

County of Nelson
Funding Application Forms
Overview and Instructions for Completion
Applications for County of Nelson are due December 16, 2022

1. Introduction.

The County of Nelson funding application forms for **Fiscal Year 2023/2024** have not been changed from last year. In addition to the application forms, Nelson County is requesting a current financial report/audit.

2. Application and Submission Requirements.

The application packet includes:

1. Instructions
2. Funding Application Forms

The funding application package consists of the following sections, which must be presented in this order with consecutively numbered pages.

- *Application Cover (AC – 1) and Transmittal Letter*

A copy of each of the Program forms is required for each Program request:

- *Program Budget Forms*
 - Program Budget Request Form (PB-1)
 - Program Revenue and Beneficiaries (PB-2)
 - Program Budget Explanation Form (PB-3)
 - Nelson County Program Budget (PB-4)

The Program Summary Form is not required if funding is being requested for only one program:

- *Program Summary (PS-1)*

Total Agency Budget Forms are not required if requesting for a single program and the Program Budget is the same as the Total Agency Budget:

- *Total Agency Budget Forms*
 - Total Agency Budget (TB-1)
 - Total Agency Revenue and Beneficiaries (TB-2)

Submit **10 copies (3-hole punched, unstapled)** of all completed forms. In addition to submission of the completed forms, please provide one copy of the agency's most recent annual financial report/audit.

All forms are being sent via email where possible. If you encounter any problems with the electronic forms or need other assistance, please call the Nelson County Finance Department at (434) 263-7135 or e-mail lstaton@nelsoncounty.org and/or jseraphin@nelsoncounty.org.

3. Instructions for Completing the Funding Application Forms.

A. AC – 1: Application Cover Page

- Complete and submit one form per agency.
- The cover page must be signed by both the Executive Director and the volunteer Board Chair.
- Attach the Transmittal Letter following the application cover page. Specific directions for the Transmittal Letter are denoted at the bottom of the AC-1 form.

B. Program Budget Forms

- Complete and submit one set of program budget forms per program. This includes PB-1, PB-2, PB-3 and PB-4.
- Program name and number should be consistent with the cover page.
- Present entire sets of program budget forms consecutively for each program (*Program Summary Forms and Total Agency Budget Forms should be attached at the end of the completed application.*).

1. PB – 1: Program Budget Request Form

- “Prior Year Actual” and “Current Year Budget” should show amounts that were granted, not amounts requested from funding sources.
- Current funding requests are entered in the column for “Proposed Year Projected.”
- The change in dollar and percent is automatically calculated in the computerized version. Please calculate changes manually if using a paper copy. Please calculate the percent of total program budget in the far right-hand column represented by each line.
- At the bottom of the page, indicate what percent the program budget represents of the total agency budget for current and proposed years. Use total figures from the Total Agency Budget Form for calculation.
- Complete revenue and expense lines using the miscellaneous line for other types of revenue or expense not specifically listed.

2. PB – 2: Program Revenue and Beneficiaries by Localities

- Provide program revenue by locality. Please indicate each locality’s percentage of total locality revenue for this program in the far right-hand column (automatically calculates).
- Provide an unduplicated count of the program’s primary or direct beneficiaries. The primary or direct beneficiaries corresponds to the number of individuals receiving direct services from your organization. Do not include secondary or indirect beneficiaries in the total count. Please provide the percentage each locality represents of total Program Beneficiaries in the far right-hand column.

3. **PB – 3: Program Budget Explanation Form – Changes**

- Explain significant changes. If in doubt about the level of significance, explain it. Explain increases in budget revenues/expenditures when there is no projected increase in the numbers of persons to be served and, conversely, explain projected increases in service on a reduced budget. Also explain or identify large grants, gifts, or unexpected donations from other funding sources.
- Please explain the detail for all revenue and expenditure amounts classified as miscellaneous on Form PB-1.
- Please describe how your agency calculates or derives the local share amount requested on PB-1.

4. **PB – 4: Nelson County Program Budget**

- Please complete in the same manner as Form PB-1 except that only revenues and expenditures for the Nelson County program should be included. For example, if the agency as a whole receives \$1.7 million in federal funding, only include the portion of federal funding used specifically for the Nelson program on the Form PB-4. Likewise, do not include revenues on the Form PB-4 that are not also included on the Form PB-1
- Use the additional space at the bottom of the form to provide any additional information to clarify funding sources or expenditures for the Nelson County program. Please provide an explanation for any surplus/deficit.
- Estimates may be used to complete the “Prior Year Actual” column if your agency did not complete the PB-4 last year. However, the Nelson County contribution amount should be based on actual/approved amounts.

C. **PS – 1: Program Summary**

- Please show FY24 budget requests to localities for each program. The total for all programs should equal the total budget request submitted on form TB-2.
- The required local match should reflect the local match amount for Nelson County that is mandated by state or federal regulations and is included in the requested funding.
- Please indicate beneficiaries by program.
- Please show proposed expense budget by program for all programs in which funding is being requested. Program expenditures should equal those reported for each program on PB-1.

D. **Total Agency Budget Forms**

1. **TB – 1: Total Agency Revenue and Expense Report**

- “Prior Year Actual” and “Current Year Budget” should show amounts that were granted not amounts requested from funding sources.
- Current funding requests are entered in the column for “Proposed Year” projected.

- Complete revenue and expense lines using the miscellaneous line for other types of revenue or expense not specifically listed.
- Please explain the reason for any significant surplus or deficit on the lines provided at the bottom of the form.

2. **TB - 2 Total Agency Revenue and Beneficiary by Locality**

- Provide total agency revenue by locality. Please indicate each locality's percentage of total locality revenue to the agency in the far right-hand column (automatically calculates).
- Provide an unduplicated count of the agency's primary or direct beneficiaries by locality. The primary or direct beneficiaries correspond to the number of individuals receiving direct services. Please indicate each locality's percentage of total agency beneficiaries in the far right-hand column. Secondary or indirect beneficiaries should not be included in this count. If an individual receives services for more than one program, only count them once.