

Expenditure Certification Form Procedures

The purpose of this document is to show the county's actual contribution and overall support of the Extension program

Enter the required data in the form using Adobe Acrobat or Acrobat Reader with attention to specific fields described below

1. **County:** Name of the county that the expenditure form is being completed for.
2. **Expenditure Certification Period (Fiscal Year):**
 - a. Select the fiscal year for the expenditure certification.
 - b. If fiscal date range is not listed, then select 'other' and provide the appropriate date range.
3. **County Extension Agent (CEA):** Record only County Extension Agents and complete one line per CEA. Include CEA's who may have transferred, resigned, or retired during the reporting period.
4. **Agent's Salary:** CEA's gross salary actually paid by the county.
5. **Agent's Travel:** CEA's travel that was actually paid via payroll.
6. **Total Salary for County Extension Agents (A):** This field will auto-sum all salaries for the CEA's.
7. **Total Travel for County Extension Agents (B):** This field will auto-sum all travel paid via payroll for the CEA's.
8. **Agents Expense Total (A+B):** This field will auto-sum the total salaries and travel paid via payroll for the CEA's.
9. **All Other Salaries (C):**
 - a. Record the total of all other salaries expended for non-CEA employees.
 - b. Examples: secretarial, clerical, program assistants, etc.
10. **Fringe Benefits (D):** Record the total amount of all expenditures related to fringe benefits such as insurance, retirement, workers compensation, unemployment, social security, etc.
11. **Operating Expenses (E):** Record the total of all expenditures for operating expenses, such as office equipment, supplies, rentals, allowances, utilities, etc.
12. **Other County Support Total (C+D+E):** This field will auto-sum the total entered for all other salaries, fringe benefits, and operating expenses.
13. **Grand Total (A+B+C+D+E):** This field will auto-sum all totals (fields A-E).
14. **County Official:**
 - a. Print Name of County Official
 - b. Sign and Date
15. **County Extension Coordinator:**
 - a. Print Name of County Extension Coordinator
 - b. Sign and Date
16. **District Office Managers:** After the form has been completed and signed, please drop the in Laserfiche WIP-Budgets/County Expenditures – Financial Accountant Review