-STATE	4,260.45
4320- INTEREST INCOME	801.20
4350- RENTAL INCOME	47,686.89
4370- MERCHANDISE SALES	424.00
4390- MISCELLANEOUS INCOME	1,854.89
4900- INDIRECT COST REIMBURSEMENT	2,236,250.98
Total Revenues	33,274,638.30
<u>Expenses</u>	
5010- SALARIES & WAGES	11,806,923.87
5012- DIRECTOR'S SALARY	148,936.99
5020- ACCRUED VACATION PAY	718,397.94
5112- HEALTH INSURANCE	1,179,215.39
5114- WORKER'S COMPENSATION	314,623.18
5116- PENSION	630,791.26
5122- FICA	953,044.51
5124- SUI	130,782.82
5125- DIRECTOR'S FRINGE	72,041.94
5130- ACCRUED VACATION FICA	45,068.42
6110- OFFICE SUPPLIES	72,074.68
6112- DATA PROCESSING SUPPLIES	543,948.59
6121- FOOD	363,484.86
6122- KITCHEN SUPPLIES	44,103.60
6130- PROGRAM SUPPLIES	522,747.48
6132- MEDICAL & DENTAL SUPPLIES	41,424.94
6134- INSTRUCTIONAL SUPPLIES	30,213.50
6140- CUSTODIAL SUPPLIES & MAINTENANCE TOOLS	109,990.75
6142- LINEN/LAUNDRY	118.50
6143- FURNISHINGS	84,399.95
6150- UNIFORM RENTAL/PURCHASE	579.89
6160- RESALE ITEMS	215.46
6170- POSTAGE & SHIPPING	24,155.38

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6180- EQUIPMENT RENTAL	154,914.16
6181- EQUIPMENT MAINTENANCE	42,246.93
6221- EQUIPMENT OVER > \$5000	343,753.03
6310- PRINTING & PUBLICATIONS	20,979.80
6312- ADVERTISING & PROMOTION	17,533.48
6320- TELEPHONE	254,339.87
6410- RENT	1,240,740.77
6420- UTILITIES/ DISPOSAL	428,221.29
6432- BUILDING & GROUNDS REPAIRS/ MAINTENANCE	369,488.31
6433- GROUNDS MAINTENANCE	176,611.12
6436- PEST CONTROL	22,284.61
6437- BURGLAR & FIRE ALARM	28,328.74
6440- PROPERTY INSURANCE	99,036.30
6510- AUDIT	63,227.50
6520- CONSULTANTS	84,562.05
6522- CONSULTANT EXPENSES	6,941.25
6524- CONTRACTS	570,623.25
6530- LEGAL	69,557.00
6540- CUSTODIAL SERVICES	104,699.76
6555- MEDICAL SCREENING/DEAT/STAFF	8,700.00
6610- GAS & OIL	38,883.57
6620- VEHICLE INSURANCE	104,024.76
6640- VEHICLE REPAIR & MAINTENANCE	49,852.21
6712- STAFF TRAVEL-LOCAL	20,569.30
6714- STAFF TRAVEL-OUT OF AREA	89,157.40
6722- PER DIEM - STAFF	3,162.00
6724- PER DIEM - PARENT	225.00
6730- VOLUNTEER TRAVEL	2,519.36
6742- TRAINING - STAFF	80,877.68
6744- TRAINING - VOLUNTEER	3,180.00
6745- TRAINING - PARTICIPANT/CLIENTS	2,145.00
6750- FIELD TRIPS	56.02
6810- BANK CHARGES	461.37
6832- LIABILITY INSURANCE	45,396.69
6834- STUDENT ACTIVITY INSURANCE	5,138.38
6840- PROPERTY TAXES	13,608.01
6850- FEES & LICENSES	83,429.75
6851- CPR FEES	3,888.00
6852- FINGERPRINT	3,629.75
6875- EMPLOYEE HEALTH & WELFARE	39,333.29
6880- VOLUNTEER RECOGNITION	993.37
7110- PARENT ACTIVITIES	4,221.10
7111- PARENT MILEAGE	1,658.94
7112- PARENT INVOLVEMENT	3,825.20
7114- PC ALLOWANCE	4,575.00
7116- POLICY COUNCIL FOOD ALLOWANCE	1,873.63
7210- TRANSPORTATION VOUCHERS	1,796.84

7224- CLIENT RENT	102,996.24
7226- CLIENT LODGING/SHELTER	77,257.04
7230- CLIENT FOOD	5,238.55
7240- DIRECT BENEFITS	5,755,815.13
7245- DIRECT BENEFITS - STATE	4,260.45
7250- FURNACE REPAIRS/REPLACEMENT	19,635.17
8110- IN KIND SALARIES	2,411,751.25
8120- IN KIND RENT	376,422.17
8130- IN KIND - OTHER	13,566.25
9010- INDIRECT COST ALLOCATION	2,236,250.98
Total Expenses	33,555,747.97
Excess Revenue Over (Under) Expenditures	(281,109.67)

### Fiscal Year July 24 - June 25 March 31, 2025

	Grant	Current Month	YTD Actual	YTD Budget		YTD	Actual Plus	Budge
27 0 ALT. PYMT. PROG. C2AP Revenues	Budget	Actual	March 31, 2025	March 31, 2025	<u>% Spent</u>	Encumbrance	Encumbrance	Balanc
4110- GRANT INCOME-FEDERAL	289485.00	18989.65	93274.17	0.00	(0.32)	0.00	93274.17	196210.83
4120- GRANT INCOME-STATE	1496391.00	80955.89	917410.65	0.00	(0.61)	0.00	917410.65	578980.35
Total Revenues	1785876.00	99945.54	1010684.82	0.00	(0.57)	0.00	1010684.82	775191.38
Expenses								
5010- SALARIES & WAGES	93531.77	4202.25	62999.96	0.00	0.67	0.00	62999.96	30631.81
5020- ACCRUED VACATION PAY	4500.00	212.83	3236.55	0.00	0.72	0.00	3236.55	1263.45
Total Salaries	98131.77	4415.09	66236.51	0.00	0.67	0.00	66236.51	31895.25
5112- HEALTH INSURANCE	6812.00	333,65	4640.87	0.00	0,58	0.00	4640.87	2171.13
5114- WORKER'S	400.00	17.15	265.08	0.00	0.66	0.00	265.08	134.92
5116- PENSION	4627.00	196.44	3233.03	0.00	0.70	0.00	3233.03	1393.97
5122- FICA	7392.00	327.06	5058.85	0.00	0.68	0.00	5058.86	2333.14
5124- SUI	2524.00	0.00	839.37	0.00	0.33	0.00	839.37	1684.63
5130- ACCRUED VACATION FICA	200.00	14.62	118.07	0.00	0.59	0.00	118.07	81.93
Total Fringe Benefits	21955.00	888.92	14155.28	0.00	0.64	0.00	14155.28	7799_7;
6110- OFFICE SUPPLIES	1210.00	0.00	1208.68	0.00	1.00	0.00	1208.68	1.32
6112- DATA PROCESSING	6626.00	445.82	7309.58	0.00	1.10	79.02	7388.60	(762.60
6130- PROGRAM SUPPLIES	73.00	0.00	72.26	0.00	0.99	0.00	72.26	0.74
6143- FURNISHINGS	698.00	0.00	713.57	0.00	1.02	0.00	713.57	(15.5
6170- POSTAGE & SHIPPING	1890.00	0.00	3446.26	0.00	1.82	0.00	3445.26	(1556.2)
Total Supplies	10497.00	445.82	12750.35	0.00	1.21	79.02	12829.37	(2332.37
6180- EQUIPMENT RENTAL	1680.00	0.00	805.71	0.00	0.48	0.00	806.71	873.25
6181- EQUIPMENT	994.00	170.05	823.56	0.00	0.83	0.00	823.56	170.44
6312- ADVERTISING & PROMOTION	263.00	201.13	262.10	0.00	1.00	0.00	262.10	0.90
6320- TELEPHONE	630.00	43.10	485.07	0.00	0.77	0.00	485.07	144.93
6410- RENT	19605.23	1858.41	15889.41	0.00	0.81	0.00	15889.41	3715.8
6420- UTILITIES/ DISPOSAL	4517.00	317.64	3101.95	0.00	0.67	0.00	3101.95	1515.05
6432- BUILDING & GROUNDS	99,00	220.45	314.14	0.00	3.17	0.00	314.14	(215.14
6437- BURGLAR & FIRE ALARM	15.00	0.00	13.78	0.00	0.92	0.00	13.78	1.22
6440- PROPERTY INSURANCE	567.00	91.23	549.23	0.00	1.15	0.00	649.23	(82.23
6530- LEGAL	1260.00	0.00	0.00	0.00	0.00	0.00	0.00	1260.00
6555- MEDICAL	42.00	0.00	0.00	0.00	0.00	0.00	0.00	42.00
6510- GAS & OIL	21.00	3.94	3.94	0.00	0.19	0.00	3.94	17.00
6520- VEHICLE INSURANCE	116.00	27.84	234.92	0.00	2.03	0.00	234.92	(118.92
6640- VEHICLE REPAIR &	379.00	0.00	315.99	0.00	0.83	0.00	315.99	63.01
6742- TRAINING - STAFF	736.00	0.00	735.40	0.00	1.00	0.00	735.40	0.60
6840- PROPERTY TAXES	10.00	0.00	9.46	0.00	0.55	0.00	9,46	0.54
6850- FEES & LICENSES	1460.00	0.00	1446.91	0.00	0.99	0.00	1445.91	13.09
6875- EMPLOYEE HEALTH &	289.00	2.10	129.74	0.00	0.45	0.00	129.74	159.26
Total Other & Services	32784.23	2935.79	25222.31	0.00	0.77	0.00	25222.31	7561.92
Equipment & Biding Improvements	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
6714- STAFF TRAVEL-OUT OF AREA	201.00	70.89	271.41	0.00	1.35	0.00	271.41	(70.41
Travel-Out of Area	201.00	70.89	271.41	0.00	1.35	0.00	271.41	(70.41
Depreciation	0:00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
7240- DIRECT BENEFITS	1473348.00	82150.50	807748.03	0.00	0.55	0.00	807748.03	665599.97
Total Direct Benefits	1473348.00	82150.50	807748.03	0.00	0.55	0.00	807748.03	665599.97
Total In-kind	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
9010- INDIRECT COST	148959.00	8336.43	84300.93	0.00	0.57	0.00	84300.93	64658.07
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#### Fiscal Year July 24 - June 24 March 31, 2025

428 0 ALT. PYMT. PROG. C3AP	<u>Grant</u> Budget	Current Month Actual	YTD Actual March 31, 2025	YTD Budget March 31, 2025	<u>% Spent</u>	YTD Encumbrance	Actual Plus Encumbrance	Budget Balance
Revenues								
4110- GRANT INCOME-FEDERAL	802130.00	52052.24	538979.08	0.00	(0.67)	0.00	538979.08	263150.92
4120- GRANT INCOME-STATE	443351.00	29279.38	303175.71	0.00	(0.68)	0.00	303175.71	140175.29
4315- CHILD CRE REVENUE-STATE	0.00	119.35	445.20	0.00	0.00	0.00	445.20	
Total Revenues	1245481.00	81450.97	842599.99	0.00	(0.68)		842599.99	(445.20)
Expenses	1243481.00	81430,97	947339/93	0.00	(0.58)	0.00	842599,99	402881.01
5010- SALARIES & WAGES	64758.32	3125.56	48656.72	0.00	0.75	0.00	48656.72	16101.60
5020- ACCRUED VACATION PAY	4000.00	169.97	2544.60	0.00	0.64	0.00	2544.60	1455.40
Total Salaries	68758.32	3295.53	51201.32	0.00	0.74	0.00	51201.32	17557.00
5112- HEALTH INSURANCE	6533 BG	332.47	1047.02					0400400
5112- HEACTH INSURANCE 5114- WORKER'S COMPENSATION	\$532.00		4049.02	0.00	0.73	0.00	4049.02	1482.98
	371.00	12.46	200.86	0.00	0.54	0.00	200.86	170.14
5116- PENSION	3460.00	122.20	2281.95	0.00	0.66	0.00	2281.96	1178.04
5122- FICA	5263.00	237,40	3831.08	0.00	0.73	0.00	3831.08	1431.92
5124-5UI	564.00	0.00	571.23	0.00	1.01	0.00	571.23	(7.23)
5130- ACCRUED VACATION FICA	150.00	9.57	102.38	0.00	0.68	0.00	102.38	47.62
Total Fringe Benefits	15340.00	714.10	11036.53	0.00	0.72	0.00	11036.53	4303.47
6110- OFFICE SUPPLIES	865.00	0.00	846.25	0.00	0.98	0.00	845.25	18.75
6112- DATA PROCESSING SUPPLIES	4092.00	335.05	5136.35	0.00	1.26	55.42	5191.77	(1099.77)
6130- PROGRAM SUPPLIES	85.00	0.00	50.62	0.00	0.60	0.00	50.62	34.38
6143- FURNISHINGS	510.00	0.00	509.04	0.00	1.00	0.00	509.04	0.96
6170- POSTAGE & SHIPPING	1350.00	0.00	1083.80	0.00	0.80	0.00	1083.80	266.20
Total Supplies	6902.00	335.05	7626.06	0.00	1,10	55.42	7681.48	(779.48)
6180- EQUIPMENT RENTAL	830.00	75.57	676.09	0.00	0.81	0.00	676.09	153.91
6181- EQUIPMENT MAINTENANCE	660.00	45.89	512.73	0.00	0.01	0.00	512.73	147.27
6312- ADVERTISING & PROMOTION	185.00	140.79	184.34	0.00	1.00	92377.5 G		
6320- TELEPHONE				100 C C C C C C C C C C C C C C C C C C		0.00	184.34	0.66
	450.00	32,29	392.05	0.00	0.87	0.00	392.05	57.95
6410- RENT	14110.68	1300.89	11429.25	0.00	0.81	0.00	11429.25	2681.43
6420- UTILITIES/ DISPOSAL	2995.00	222.35	2238.20	0.00	0.75	0.00	2238.20	756.80
6432- BUILDING & GROUNDS	70.00	154.32	219.90	0.00	3.14	0.00	219.90	(149.90)
6437- BURGLAR & FIRE ALARM	10.00	0.00	9.65	0.00	0,97	0.00	9.65	0.35
6440- PROPERTY INSURANCE	605.00	63.79	485.19	0.00	0.80	0.00	485.19	119.81
6530- LEGAL	900.00	0.00	0.00	0.00	0.00	0.00	0.00	900.00
6555- MEDICAL	30.00	0.00	0.00	0.00	0.00	0.00	0.00	30.00
6610- GAS & OIL	15.00	2.76	2.76	0.00	0.18	0.00	2.76	12.24
6620- VEHICLE INSURANCE	83.00	0.00	0.00	0.00	0.00	0.00	0.00	83.00
6640- VEHICLE REPAIR &	211.00	0.00	221.19	0.00	1.05	0.00	221.19	(10.19)
6742- TRAINING - STAFF	542.00	0.00	521.50	0.00	0.96	0.00	521.50	20.50
6840- PROPERTY TAXES	7.00	0.00	6.79	0.00	0.97	0.00	6.79	0.21
6850- FEES & LICENSES	977.00	0.00	1065.05	0.00	1.09	0.00	1065.05	(88.05)
6875- EMPLOYEE HEALTH &	205.00	2.18	113.20	0.00	0.55	0.00	113.20	92.80
Total Other & Services	22885.68	2040.83	18077.89	0.00	0.79	0.00	18077.89	4808.79
Equipment & Blding Improvements	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
6714- STAFF TRAVEL-OUT OF AREA	187.00	101.27	287.64	0.00	1.54	0.00	287,64	(100.64)
Travel-Out of Area	187.00	101.27	287.64	0.00	1.54	0.00		
			the second s	and the second se	the second se		287,64	(100.64)
Depreciation	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
7240- DIRECT BENEFITS	1027522.00	67843.33	683681.46	0.00	0.67	0.00	683681.46	343840,54
7245- DIRECT BENEFITS - STATE	0.00	119.35	445.20	0.00	0.00	0.00	445.20	(445.20)
Total Direct Benefits	1027522.00	67962.68	684126.66	0.00	0.67	0.00	684126.66	343395.34
Total In-kind	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
9010- INDIRECT COST ALLOCATION	103885.00	6783.85	70243.89	0.00	0.68	0.00	70243.89	33641.11
Total Expenses	1245481.00	81233.31						

#### Fiscal Year June 24 - July 25 March 31, 2025

<u>0 ALT. PYMT. PROG</u> IERAL	Grant Budget	Current Month Actual	YTD Actual March 31, 2025	YTD Budget March 31, 2025	% Spent	YTD Encumbrance	Actual Plus Encumbrance	Budge Balance
wonues								
4110- GRANT INCOME-FEDERAL	4652208.00	245392.39	2433756.59	0.00	[0.52]	0.00	2433756.59	2218451.41
4120- GRANT INCOME-STATE	3492616.00	185120.57	1318999.55	0.00	[0.38]	0.00	1318999.55	2173616.45
4315- CHILD CRE REVENUE-STATE	0.00	578.95	3815.25	0.00	0.00	0.00	3815.25	(3815.25
Total Revenues	8144824.00	431091.91	3756571.39	0.00	[0.46]	0.00	3756571.39	4388252.61
penses	0.0000000		31 200 Land	- available	10.401	0.00	3730374.39	4300632.03
5010- SALARIES & WAGES	275383.00	20277.98	202977.47	0.00	0.74	0.00	202977.47	72405.53
5020- ACCRUED VACATION PAY	285503.00	1067.67	10375.68	0.00	0.04	0.00	202375.68	275127.32
Total Salaries	560886.00	21345.65	213353.15	0.00	0.38	0.00	213353.15	347532.85
5112- HEALTH INSURANCE	26846.00	2164.11	19583.34	0.00	0.74	0.00	19983.34	6862.66
5114- WORKER'S COMPENSATION	1265.00	81.08	843.73	0.00	0.67	2.500 B		421.27
5116- PENSION	15112.00	779.27	8402.20	0.00		0.00	843.73	1
5122- FICA	23094.00	1546.97	16097.37	1317.7	0.56	0.00	8402.20	6709.80
5124- SUI			100000000000000000000000000000000000000	0.00	0.70	0.00	16097.37	6995.63
	2558.00	0.00	2536.73	0.00	0.99	0.00	2536.73	21.27
5130- ACCRUED VACATION FRINGE	700.00 69575.00	62.72 4634.15	260.51	0.00	0.37	0.00	260.91	439.0
Total Fringe Benefits	89575.00	4034.13	48124.28	0.00	0.69	0.00	48124.28	21450.7
6110- OFFICE SUPPLIES	2491.00	0.00	2490.52	0.00	1.00	0.00	2490.52	0.4
6112- DATA PROCESSING SUPPLIES	15674.00	835.41	15454.30	0.00	0,99	162.15	15616.45	\$7.55
6130- PROGRAM SUPPLIES	151,00	0.00	150.38	0.00	1.00	0.00	150.38	0.53
6143- FURNISHINGS	0.00	0.00	2130.37	0.00	0.00	00.0	2130.37	(2130.37
6170- POSTAGE & SHIPPING	5760.00	0.00	3751.52	0.00	0.65	0,00	3751.52	2008.4
Total Supplies	24075.00	835,41	23977.09	0,00	1.00	162.15	24139.24	(63.24
6180- EQUIPMENT RENTAL	5120.00	322.44	2918.51	0.00	0.57	0.00	2918.51	2201.4
6181- EQUIPMENT MAINTENANCE	3104.00	195.81	2187.52	0.00	0.70	0.00	2187.52	916.4
6310- PRINTING & PUBLICATIONS	384.00	0.00	0.00	0.00	0.00	0.00	0.00	384.00
6312- ADVERTISING & PROMOTION	640.00	412.32	598.14	0.00	0.93	0.00	598.14	41.8
6320- TELEPHONE	1920.00	119.18	1308.53	0.00	0.68	0.00	1308.53	611.4
6410- RENT	54236.00	3861.53	35853.94	0.00	0.66	0.00	35853.94	18382.0
6420- UTILITIES/ DISPOSAL	11328.00	656.96	6930.85	0.00	0.61	0.00	6930.86	4397.34
6432- BUILDING & GROUNDS	256.00	486.52	678.59	0.00	2.65	0.00	678.59	(422.59
6436- PEST CONTROL	5.00	0.70	630	0.00	1.26	0.00	6.30	(422.5
6437- BURGLAR & FIRE ALARM	30.00	0.22	30.38	0.00	1.01	0.00	30.38	
6440- PROPERTY INSURANCE	2523.00	186.91	1623.84	0.00	0.64	0.00	1623.84	(0.3) 899.1
6530- LEGAL	3840.00	0.00	0.00	0.00	0.00	0.00	0.00	3840.00
6555- MEDICAL	146.00	0.00	145.00	0.00	0.59	0.00	145.00	1.00
6610- GAS & OIL	54.00	8.07	8.07	0.00	0.13	0.00	8.07	55.93
6620- VEHICLE INSURANCE	352.00	0.00	67.83	0.00	0.19	0.00	67.83	284.17
6640- VEHICLE REPAIR &	715.00	0.00	647.79	0.00	0.91	0.00	647.79	
6742- TRAINING - STAFF	1977.00	0.00	1976.85	0.00	1.00	0.00	1976.85	57.2)
6640- PROPERTY TAXES	30.00	0.00	29.77	0.00	0.99	0.00	29.77	0.15
6850- FEES & LICENSES	3860.00	0.00	3091.28	0.00				0.23
6852- FINGERPRINT	40.00	0.00	17.75	0.00	0.86	0.00	3091.28	768.72
6875- EMPLOYEE HEALTH &	880.00	6.07	193.09	0.00	0.44	0.00	17.75	22.25
Total Other & Services	91450.00	6256.73	58314.04	0.00	0.22	0.00	193.09 58314.04	585.91 33135.96
Equipment & Blding	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
6714- STAFF TRAVEL-OUT OF AREA	0.00	207.51	1062,03	0.00	0.00	00.0	1052.03	(1062.03
Travel-Out of Area	0.00	207.61	1052.03	0.00	0.00	0.00	1052.03	1062.03
Depreciation	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(1062.03
7240- DIRECT BENEFITS	6719480.00	360571.36	3094909.23	0.00	0.46	0.00	3094909.23	3624570.77
7245- DIRECT BENEFITS - STATE	0.00	578.95	3815.25	0.00	0.46	0.00	3094909.23	3824570.77
Total Direct Benefits	6719480.00	361150.31	3098724.48	0.00	0.46	0.00	3098724.48	3620755.52
Total In-kind	0.00	0.00	3098724.48	0.00	0.46	0.00		
		and the second s	and its inclusion of the local sectors				0.00	0.00
9010-INDIRECT COST ALLOCATION	679357.00	35908.96	313016.32	0.00	0.45	0.00	313016.32	355340.68

#### Madera Regional Head Start Budget to Actual March 31, 2025

Account	G	Frant	Current	Current Mth	Prior Mth	Current vs Budget	YTD				
									YTD	Actual +	
Descpription	Βι	udget	Period	YTD	YTD	YTD	Budget	% Spent	Encumbered	Encumbered	Balance
Revenues											
4110- GRANT INCOME-FEDERAL	\$4	,499,507	231,061.82	3,647,146.32	3,416,084.50	(8,331.92)	3,655,478.24	86% 0%	241,306.96	3,888,453.28	611,053.72
4210- DONATIONS 4220- IN KIND CONTRIBUTIONS	\$ 1	,136,383	- 304,846.95	851,044.16	546,197.21	(72,598.84)	923,643.00	0% 75%	-	- 851,044.16	285,338.84
4330- SALE OF ASSETS			-					0%		-	-
4350- RENTAL INCOME			-					0%		-	-
4390- MISC INCOME Total Revenues	\$ 5	,635,890	535,908.77	4,498,190.48	3,962,281.71	(80,930.76)	4,579,121.24	0% 80%	- 241,306.96	4,739,497.44	896,392.56
Total Revenues	\$ J	,035,690	555,906.77	4,490,190.40	3,902,201./1	(00,930.70)	4,379,121.24	<b>0U</b> %	241,300.90	4,739,497.44	090,392.30
5010 SALARIES & WAGES	\$ 1	,993,828	55,560.71	1,685,462.93	1,629,902.22	69,912.88	1,615,550.05	85%	-	1,685,462.93	308,365.07
5019- SALARIES & WAGES C19	\$	-	-			-		0%		-	-
5020 ACCRUED VACATION PAY	\$	154,380	3,069.80	114,699.34	111,629.54	(9,617.25)	124,316.59	74%	-	114,699.34	39,680.66
5112 HEALTH INSURANCE 5114 WORKER'S COMPENSATION	\$ \$	333,462	5,523.56	172,530.72	167,007.16	(97,000.94)	269,531.66	52%	-	172,530.72	160,931.28
5114 WORKER'S COMPENSATION 5115- Worker's Compensation C19	ծ \$	66,592	1,163.09	48,488.07	47,324.98	(5,447.96)	53,936.03	73% 0%	-	48,488.07	18,103.93
5116 PENSION	Ψ \$	111,290	4,196.02	87,209.15	83,013.13	(2,949.10)	90,158.25	78%	-	87,209.15	24,080.85
5117- Pension C19	\$	-	-		,	-		0%		-	
5121- FICA C19	\$	-	-					0%		-	-
5122 FICA	\$	159,095	4,019.47	134,294.86	130,275.39	5,384.16	128,910.70	84%		134,294.86	24,800.14
5123- SUI C19	\$	-	-	24 205 65	00 777 00	-		0% 70%		- 24.205.65	- 10.576.35
5124 SUI 5130 ACCRUED VACATION FRINGE	\$ \$	34,782 12,319	(2,571.64) 233.82	24,205.65 8,749.67	26,777.29 8,515.85	(3,976.54) (1,170.40)	28,182.19 9,920.07	70% 71%		24,205.65 8,749.67	3,569.33
6110 OFFICE SUPPLIES	<u></u> \$	18.900	2.706.96	12,547.62	9.840.66	(2,712.38)	15,260.00	81%	2.768.46	15.316.08	3.583.92
6112 DATA PROCESSING	\$	61,800	26,877.23	107,278.44	80,401.21	57,044.44	50,234.00	178%	2,708.25	109,986.69	(48,186.69)
6121 FOOD	\$	5,000	20,077.23	2,671.15	2,647.93	(1,078.85)	3,750.00	54%	34.54	2,705.69	2,294.31
	\$	5,000	-	· · · · · · · · · · · · · · · · · · ·			3,750.00			,	,
6122 KITCHEN SUPPLIES 6130 PROGRAM SUPPLIES	\$	74,000		81.38	81.38	(3,668.62)	60,000.00	2% 197%		81.38	4,918.62
	Ψ \$	500 <sup>74,000</sup>	25,248.82	150,850.20	125,601.38	90,850.20	500.00		21,361.06	172,211.26	(98,211.26)
6132 MEDICAL & DENTAL SUPPLIES	Ψ \$	19,500	853.39	8,250.07	7,396.68	7,750.07	15,780.00	1667%	86.54	8,336.61	(7,836.61)
6134 INSTRUCTIONAL SUPPLIES	Ψ \$	24,000	539.51	7,842.30	7,302.79	(7,937.70)	19,280.00	68%	5,324.11	13,166.41	6,333.59
6140 CUSTODIAL SUPPLIES	э \$	24,000 140	11,669.61	34,024.03	22,354.42	14,744.03	105.00	142%	-	34,024.03	(10,024.03)
6142 LINEN/LAUNDRY	ъ \$	450	-	100.00	100.00	(5.00)	450.00	71%		100.00	40.00
6150 UNIFORM RENTAL/PURCHASE	ծ Տ		150.00	300.00	150.00	(150.00)		67%		300.00	150.00
6170 POSTAGE & SHIPPING	ծ Տ	600	48.40	536.11	487.71	36.11	500.00	89%	-	536.11	63.89
6180 EQUIPMENT RENTAL	+	25,956	4,018.11	26,807.33	22,789.22	5,177.33	21,630.00	103%	-	26,807.33	(851.33)
6181 EQUIPMENT MAINTENANCE	\$	20,580	322.67	12,441.48	12,118.81	(4,708.52)	17,150.00	63%	585.00	13,026.48	7,553.52
6221 EQUIPMENT OVER >\$5000	\$	185,000	-		-	(138,750.00)	138,750.00	95%	176,381.79	176,381.79	8,618.21
6231- BUILDING RENOVATION	\$	-	-			-		0%		-	-
6310 PRINTING & PUBLICATIONS	\$	15,000	2,056.71	9,026.00	6,969.29	(3,474.00)	12,500.00	97%	5,509.15	14,535.15	464.85
6312 ADVERTISING & PROMOTION	\$	200	-	400.00	400.00	200.00	200.00	200%	-	400.00	(200.00)
6320 TELEPHONE	\$	165,828	14,455.57	82,940.24	68,484.67	(55,249.66)	138,189.90	50%	-	82,940.24	82,887.76
6410 RENT	\$	204,058	20,372.21	198,460.30	178,088.09	28,411.80	170,048.50	97%	-	198,460.30	5,597.70
6420 UTILITIES/ DISPOSAL	\$	107,436	4,285.35	91,839.76	87,554.41	2,309.76	89,530.00	85%		91,839.76	15,596.24
6432 BUILDING REPAIRS/ MAINTEN	\$	38,880	8,912.25	155,768.25	146,856.00	126,608.25	29,160.00	401%	-	155,768.25	(116,888.25)
6433 GROUNDS MAINTENANCE	\$	31,212	2,912.61	32,057.56	29,144.95	6,047.56	26,010.00	111%	2,450.00	34,507.56	(3,295.56)
6435 BUILDING IMPROVEMENTS	\$	-	-			-		0%		-	-
6436 PEST CONTROL	\$	7,188	765.65	7,285.98	6,520.33	1,295.98	5,990.00	101%	-	7,285.98	(97.98)
6437 BURGLAR & FIRE ALARM	\$	3,915	343.13	3,681.72	3,338.59	180.72	3,501.00	94%		3,681.72	233.28
6440 PROPERTY INSURANCE 6520 CONSULTANTS	\$ \$	32,915	1,458.15 1,770.40	13,520.26 6,363.98	12,062.11 4,593.58	(13,949.74) 6,363.98	27,470.00	41% 0%	- 14,042.20	13,520.26 20,406.18	19,394.74 (20,406.18)
6522 CONSULTANTS 6522 CONSULTANT EXPENSES	\$ \$	-	1,770.40	6,363.98 483.00	4,593.58 307.30	6,363.98 483.00		0%	14,042.20	20,406.18 483.00	(20,406.18) (483.00)
	Ψ		110.10		001.00	400.00		070		400.00	(400.00)

#### Madera Regional Head Start Budget to Actual March 31, 2025

Account	Grant	Current	Current Mth	Prior Mth	Current vs Budget	YTD				
								YTD	Actual +	
Descpription	Budget	Period	YTD	YTD	YTD	Budget	% Spent	Encumbered	Encumbered	Balance
6524 CONTRACTS	\$ 49,000	-	-	-	(39,200.00)	39,200.00	0%	-	-	49,000.00
6530 LEGAL	\$ 5,000	-	4,403.40	4,403.40	(596.60)	5,000.00	88%	-	4,403.40	596.60
6540 CUSTODIAL SERVICES	\$ 10,836	(0.02)	8,234.50	8,234.52	(795.50)	9,030.00	115%	4,215.00	12,449.50	(1,613.50)
6555 MEDICAL SCREENING/DEAT/ST	\$ 2,400	390.00	2,280.00	1,890.00	280.00	2,000.00	95%		2,280.00	120.00
6562 MEDICAL EXAM	\$-	-			-		0%		-	-
6564 MEDICAL FOLLOW-UP	\$-	-			-		0%		-	-
6566 DENTAL EXAM	\$-	-			-		0%		-	-
6568 DENTAL FOLLOW-UP	\$-	-			-		0%		-	-
6610 GAS & OIL	\$ 12,000	1,405.24	9,078.19	7,672.95	(921.81)	10,000.00	76%		9,078.19	2,921.81
6620 VEHICLE INSURANCE	\$ 27,000	2,451.86	21,840.51	19,388.65	(659.49)	22,500.00	81%	-	21,840.51	5,159.49
6640 VEHICLE REPAIR & MAINTENA	\$ 9,000	809.46	14,023.57	13,214.11	6,823.57	7,200.00	156%		14,023.57	(5,023.57)
6712 STAFF TRAVEL-LOCAL	\$ 6,500	811.72	4,079.90	3,268.18	(1,160.10)	5,240.00	63%		4,079.90	2,420.10
6714 STAFF TRAVEL-OUT OF AREA	\$ 16,580	30.80	296.58	265.78	(16,283.42)	16,580.00	2%		296.58	16,283.42
6722 PER DIEM - STAFF	\$ -	-					0%		-	-
6724 PER DIEM - PARENT	\$ -	52.00	52.00		52.00	-	0%	-	52.00	(52.00)
6730 VOLUNTEER TRAVEL	\$ -	-			-		0%		-	-
6742 TRAINING - STAFF	\$ 12.000	409.05	3,638.30	3,229.25	(8,361.70)	12,000.00	34%	425.47	4.063.77	7.936.23
6744 TRAINING VOLUNTEERS	\$ 5,000	-	-	-	(4,000.00)	4,000.00	0%	-	-	5,000.00
6746 TRAINING PARENTS	\$ -	-			(,,,	4,000.00	0%		-	-
6748 EDUCATION REIMBURSEMENT	\$ 10,500	_	-		(5,250.00)	5,250.00	0%		-	10,500.00
6750 FIELD TRIPS	\$ 10,500	_	56.02	56.02	56.02	5,250.00	0%		56.02	(56.02)
6810 BANK CHARGES	φ - \$ -	_	50.02	00.02	-		0%			(50.02)
6820 INTEREST CHARGES	\$ - \$ -	_					0%		_	_
6832 LIABILITY INSURANCE	\$ 336	30.54	302.92	272.38	22.92	280.00	90%		302.92	33.08
6834 STUDENT ACTIVITY INSURANC	\$ 2.084	1.125.53	1.837.16	711.63	189.16	1.648.00	88%		1.837.16	246.84
6840 PROPERTY TAXES	÷ _,	1,125.55	1,037.10				00% 48%	-	1,037.16	240.04
	\$ 293	-		141.85	(151.15)	293.00	48% 75%			
6850 FEES & LICENSES	\$ 31,000	2,697.12	23,178.21	20,481.09	(2,821.79)	26,000.00	75% 0%		23,178.21	7,821.79
6851 CPR FEES	\$ -	-	000.04	007.04	-				-	-
6852 FINGER PRINTING	\$ 3,200	0.37	698.31	697.94	(2,501.69)	3,200.00	22%		698.31	2,501.69
6860 DEPRECIATION EXPENSE	\$ -	-			-		0%		-	-
6870 EMPLOYEE RECOGNITION	\$ -	-			-		0%		-	-
6875- EMPLOYEE HEALTH & WELFARE COSTS	\$ 20,000	115.30	4,270.12	4,154.82	(15,729.88)	20,000.00	21%		4,270.12	15,729.88
6880 VOLUNTEER RECONGNITION	\$ -	-			-		0%		-	-
6892 CASH SHORT / OVER	\$ -	-			-		0%		-	-
7110 PARENT ACTIVITIES	\$ -						0%		-	
7111 PARENT MILEAGE	\$ 500	24.92	378.63	353.71	(21.37)	400.00	76%		378.63	121.37
7112 PARENT INVOLVEMENT	\$ 1,400	64.66	541.65	476.99	(578.35)	1,120.00	39%		541.65	858.35
7114 PPC ALLOWANCE	\$ 1,200	210.00	1,785.00	1,575.00	821.00	964.00	149%		1,785.00	(585.00)
7115 PPC FOOD ALLOWANCE	\$-	-			-		0%		-	-
7116 POLICY COUN. FOOD ALLOWAN	\$-	-	624.52	624.52	624.52	-	0%		624.52	(624.52)
8110 IN KIND SALARIES	\$ 136,819	265,483.85	653,143.66	387,659.81	541,937.66	111,206.00	477%		653,143.66	(516,324.66)
8120 IN KIND RENT	\$ 318,251	39,353.10	196,765.50	157,412.40	(61,904.50)	258,670.00	62%	-	196,765.50	121,485.50
8130 IN KIND - STATE	\$ 681,313	10.00	1,135.00	1,125.00	(552,632.00)	553,767.00	0%	-	1,135.00	680,178.00
9010 INDIRECT COST ALLOCATION	\$ 359,872	19,272.79	304,207.43	284,934.64	10,878.13	293,329.30	86%	5,415.39	309,622.82	50,249.18
Total Expenses	\$ 5,635,890	535,908.77	4,498,190.48	3,962,281.71	(80,930.76)	4,579,121.24	84%	241,306.96	4,739,497.44	896,392.56
Excess Revenue Over (Under) Expenditures	\$ -	-	-	-	-	-		-	-	-
							ADMINIST	RATIVE EXPENS	SES	\$447,335.04
		211,789.03	3,342,938.89	3,131,149.86				ADMINISTATIVE		9.85%
	-	,			-	400/				
	-	19,272.80	304,207.44	284,934.64	- 9	.10%	LIMIT IS 1	<b>J</b> 70		

YTD Contract % 86.42%

				CAPMC			
			Work Related		rt - April 2025		
			BOAR	D OF DIRECT	ORS		
Recordable Injuries							
Position/Program	Injury Location	Type of Injury	DOI	TOI	Description	Loss Days	Outcomes
Medcor: Self Treat First Aid	I.						
Position/Program	Injury Location	Type of Injury	DOI	TOI	Description	Loss Days	
Accounting Technician	Gill Ave.	Bite	4/21/2025	10:35 AM	EE was moving boxes when EE tripped due to uneven floor, causing EE to fall and contusion to right foot and left knee.	0	04/21/2025: Called Medcor self-care/first aid.
Teacher III	Chowchilla	Bite	4/23/2025	10:00 AM	EE was lowering down the blinds when a child bit EE's left wrist (near bottom of thumb) causing pain and leaving teeth marks with no break in skin.	0	4/23/25: Called Medcor self-care/first aid.
Claims							
Position/Program	Injury Location	Type of Injury	DOI	ТОІ	Description	Loss Days	Outcomes
Jp To Date Injuries: Januar	y 2023 to December 2023						
2) Hand Injuries	(1) Feet Injuries	() Chest Injuries					
) Back Injuries	() Eye Injuries	(1) Neck Injuries	() Bottom				
<ol><li>Knee Injuries</li></ol>	() Leg Injuries	(1) Head Injuries	() Hip				
3) Arm Injuries	(1) Wrist Injuries	() Ankle Injuries					
) Elbow Injuries	() Burn Injuries	() Respiratory Injuries	6				
(1) Shoulder Injuries	() Abdomen Injuries	() Face Injuries					
		DOI: DATE OF INJUR	V				
		DOI. DATE OF INJUR	. 1				



### BOARD OF DIRECTORS 2025 ATTENDANCE

Director	Area Represented	January	February	March	April	May	June	July	August	September	October	November	December
Public Officials			1		1		1			1	1	1	
Deborah Martinez A: Vivian Garcia	Department of Social Services	Р	Р	-	А								
David Hernandez Vice-Chairperson	Madera Unified School District	x	Р	-	Р								
Leticia Gonzalez A: Robert Poythress	Madera County Board of Supervisors	Р	х	-	Р								
Steve Montes A: Mayor Cece Gallegos	Madera City Council	Р	Р	-	Р								
Jeff Troost	Chowchilla City Council	Р	Р	-	Р								
Private Sector Officials													
Debi Bray	Madera Chamber of Commerce	Р	Ρ	-	Ρ								
Otilia Vasquez	Head Start Policy Council	х	Р	-	х								
Donald Holley	Community Affairs	Р	Р	-	Р								
Eric LiCalsi <i>Chairperson</i>	Attorney at Law	Р	x	-	x								
Molly Hernandez	Early Childhood Education & Development	Р	х	-	х								
Low-Income Target Area Off	icials		•										
Martha Garcia	Central Madera/Alpha	x	х	-	Р								
Tyson Pogue Secretary/Treasurer	Eastern Madera County	Р	Р	-	Р								
Richard Gutierrez	Eastside/Parksdale	Р	Р	-	Р								
Diana Plamer (Seated on 1/11/2024)	Fairmead/Chowchilla	Р	Р	-	Р								
Aurora Flores	Monroe/Washington	Р	Р	-	Р								
	Total Directors	12/15	11/15	-	12/15								

		STAFFING CHANGES			
			2025		
		April 1, 2025 - April 30,	2025		
		BOARD OF DIRECTORS			
NON-HEAD START	DEPARTMENTS				
NEW HIRES					
	Desition	Leasting	Effective Date	Llaura	hustification
Identification Number	Position		Effective Date	Hours	Justification
61316	Family Service Associate II	Gill - Resource & Referral and Alternative Payment Program	4/21/2025	80	Open Position - provisionally
61496	Accounting Technician	Gill - Fiscal	4/28/2025	80	Open Position
SUBSTITUTES					
Identification Number	Position	Location	Effective Date	Hours	Justification
VOLUNTARY RESIG					
Identification Number	Position	Location	Effective Date	Hours	Justification
61369	Housing Case Worker	Gill - Community Services	4/25/2025	80	Resignation
61463	Family Service Associate I	Gill - Resource & Referral and Alternative Payment Program	4/17/2025	80	Resignation
TERMINATION					
Identification Number	Position	Location	Effective Date	Hours	Justification
HEAD START DEPA	ARTMENTS				
NEW HIRES					
Identification Number	Position	Location	Effective Date	Hours	Justification
60235	Family Skills Instructor	Gill - Madera Head Start	4/25/2025	80	Open Position
61416	Teacher III	Sierra Vista - Madera Migrant Head Start	4/28/2025	80	Open Position
60014	Food Service Cook	Selma - Fresno Migrant Head Start	4/28/2025	80	Open Position
SUBSTITUTES					
Identification Number	Position	Location	Effective Date	Hours	Justification
VOLUNTARY RESIG	GNATIONS				
Identification Number	Position	Location		Hours	Justification
60516	Instructional Aide III	Los Ninos - Madera Migrant Head Start	4/15/2025	80	Resignation
61448	Associate Teacher	Mis Angelitos - Madera Migrant Head Start	4/24/2025	80	Resignation
61489	Center Director	Inez Rodriguez - Fresno Migrant Head Start	4/23/2025	80	Resignation
60097	Instructional Aide III	Sierra Vista - Madera Migrant Head Start	4/15/2025	80	Resignation
61426	Advocate III	Cottonwood - Madera Regional Head Start	4/25/2025	80	Resignation
61462	Head Start Professional Development Coach	Pine - Madera Regional Head Start		80	Resignation
61324	Food Service Worker / Instructional Aide I	Mis Tesoros - Madera Regional Head Start Sierra Vista - Madera Migrant Head Start	4/22/2025	80	Resignation
60276	Teacher I		4/28/2025	80	Resignation
TERMINATIONS					
Identification Number	Position	Location	Effective Date	Hours	Justification
				1	



# \* WAREHOUSE PARKING LOT MISCELLANEOUS SALE

# FRIDAY MAY 9, 2025

# **528 NOBLE AVE – WAREHOUSE**

### LIMITED PARKING - WEATHER PERMITTING

Food Bank & CAPMC Employees: 8:00 AM – 9:30 AM Community: 9:30 AM – 12:00 PM \*Employees must wear name badge\*

### Please Note:

- Cash Only No bills larger than \$20.00
- All items must be taken at the time of purchase
- No Public Restrooms

Proceeds will go towards Madera County Food Bank and CAPMC

